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**Kansas Department for Aging and Disability
Services (KDADS)
Home and Community Based Services (HCBS)**

**Preliminary Provider Self Assessment and
Attestation Report**

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Overview

The Center for Medicare and Medicaid Services, known as CMS, has made changes to its requirements for home and community based services. The new final rule requires states to evaluate their HCBS settings to meet the new rule's definition. The Center for Community Support and Research (CCSR) was contracted by KDADS and HCBS to conduct a Provider Self Assessment and Attestation Survey to evaluate their HCBS settings.

The new Final Rule affects all HCBS settings (residential and nonresidential) that are controlled, owned and operated by providers in which individuals receive home and community based services through the Autism, Frail Elderly, Intellectual and Developmental Disabilities, Physical Disability, Serious Emotional Disturbance, Traumatic Brain Injury, and Technology Assisted Programs.

KDADS has requested all providers who own, operate and control settings to complete one self-assessment/attestation survey for every setting type that they own, operate, and control. This information will assist KDADS to assess existing systems for compliance with the new final rule and determine the next steps for the onsite assessment plan.

The survey was designed so that it must be completed for each setting type individually (i.e., if you own, operate, or control more than one setting type, participants must take the survey for each one.) Each participant was given the same online link to take the survey as many times as needed.

Results

- As of 6/23/15, 297 surveys have been completed

Q1. Please select the type of facility:

Answer	Response	%
Residential services for adults with intellectual and developmental disabilities	104	42%
Day services for adults with intellectual and developmental disabilities	60	24%
Assisted living facility	32	13%
Shared Living/Host Homes/Extended Family Teaching Homes	10	4%
Group home	9	4%
Home plus facility	7	3%
Residential health care facility	6	2%
Nursing facility	4	2%
Community Mental Health Center	3	1%
Foster family home	2	1%
Intermediate care facility for individuals with developmental disabilities	2	1%
Residential care facility for persons with mental illness	2	1%
Adult day care facility	1	0%
Boarding care home	1	0%
Day care facility	1	0%
Foster Home/Adult Foster Home/Children's Residential/Respite Care	1	0%
Adult family home for persons with mental illness	0	0%
Maternity home	0	0%
Nursing facility for mental health	0	0%
Private Psychiatric Hospital (PPH)	0	0%
Psychiatric Residential Treatment Facility (PRTF)	0	0%
Residential center	0	0%
Substance Use Disorder (SUD) Treatment Facility	0	0%
Total	245	100%

- When asked the number of individuals receiving services in a selected setting type:
 - Range = 1 to 4,000
 - Average = 68
- When asked the total number of settings:
 - Range = 1 to 841
 - Average = 9

- When asked average number of individuals served in an individual setting:
 - Range = 1 to 4,000
 - Average = 34
- When asked fewest number of individuals served in this setting type:
 - Range = 1 to 4,000
 - Average = 31
- When asked highest number of individuals served in this setting type:
 - Range = 1 to 4,000
 - Average = 39

Q2. This organization serves the following home and community based services for the following population. (Check all that apply):

#	Answer	Response	%
1	Autism	29	9%
2	Frail Elderly	89	28%
3	Intellectual/ Developmental Disability	238	74%
4	Serious Emotional Disturbance	19	6%
5	Technology Assisted	16	5%
6	Traumatic Brain Injury	22	7%
8	Physical Disability	61	19%

Q3. Settings that ARE Home and Community-Based must be integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

Home and Community Based Settings must have the following characteristics (please check all boxes that apply): (n=297)

Answer	Response
Facilitates individual choice regarding services and supports, and who provides them.	289
Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	289
Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	290
Chosen by the individual from among setting options including non-disability specific settings (as well as an independent setting) and an option for a private unit in a residential setting. -Choice must be identified/included in the person-centered service plan -Choice must be based on the individual's needs, preferences, and, for residential settings, resources available for room and board.	297

Q4. For provider owned and controlled settings to be considered home and community-based settings, it must have these additional characteristics (please check all boxes that apply):

Answer	Response
Each individual has privacy in their sleeping or living unit: -Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors. - Individuals sharing units have a choice of roommates in that setting. -Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	228
Individuals are able to have visitors of their choosing at any time	247
Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.	252
The residential unit or location must be a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services -The individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. -If landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement for each HCBS participant that provides protections that address eviction processes and appeals comparable to those provided under the landlord tenant law.	223
The setting is physically accessible to the individual	260

Q5. Settings that have the following two characteristics alone might, but will not necessarily, meet the criteria for having the effect of isolating individuals:

Answer	Response	%
The setting is designed specifically for people with disabilities, and often even for people with a certain type of disability.	13	5%
The individuals in the setting are primarily or exclusively people with disabilities and on-site staff provides many services to them.	108	38%
Not applicable to this setting	164	58%
Total	285	100%

Q6. Settings that isolate people receiving HCBS from the broader community may have any of the following characteristics:

Answer	Response	%
Not applicable to this setting	227	80%
Settings that use/authorize interventions/restrictions that are used in institutional settings or are deemed unacceptable in Medicaid Institutional settings (e.g. restraints and seclusion)	2	1%
People have limited, if any, interaction with the broader community.	2	1%
Setting is designed to provide disabled individuals with multiple types of services and activities on-site, including housing, day services, medical, behavioral/therapeutic services, or social and recreational activities.	53	19%
Total	284	100%

Q7. Settings that are presumed to have the qualities of an institution:

Answer	Response	%
Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment.	14	5%
Any setting that is located in a building on the grounds of, or immediately adjacent to a public institution; or	8	3%
Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.	2	1%
Not Applicable to this setting	255	91%
Total	279	100%

Q8. For Settings that currently do not meet HCBS characteristics (as identified in this section), but may be able to or believe the setting will comply with the Rule, the provider may request heightened scrutiny for determination of compliance and submission of evidence of HCBS.

Answer	Response	%
Yes, Heightened Scrutiny is requested for this setting	26	10%
No, Heightened Scrutiny is not requested for this setting	233	90%

Q9. For settings that serve individuals who are receiving HCBS, the setting should have a person-centered service plan, and the following requirements must be documented in a person-centered service plan (such as a negotiated settlement agreement, person-centered support plan, individual behavior support plan, etc.):

Answer	Response	%
Identifies a specific and individualized assessed need.	275	100%
Documents the positive interventions and supports used prior to any modifications to the person-centered service plan.	260	95%
Documents less intrusive method that attempted to meet the need but didn't.	241	88%
Includes a clear description of the condition that is directly proportionate to the specific assessed need.	261	95%
Includes regular collection and review of data to measure the ongoing effectiveness of the modification.	253	92%
Includes established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.	255	93%
Includes the informed consent of the individual.	268	97%
Includes assurances that interventions/supports cause no harm to the person.	260	95%

Q10. I attest the following settings best described my organization.

Answer	Response	%
Licensed Adult Care Home	100	61%
Institution for mental disease	2	1%
Hospital	0	0%
Intermediate Care Facilities for Individuals with Intellectual Disabilities	62	38%
Total	164	100%

Q11. I attest the following best describes one or more types of settings in my organization:

Answer	Response	%
A setting located in a building on the grounds of, or immediately adjacent to, a public institution Intermediate Care Facilities for Individuals with Intellectual Disabilities	6	3%
A setting located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, Institution for mental disease	5	3%
A setting that is designed specifically for individuals with disabilities or a certain type of disability	24	13%
A setting that is limited to individuals receiving Medicaid HCBS services and is not part of the broader community of individuals not receiving Medicaid HCBS	9	5%
A setting that primarily or exclusively serves people with disabilities and on-site staff provides many services to them	146	77%
Total	190	100%

Q12. I attest the following best describes the characteristic of my organization. The setting is designed to provide people with disabilities multiple types of services and activities on-site, including housing, day services, medical, behavioral and therapeutic services, and/or social recreational activities.

Answer	Response	%
Yes	73	28%
No	107	41%
Partially, explain	81	31%
Total	261	100%

*Explanations of the partially comply responses will be included in the final report

Q13. I attest the following best describes the characteristic of my organization.

Answer	Response	%
This setting DOES use/authorize interventions/restrictions that may be viewed as interventions used in institutional settings or are deemed unacceptable in Medicaid institutional settings (e.g. seclusion).	3	1%
This setting DOES NOT use/authorize interventions/restrictions that may be viewed as interventions used in institutional settings or are deemed unacceptable in Medicaid institutional settings (e.g. seclusion).	255	99%
Total	258	100%

Q.14 Attestation Questions

Please state your level of compliance with the following...	Fully Comply	Partially Comply	Do Not Comply	N/A
I attest the setting ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint.	93%	4%	0	3%
I attest the setting optimizes individual initiative, autonomy, and independence in making life choices.	92%	5%	0	3%
I attest the setting facilitates individual choice regarding services and supports, and who provides them.	92%	6%	0	2%
I attest the setting provides opportunities to seek employment and work in competitive integrated settings.	60%	12%	0	27%
I attest the setting is integrated and supports access to the greater community.	92%	5%	0	4%
I attest the setting provides opportunities to engage in community life.	93%	3%	0	4%
I attest the setting provides opportunities to control personal resources.	77%	14%	1%	8%
I attest the setting provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	93%	4%	0	3%
I attest the setting is selected by the individual from among options including non-disability specific settings and a private unit in a residential setting.	78%	7%	0	15%
I attest if provider-owned or controlled, the setting provides a specific unit/dwelling that is owned, rented, or occupied under a legally enforceable agreement.	58%	5%	0	36%
If provider-owned or controlled, the setting provides the same responsibilities/protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity.	54%	6%	1%	40%
I attest if the setting is provider-owned or controlled and the tenant laws do not apply, the state ensures that a lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.	43%	4%	1%	52%
I attest if provider-owned or controlled, the setting provides that each individual has privacy in his or her sleeping or living unit.	0	60%	36%	4%
I attest if provider-owned or controlled, the setting provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	61%	4%	1%	34%
If provider-owned or controlled, the setting provides individuals who are sharing units with a choice of roommates.	38%	7%	0	55%

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If provider-owned or controlled, the setting provides individuals with the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	62%	2%	0	36%
If provider-owned or controlled, the setting provides individuals with the freedom and support to control their schedules and have access to food any time	62%	13%	0	25%
I attest if provider-owned or controlled, the setting allows individuals to have visitors at any time.	68%	7%	0	25%
I attest if provider-owned or controlled, the setting is physically accessible to the individual.	77%	2%	0	21%

*Explanations of the partially comply responses will be included in the final report