Quality of Services Review Supplemental Guide

The Missouri Quality Outcomes, CMS guidelines and Code of State Regulations (CSR) are the basis for the Quality Review guide. The guide serves as a tool to obtain input from individuals receiving DMH-DD waiver services. Individuals with disabilities want to have productive and meaningful lives and be full members of their communities like any other citizen.

The QE Review process allows us to spend time with an individual to observe various activities during their day. The time spent with the individual gives us a snapshot of the types of activities she is involved in and the opportunity to compare these as they relate to the CMS guidelines, Code of State Regulations and Missouri Division of Developmental Disabilities Quality Outcomes. This process is designed to:

1. Provide an opportunity to assess the quality of support services the person is receiving.
2. Offer a way of gathering information through observations, record review, and interviews with individuals receiving services, guardians, their families and support staff on the quality of supports.
3. Identify support services strengths, as well as areas in need of enhancement. This information can then be utilized in quality improvement planning and person centered planning to enhance the quality of life for the person supported.
4. Develop training and technical assistance resources, ensuring continued efforts in supporting persons with disabilities to have improved quality of life.

SURVEY PROCESS

The visit will be completed with individuals receiving services that are funded through the Medicaid Waiver; FY18 will focus on adults (>18) with an open episode of care and at least one authorized service.

There are four sections to this tool:

Section I: “Demographics” is to be completed by the reviewer. The information obtained in this section is important to the process. The information assists to identify the characteristics of the participants as well as assist the reviewer with identifying an individual’s ability to achieve defined quality of life outcomes.

Section II: “Outcomes” are broken down into eight sections and each section outlines a specific Missouri Quality Outcome. “Outcomes” are to be completed by the reviewer through observation which, if possible, should take place while the individual is receiving services. Observation notes should only include what was actually observed and be factual.

Within each of the eight outcomes, there is a Summary of Outcome/Evidence to Support Conclusion to document positive findings as well as any issues/concerns identified. Issues will be referred to the appropriate entities. The reviewer will follow up on the Findings Requiring Immediate Action and Findings Which the Team Must Respond to ensure each one has been addressed. If immediate concerns are noted relating to individual health or safety, the Service Coordinator and applicable Regional Office should be immediately notified by the reviewer.

Note: All questions may not be applicable toward all services provided.

Section III: Individual General Comments (including feedback about the survey process)

Section IV: Reviewer Comments

Note: Quality Of Service Review Tracker
Section I Demographics (CIMOR Face Sheet and EOC Summary)
CIMOR Reports --&gt; DD Providers --&gt; Consumer Face Sheet EOC Summary 2015

<table>
<thead>
<tr>
<th>Individual Name:</th>
<th>Survey Date:</th>
<th>Reviewer Name:</th>
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1. **TCM Entity:**

2. **What form(s) of communication does the individual use (check all that apply)?**
   - [ ] Verbal
   - [ ] Written
   - [ ] use pictures
   - [ ] sign language/gestures
   - [ ] adaptive equipment
   - [ ] Other (please list)

3. **What is/are their preferred method(s)?**
   - [ ] Verbal
   - [ ] Written
   - [ ] use pictures
   - [ ] sign language/gestures
   - [ ] adaptive equipment
   - [ ] Other (please list)

4. **Sites Visited:**

5. **Persons who provided input:**

6. **Prior to the review the following are examined:**
   - ISP
   - APTS
   - EMT
   - HIPS/Nursing Review
   - Due Process
   - LOC

   1. **Threshold Reports**
   2. **Quarterly Summaries**
   3. **BRT Log Notes**
   4. **Lease Agreement**

   (Does the written agreement include language that provides protections to address eviction processes and appeals comparable to those provided under the jurisdiction’s landlord tenant laws?)

   1. **Trends noted from review of documents and data:**
   2. **General comments:**

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**Section II Outcomes**

- **HCBS Rule [https://www.medicaid.gov/medicaid/hcbs/](https://www.medicaid.gov/medicaid/hcbs/)**
  - Nature and Quality of Individuals Experiences
  - Access to benefit from community experiences
  - Informed Consent and Choice
  - Participant Survey [http://dmh.mo.gov/dd/docs/hcbsparticipantsurvey.pdf](http://dmh.mo.gov/dd/docs/hcbsparticipantsurvey.pdf)
- **Missouri Quality Outcomes** [http://dmh.mo.gov/dd/docs/missouriqualityoutcomespowerpoint.pdf](http://dmh.mo.gov/dd/docs/missouriqualityoutcomespowerpoint.pdf)
  - People Participate in Meaningful Daily Activities of Their Choice
  - People Live in Communities They Choose, With Whom They Choose and in Homes and Environments Designed to Meet Their Needs
  - People Are Active Members of Their Communities While Determining Valued Roles and Relationships through Self-Determination
  - People Are Able to Choose Health/Mental Health Resources and Are Supported in Making Informed Decisions regarding their Health and Well-Being
  - People are Educated and Knowledgeable of Their Rights and Use Strategies/ Practices to Promote their Safety and Security
  - People Have Opportunities to Advocate for Themselves, Others and Causes they Believe In, including personal goals and dreams
  - Families are provided with knowledge that empowers them to facilitate opportunities for the individual’s self-determination throughout the course of her life
- **National Core Indicators** [http://www.nationalcoreindicators.org/indicators/](http://www.nationalcoreindicators.org/indicators/)
  - Employment, choice, relationships, case management, inclusion, health
- **9 CSR 45-5.010 Certification of Medicaid Agencies Serving Persons with Developmental Disabilities (Chapter 5)**
  - Community Membership
  - Self Determination
  - Rights
  - Meeting Basic Needs
- **Division priorities** [http://dmh.mo.gov/dd/](http://dmh.mo.gov/dd/)
  - fostering self-determination
  - supporting families
  - facilitating individualized services and supports ([http://dmh.mo.gov/dd/manuals/docs/ispguidenew.pdf](http://dmh.mo.gov/dd/manuals/docs/ispguidenew.pdf))
  - promoting employment first
  - developing accessible housing
**Outcome #1 Social Spirituality:** People are active members of their community while determining valued roles and relationships through self-determination.

- This outcome is about presence and participation in the community, based on interests determined by the individual. Individuals are integrated into their community, including community service, in the same ways as neighbors and fellow community members. Individuals have natural supports in their lives and relationships that are not based on their disabilities.

**CMS:** The setting is integrated in and supports full access to the greater community and engagement in community life. (42 C.F.R § 441.301(c)(4)(i))
  - Individuals receive services in the community to the same degree of access as people not receiving Medicaid services

**Resources:** self-determination and supporting families; A Guide for Individuals with Developmental Disabilities to Understanding Rights and Responsibilities; Individual Rights of Persons Receiving Services; Social capital: The real route to inclusion (https://ici.umn.edu/products/Frontline_Initiative/FL_12_1.pdf); Building Inclusion Through Social Capital (http://macdds.org/pdfs/meaningful%20Inclusion%20-%20Carl%20Calkins.pdf); MO DMH-DD Foster Self-determination http://dmh.mo.gov/dd/advocacyspecialists.html; Missouri Developmental Disabilities Council (MDDC); Governor's Council on Disability

**Observation:**

1. The individual visits and shops at local retail and / or grocery stores (Do you shop where you want?)
   - a. Receipts
   - b. Shopping bags
   - c. Shopping list
2. Roles
   - a. Involvement/member community organizations/employee/student (social roles)
   - b. Family (sibling, daughter/son, aunt, uncle, cousin, etc.)
3. Documentation of activities involved in
4. Activity calendar
5. Certificates / trophies / medals
6. Involvement in cultural activities (traditions, rituals, language, music, religion)
7. Are public transportation schedules and telephone numbers posted in a convenient location?
8. Are there bus stops or taxis available? If not, are other resources provided such as natural supports?
9. Is a vehicle/accessible van available to transport to appointments and shopping?
10. Is training in the use of public transportation offered? Does the individual know how to use public transportation if it is available in the area?
    - a. If not, does she want to know how to use public transportation?
11. Do you go to a church (religious services) where you want?
12. Do you go out with family members when you want?
13. Do you go out with friends when you want?
14. Do you come and go when you want?
15. Does the individual go out in the community for fun?
16. Does the individual know about activities in the community?
    - a. If not, do you know how to find out about activities in your community?
17. Does the residential setting include people who do not have disabilities?
18. Does the setting afford opportunities for individuals to have knowledge of or access to information regarding age-appropriate activities outside of the setting?
19. Does someone assist the individual in accessing activities in the community?
20. Are the activities the individual participates in, of their choice and reflect their likes, preferences?
21. Do the activities the individual participates in include family and friends if they choose?
22. Is the setting in the community/building located among other private businesses, retail businesses, etc. that facilitates integration with the greater community?
23. Does the setting allow individuals the freedom to move about inside and outside of the setting as opposed to one restricted room or area within the setting?
24. Is the individual able to come and go in the integrated community at any time they choose?
25. Is the setting in the community located among other residences that facilitate integration with the greater community?
26. Do the setting options offered include non-disability-specific settings in an integrated public setting?
27. Is the setting designed specifically for people with disabilities?
28. Does the individual receive the majority of their services by on-site staff?
29. Does the setting encourage interaction with the public?
30. Does the individual access recreational activities in the community?
31. Is the setting in the community among other private residences, retail businesses?

Staff:
1. How does the staff get individuals involved in their neighborhood?
2. How does staff get individuals actively involved in activities?
3. How does the staff support individuals to be involved in their community?
4. How does staff think the person is perceived in the community?
5. What does the individual enjoy most about the local stores?
6. Are staff aware of the individual’s interests?

Summary of Outcome 1/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):

**Outcome #2 Daily Life**: People participate in meaningful daily activities of their choice.

- This outcome is designed to support individuals to make informed choices and encourage self-determination in pursuing daily activities of their choice while exploring the full range of options; including employment, volunteering, use of free time and participating in activities of their choice. Outcomes/Supports should be individualized to assist in achieving maximum potential.

**CMS**: The setting optimizes autonomy and independence in making life choices including but not limited to (42 C.F.R § 441.301(c)(4)(iv)):

- daily activities
- physical environment
- with whom to interact
- The setting facilitates choice regarding services and who provides them (42 C.F.R § 441.301(c)(4)(v))
- Opportunity to seek employment and work in competitive integrated setting (42 C.F.R § 441.301(c)(4)(i))
- Control personal resources (42 C.F.R § 441.301(c)(4)(i))
Observation:
1. What choices/decisions did the individual make during the visit?
2. What opportunities did staff provide for the individual to make choices/decisions?
3. Activities calendar
4. Documentation
5. Pictures
6. Pay check stubs
7. Appointment scheduled before or after work/volunteer hours
8. During general conversation, what is the person’s demeanor and facial expressions when discussing work/volunteering?
9. Does the individual like where she lives?
10. Does the individual like the services she receives?
11. Does the individual like the people that help him/her?
   a. If not, do you know how to ask for new help?
12. Do staff know what you like?
13. Does the setting allow individuals the freedom to move about inside and outside of the setting as opposed to one restricted room or area within the setting?
14. Does the individual have a checking or savings account or other means to control their money?
15. Does the individual have access to their money (get personal spending money when wanted)?
16. Does the individual control their paycheck (if applicable)?
   a. Do you have to sign your paycheck over to anyone?
17. Can the individual determine their own activities for the day?
18. Is the individual limited to a choice of daily activities?
19. Can the individual choose when to engage in their activities for the day?
20. Is the individual knowledgeable of other providers who provide the services they receive?
21. Was the individual given a choice of available options regarding providers/services?
22. Was the individual given a choice of available options regarding where to live?
   a. Did the individual pick where she lives?
23. Was the individual given opportunities to visit other settings?
24. Does the individual know how and to whom to make a request for a new provider?
25. Is the individual provided choice regarding what staff provides services and supports?
26. Are individuals aware of how to make a service request?
27. Does the individual choose and control their daily schedule?
28. Does the individual express satisfaction with the services being received?
29. Are requests for services and supports accommodated as opposed to ignored or denied?
30. Is individual choice facilitated in a manner that leaves the individual feeling empowered to make decisions?
31. Is the individual provided the opportunity to complete tasks/chores on her own to promote higher levels of independence?
32. Does the individual have the opportunity to observe and explore careers and community activities?
33. Does the individual know she can have earned income from employment and still receive supports you need?
34. Does the individual need support with making choices with becoming an active member of the community for both employment and non-work activities?
35. Does the individual know the employers and types of jobs available in the local community?
36. Does the individual know the activities, organizations and leisure programs available in the local community?
37. Does the individual need support with getting to and from non-work and work activities in the community?
38. If the individual are over the age of 16, does she need support with completing applications, resumes, job interviews and/or contacting potential employers?
39. Is where the individual spends her day integrated in and supports full access to the greater community and engagement in community life?
   a. Do the setting options offered include non-disability-specific settings such as competitive employment in an integrated public setting?
   b. Does the individual participate regularly in meaningful non-work activities in integrated community settings for the period of time desired by the individual?
   c. Does the individual choose who participates in meaningful non-work activities in the community with them?
40. Does the individual work, or spend the day with people who do not have disabilities?
   a. If she does not have a job, does she want a job?
      i. If yes, is someone helping him/her to get a job?
41. Does the individual spend the day doing activities similar to others her age?
42. Does the individual want to learn a new skill to stay busy or earn money in retirement?

Questions for Individuals Currently Employed
43. Is the career planning/employment activity the individual is currently participating in her choice; and reflect her preference and abilities?
44. Does the individual work at a community-based business?
45. Does the individual have co-workers without disabilities that do the same, or similar, work? Are these co-workers paid similar wages?
46. Does the person like her current job?
   **If the work site is in a segregated setting**
47. What current barriers exist to community employment?
48. What supports does the individual need assistance with in obtaining employment in a competitive and integrated setting?

For Individuals Reaching Retirement Age
49. Does the individual want to learn a new skill to keep her busy or earn money in retirement?
50. Are there classes the individual is interested in attending?

**Staff:**
1. How does the individual determine / prioritize daily activities to ensure all individuals choices are listened to and respected?

**Summary of Outcome 2/ Evidence to Support Conclusion** (How was it determined the outcome is or is not present?):

**Positive Findings:**

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):
# Outcome #3 Healthy Living: People are able to access health/mental health resources of their choice and are supported to make informed decisions regarding their health and well-being.

- This outcome emphasizes the individual’s right to receive physical, emotional and mental health care from the practitioner of their choice. Individuals receive information and education on ways to maintain their health and well-being. Individuals are supported in making healthy choices.

**CMS:** Service planning process is conducted to ensure the health and welfare of individuals; person-centered planning process (42 C.F.R. § 441.301 (c)(1) and (2) 42 C.F.R. § 441.301 (c)(2)(ix))

**NCI Instrument Sections:** Background, I and II


**Observation:**
1. Regular medical appointments (calendar)
2. Awareness of lab results / follow up on labs
3. Individual took medication during the visit
4. Self-administration (support to do as much as possible)
5. What did the person have for meals and snacks?
6. Menus
7. Documentation
8. Visible food
9. Appearance of individual
10. Physical activity during visit (staff exercising with person)
11. Exercise equipment
12. Calendar / schedule
13. Trophies
14. Membership cards
15. Pictures
17. Does the individual access medical, behavioral and/or therapy services in the community?
18. Is the individual learning about changes in their body as they age?
19. Does the individual need support to learn about end of life planning, benefits, or health care?

**Staff:**
1. How does staff determine when someone needs to see the doctor and/or needs emergency medical treatment?
2. How does staff handle the situation when the doctor speaks to staff instead of the individual regarding health care?
3. What is the follow up from physician consults, i.e., labs, return visits, blood work, diagnostic tests, etc.?
4. How is staff involved in supporting individuals who have a diet?
5. How does staff recognize an individual is in pain?

**Summary of Outcome 3/ Evidence to Support Conclusion** (How was it determined the outcome is or is not present?):

**Positive Findings:**

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):
Outcome #4 Safety & Security: People are educated and knowledgeable of their rights and exercise practices to promote and ensure their safety and security.

- This outcome emphasizes individuals living free from harm, being educated about their rights and living in healthy environments where safety and security are a high priority, while supporting the individual’s rights to live independently, make personal choices and take some risks.

CMS: The setting ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint. (42 C.F.R § 441.301(c)(4)(iii))

- For settings considered provider owned or controlled, the individual has a lease or other legally enforceable agreement. The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and 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. (42 C.F.R § 441.301(c)(4)(vi)(A))

- The individual has privacy in her sleeping or living unit. (42 C.F.R § 441.301(c)(4)(vi)(B))
  - 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; and
  - Individuals have the freedom to furnish and decorate their sleeping or living units within their lease or other agreements.

NCI Instrument Sections: Background, I and II


Observation:
1. If the individual needs assistance with grooming, groomed as desired?
   - Are nails trimmed and clean?
2. Is the individual dressed in clothes that fit, are clean and are appropriate for the time of day, weather, and preference?
3. Interaction and conversation between the individual and staff.
   - Do individuals greet and chat with staff?
   - Do staff converse while providing assistance and during the regular course of daily activities?
   - Does staff talk to other staff about individuals as if they were not present?
   - Does staff address individuals in the manner in which the person would like to be addressed (not “hon” or “sweetie”)?
4. Person exerts her rights during the visit.
5. Have a copy of rights brochure.
6. Abuse and neglect: If an incident was reported did that person help you?
7. Rules are posted.
8. Privacy
   - Can the individual close and lock the bedroom door?
   - Can the individual close and lock the bathroom door?
   - Do staff and other residents always knock and receive permission prior to entering a bedroom, bathroom or living space?
   - Are cameras present in the setting?
   - Is the telephone or other technology device in a location that has space around it to ensure privacy?
     - Does the individual have a cell phone, computer or other personal communication device or have access to a telephone or other technology device to use for personal communication in private at any time? Do individuals’ rooms have a telephone jack, Wi-Fi or Ethernet jack?
   - Does someone else open your mail?
9. Is the furniture arranged as individuals prefer and does the arrangement assure privacy and comfort?
10. Does staff only use a key to enter a living area or privacy space under limited circumstances agreed upon with the individual?
11. Is health information kept private?
12. Are schedules of individuals for health appointments, PT, OT, medications, restricted diet, etc., posted in a general open area for all to view?
13. Written material utilized by the individual.
14. ISP budget: needs are being met based on services received
15. Does staff communicate with individuals in the setting while providing assistance and during the regular course of daily activities?
16. Does the individual have a lease or, for settings in which landlord tenant laws do not apply, a written residency agreement?
17. Does the individual know her rights regarding housing and when she could be required to relocate?
18. Do individuals know how to relocate and request new housing?
19. Is assistance provided in private, as appropriate, when needed?
20. Do you know how to ask for something you need?
   a. Have you been told that you could not have something you asked for?
21. Does the individual feel comfortable in accessing the local community?

Staff:
1. What would staff do if an individual was not being treated with dignity and respect?
2. What does staff do if the individual encountered someone who was speaking to the person in a disrespectful manner?
3. What does staff know about individual rights?
4. Has staff described rules staff have to follow when supporting individuals?
5. Does staff have policies and procedures they have to follow for individuals?

Summary of Outcome 4/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):

Outcome #5 Citizenship & Advocacy: People Have Opportunities to Advocate for Themselves, Others and Causes They Believe In, including Personal Goals and Dreams  [Communication is understood.]

- This outcome emphasizes the importance of self-advocacy. Training and ongoing support often time requires to assist an individual in developing their self-advocacy skills.

CMS: Individuals have the freedom and support to control their own schedule and activities and have access to food at any time.  (42 C.F.R § 441.301(c)(4)(vi)(C))

NCI Instrument Sections: I and II

Observation:
1. Calendar
2. Daily activities
3. Certificates / trophies / collections / pictures
4. Lifebooks [http://mo-sda.org/lifebooks](http://mo-sda.org/lifebooks)
5. Dining area affords dignity to the diners (individuals are not required to wear bibs or use disposable cutlery, plates and cups).
6. Individuals are not required to sit at an assigned seat in a dining area.
7. Individual converses with others during meal times.
8. Individual may request a different meal if desired.
9. Snacks are available anytime.
10. Individual may eat anywhere, even privately, if so desired.
11. Due Process document
12. Brochures
13. Locks
14. Complaints
   a. Is the individual comfortable discussing concerns?
   b. Is the individual aware of the process for making an anonymous complaint?
   c. Did the individual know the person to contact to make a complaint?
   d. Can she file an anonymous complaint?
15. Interaction between staff and individual
16. Staff understands individual’s form of communication and a response is received.
17. Information about filing a complaint is posted in an obvious location and in an understandable format.
18. The individual can see family and friends when she wants to; visit people who are important to them.
19. The individual can watch TV, listen to the radio, or do other things when she wants to.
20. The individual has a choice of what to do during her free time.
21. The individual is satisfied with how she spends free time.
22. Who decides the individual’s daily schedule (when to get up, when and where to eat, when to sleep)?
   a. Do you get to take a bath/shower when you want?
   b. Do you get to exercise when you want?
   c. Do you get to do laundry when you want?
   d. Do you get up when you want?
23. Does everyone in your home have to do things together?

Staff:
1. How do staff help dreams / goals become a reality?
2. What are some ways in which staff has had to advocate for individuals?
3. Are staff aware of individuals participating in a self-advocacy group?
4. Are individuals an active participant in the development of their individualized support plan?
5. Are individuals able to access food at any time?
6. When there is a rights restriction, does the individual and staff understand why it is in place?

Summary of Outcome 5/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):
**Outcome #6 Community Living:** People live in communities they choose, with whom they choose and in homes and environments designed to meet their needs.

- This outcome emphasizes individuals being leaders in selecting the community and home of their choice. The home is designed to meet the individual’s unique needs. Individuals actively choose who they live with and where.

**CMS:**
- The individual can have visitors of her choosing at any time (42 C.F.R § 41.301(c)(4)(vi)(D))
- The setting is physically accessible to the individual (42 C.F.R § 441.301(c)(4)(vi)(E))
- The setting is selected by the individual from among setting options including (are identified and documented in the person centered service plan): (42 C.F.R § 441.301(c)(4)(ii))
  - Non-disability specific settings
  - Option for a private unit in a residential setting
  - Based on the individual’s needs and preferences and for residential settings resources available for room and board

**Resources:** A Guide for Individuals with Developmental Disabilities to Understanding Rights and Responsibilities; “It's My Home!”: A Guide for Individuals and Families to Understand the Division of Developmental Disabilities

**Housing Initiative; Individual Rights of Persons Receiving Services; Assistive Technology** [http://at.mo.gov/]; [Missouri Assistive Technology (MAT): Local Community Resources](http://at.mo.gov/); [Housemate Match Tracking Report](http://at.mo.gov/); [Community Living and Accessible Housing](http://at.mo.gov/); [Community Living Coordinator Brochure](http://at.mo.gov/); [Missouri Inclusive Housing Development Corporation](http://at.mo.gov/)

**Observation:**

1. Are there gates, Velcro strips, locked doors or other barriers preventing access to certain areas?
2. Is the individual able to access the same areas as others, i.e., pool or gym?
3. Is the setting physically accessible?
4. Are appropriate supports provided (grab bars, ramps, exits)?
5. Are appliances accessible?
6. Are tables and chairs at a convenient height and location so the individual can access and use comfortably?
7. Does the individual have full access throughout the home?
8. Are visiting hours posted?
9. Is there evidence visitors have been present at regular frequencies? Does the individual have visitors?
10. Are there restricted visitor’s meeting areas or specified visiting hours?
11. Is the furniture arranged to her preference and to assure privacy and comfort?
12. Do the furniture, linens, household items and living areas reflect the individual’s interests and hobbies?
13. Is furniture arranged to support small group conversations?
14. Are personal items (pictures, books, and memorabilia) present?
15. Pet in the home / rules about no pets posted?
16. Individual talks about roommates in a positive manner?
17. Individual expresses a desire to remain in a room with roommate?
18. Individual is aware of how to request a roommate change.
19. Safety
   - a. Body language
   - b. Interaction with others
   - c. Moving about home freely
   - d. Walking around neighborhood freely
   - e. Activities in town
20. Individual fixed something during visit (changed a light bulb, put a battery in smoke detector, etc.) / tools available?
21. Does the individual receive services in the same area as individuals not receiving services?
22. Is the setting in the community among other private residences and retail businesses?
23. Do individuals on the street greet/acknowledge the individual?
24. Was the individual given a choice of available options regarding where to live/receive services?
25. Was the individual given opportunities to visit other settings?
26. Was the individual given a choice of a roommate?
27. Does the individual talk about her roommate(s) in a positive manner / like roommate?
28. Does the individual want to stay with her current roommate?
29. Do married couples share or not share a room by choice?
30. Does the individual know how she can request a roommate change?

Staff:
1. How does staff help support individuals with developing relationships (for example, getting to know neighbors, connecting with people in the community, etc.)

Summary of Outcome 6/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):

Outcome #7 Supports to Families: Families are Provided With Knowledge That Empowers Them to Facilitate Opportunities for the Individual’s Self-Determination Throughout the Course of His or Her Life.

- This outcome focuses on information presented to family members to educate them in the process of self-determination. Families provide support and insight that will assist their family member in leading a self-determined life including making choices, setting goals, assuming responsibility, and driving how one’s own life is lived. Families are integral in the development of a person’s independent and interdependent capacities.

NCI Instrument Questions: N/A

Resources: self-determination and supporting families; A Guide for Individuals with Developmental Disabilities to Understanding Rights and Responsibilities; Individual Rights of Persons Receiving Services

Observation:
1. Pictures
2. Phone calls
3. Emails
4. Roles of individual (sibling, daughter/son, aunt, uncle, cousin, employee, student, etc.)

Staff: ------

Family caregivers:
1. Has care giving had an effect on caregiver’s health?
2. Does caregiver feel stressed and/or overwhelmed?
3. Has care giving had an effect on caregiver’s employment?
4. Are there certain skills/knowledge/abilities the caregiver would like to obtain? If so, what?
5. Are there back up supports in case the caregiver is unable to provide the care (ex. vacation, family emergency)?
6. Are their additional services or supports which would be helpful to the caregiver? If so, what?

Summary of Outcome 7/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):
### Outcome #8 Service Plan

- Developed through a person-centered planning process directed by the individual and may include a representative that the individual has freely chosen and others chosen by the individual to contribute to the process
  - Person-centered service plan will assist the individual in achieving personally defined outcomes in the most integrated community setting, ensure delivery of services in a manner that reflects personal preferences and choices, and contribute to the assurance of health and welfare
- Minimum requirements for person-centered plans
  - Addresses health and long-term services and support needs in a manner that reflects individual preferences and goals
  - Individually identified goals and preferences including those related to:
    - Community participation
    - Employment
    - Income and savings
    - Health care and wellness
    - Education
    - Others
  - Reflect the services and supports (paid and unpaid) and who provides them
  - Whether an individual chooses to self-direct services

**CMS:** The services authorized in the individual's plan are based upon observation, conversation with the individual, assessed need (evidence of a current assessment) and individual choice and that the services provided to the individual have met the identified need for the individual. For example, the current services provided are to be consistent with what the individual has identified as needed.

- The setting options are identified and documented in the person–centered service plan and are based on the individual’s needs, preferences, and, for residential settings, resources available for room and board. (42 C.F.R § 441.301(c)(4)(ii))
- Any modification of the additional conditions, the setting options identified for an individual are supported by an assessed need and documented in the person-centered service plan based on the individual’s needs and preferences. (42 CFR § 41.301(c)(4)(vi)(F))

<table>
<thead>
<tr>
<th>NCI Instrument Sections: Background, I and II</th>
</tr>
</thead>
</table>


**Observation:**

1. Has the individual worked on any meaningful personal goals / dreams?
2. Is it evident what is important to the person is reflected in the ISP?
3. Does the individual feel the current person-centered plan is accurate?
4. Are the services described in the plan meeting the person’s needs?
5. Does staff ask the individual about her/his needs and preferences?
6. Is the individual/chosen representative(s) aware of how to schedule person-centered planning meetings?
7. Can the individual explain the process to develop and update their plan?
8. Was the individual present during their last planning meeting?
9. Did the last planning meeting occur at a time and place convenient for the individual to attend and of their choice?
10. Does the setting reflect the individual’s needs and preferences?

**ISP Document**

1. Does the current service plan indicate modifications to support the individual?
2. Are less intrusive methods of meeting the need that were tried initially documented?
3. Does the plan include a description of the condition that is directly proportional to the assessed need, data to support ongoing effectiveness of the intervention, time limits for periodic reviews to determine the ongoing necessity of the modification, informed individual consent, and assurance that the intervention will not cause the individual harm?
4. Does the individual’s person-centered service plan document the individual’s resources were considered when given options for residential room and board?
5. Does the individual’s person-centered service plan document how and what housing resources (e.g., vouchers and other rental assistance options) have been explored?
6. Does the individual’s person-centered service plan document the individual was given the information necessary to make an informed choice regarding housing options?
7. Does the current person-centered service plan note any necessary modifications to include a behavior support plan (BSP) if indicated?

8. If there are limitations and/or restrictions is there documentation to support that the plan was reviewed by the Due Process Review Committee and the team received feedback from the committee?
   a. Is there documentation to note if positive interventions and supports were used prior to any plan modifications?
   b. Are less intrusive methods of meeting the need that were tried initially documented?
   c. Does the current plan include a description of the condition that is directly proportional to the assessed need?
   d. Is there data to support ongoing effectiveness of the intervention?
   e. Are there time limits for periodic reviews to determine the ongoing necessity of the modification?
   f. Is there documentation of informed individual consent?
   g. Is there documentation to note the assurances that the intervention will not cause individual harm?

Are the individual’s preferences in the following areas of the plan?
   a. Health care and wellness
   b. Support needs
   c. Community participation
   d. Employment
   e. In
   f. come and savings
   g. Education
   h. Self-directed services
   i. Meaningful goals
   j. Likes/dislikes
   k. BSP
   l. Other

Staff: -------

Summary of Outcome 8/ Evidence to Support Conclusion (How was it determined the outcome is or is not present?):

Positive Findings:

Findings requiring immediate notification (please number each finding):

Findings to which the team must respond (please number each finding):

Additional comments/enhancements for consideration (please number each finding):

Section III: Individual General Comments (including feedback about the survey process)

General Comments:

Section IV: Reviewer Comments

General Comments:

MO Division of Developmental Disabilities Publications for Resources: http://dmh.mo.gov/dd/manuals/
Quality of Services Review

Note: For “no” responses consider asking about barriers.

### Outcome #1 Social Spirituality: People are active members of their community while determining valued roles and relationships through self-determination.
**CMS:** The setting is integrated in and supports full access to the greater community and engagement in community life. (42 C.F.R § 441.301(c)(4)(ii))
- Individuals receive services in the community to the same degree of access as people not receiving Medicaid services

<table>
<thead>
<tr>
<th>1. Shopping at local retail and/or grocery stores</th>
<th>2. Community involvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Attend or not attend religious / spiritual services</td>
<td>4. Neighborhood involvement</td>
</tr>
<tr>
<td>5. Anything individual wants to do outside her home</td>
<td>6. Available transportation (taxi, bus, friend, family, etc.)</td>
</tr>
<tr>
<td>7. Daily activities including evening hours</td>
<td></td>
</tr>
</tbody>
</table>

### Outcome #2 Daily Life: People participate in meaningful daily activities of their choice. **CMS:** The setting optimizes autonomy and independence in making life choices including but not limited to (42 C.F.R § 441.301(c)(4)(iv)): 1.) daily activities 2.) physical environment 3.) with whom to interact
- The setting facilitates choice regarding services and who provides them (42 C.F.R § 441.301(c)(4)(v))
- Opportunity to seek employment and work in competitive integrated setting (42 C.F.R § 441.301(c)(4)(i))
- Control personal resources (42 C.F.R § 441.301(c)(4)(i))

<table>
<thead>
<tr>
<th>1. Provider, services and supports choice (process for new provider, aware of other providers; informed choice)</th>
<th>2. Develop/participate in planning &amp; scheduling of daily activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Staff selection (choice, making changes)</td>
<td>4. Empowered to make choices and decisions</td>
</tr>
<tr>
<td>5. Satisfied with services (aware of how to change services)</td>
<td>6. Family activities participation</td>
</tr>
<tr>
<td>7. Work and/or volunteer (choice; how long; enjoy it)</td>
<td>8. Would the individual like to work? (competitive emp.)</td>
</tr>
<tr>
<td>9. Have access to money; able to keep money</td>
<td></td>
</tr>
</tbody>
</table>

### Outcome #3 Healthy Living: People are able to access health/mental health resources of their choice and are supported to make informed decisions regarding their health and well-being.
**CMS:** Service planning process is conducted to ensure the health and welfare of individuals; person-centered planning process (42 C.F.R. § 441.301 (c)(1) and (2) 42 C.F.R. § 441.301 (c)(2)(ix))

<table>
<thead>
<tr>
<th>1. Take medications and knows why &amp; side effects (self-administration; support to do as much as possible)</th>
<th>2. Healthcare provider discusses preventive measures (choice)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Choose her doctor</td>
<td>4. Physical activity participation and choice</td>
</tr>
<tr>
<td>5. Able to see her doctor when she feels the need to</td>
<td>6. Access to important past family medical information</td>
</tr>
<tr>
<td>7. Individual doctor talks to the individual</td>
<td>8. Sleep without noises or other disturbances</td>
</tr>
<tr>
<td>9. Health care needs met</td>
<td>10. Individual appear to be in pain</td>
</tr>
<tr>
<td>11. Specific diet recommended by healthcare provider (food choices; agree with diet)</td>
<td>12. How satisfied is the individual with her life today</td>
</tr>
</tbody>
</table>

### Outcome #4 Safety & Security: People are educated and knowledgeable of their rights and exercise practices to promote and ensure their safety and security.
**CMS:** The setting ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint. (42 C.F.R § 441.301(c)(4)(iii))
- For settings considered provider owned or controlled, the individual has a lease or other legally enforceable agreement. The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and 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. (42 C.F.R § 441.301(c)(4)(v)(A))
- The individual has privacy in her sleeping or living unit. (42 C.F.R § 441.301(c)(4)(v)(B))
  - 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; and
  - Individuals have the freedom to furnish and decorate their sleeping or living units within their lease or other agreements.

<table>
<thead>
<tr>
<th>1. Treated with dignity and respect; if not who is contacted</th>
<th>2. Privacy / place to go when she would like to be by self</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Staff make the individual feel good about self</td>
<td>4. Phone/computer for private communication at any time</td>
</tr>
<tr>
<td>5. Know her rights (exercising them; responsibilities; who to contact if abused, neglected or property stolen)</td>
<td>6. Communicate freely (phone, mail, visitors, friends, tell others her opinion)</td>
</tr>
<tr>
<td>7. Staff speak positively when talking to others</td>
<td>8. Shared personal information without permission</td>
</tr>
<tr>
<td>9. Does staff listen carefully to the individual</td>
<td>10. Assistance provided in private when needed</td>
</tr>
</tbody>
</table>
11. Choose where she lives and with whom
12. Informal communication in understandable language
13. Rules to follow
14. Enough money to meet needs

Outcome #5 Citizenship & Advocacy: People Have Opportunities to Advocate for Themselves, Others and Causes They Believe In, including Personal Goals and Dreams. [Communication is understood.]
CMS: Individuals have the freedom and support to control their own schedule and activities and have access to food at any time. (42 C.F.R § 441.301(c)(4)(vi)(C))

1. Advocacy groups participation / project stir
2. Any rights restrictions (do not agree = external advocate)
3. Participation in the development of plan
4. Comfortable discussing concerns (complaint process)
5. Can the individual eat anytime and anywhere
6. Ever felt unsafe or disrespected by anyone involved with services
7. Working on any personal goals / dreams
8. Control over her daily routine (how spend time)
9. Opportunity to advocate for themselves or others
10. Staff understand the individual’s communication

Outcome #6 Community Living: People live in communities they choose, with whom they choose and in homes and environments designed to meet their needs.

CMS:
- The individual can have visitors of her choosing at any time (42 C.F.R § 41.301(c)(4)(vi)(D))
- The setting is physically accessible to the individual (42 C.F.R § 441.301(c)(4)(vi)(E))
- The setting is selected by the individual from among setting options including (are identified and documented in the person centered service plan): (42 C.F.R § 441.301(c)(4)(ii))
  - Non-disability specific settings; option for a private unit in a residential setting

1. Able to get around all areas of home easily
2. Feel safe with the neighbors when going out
3. Have friends that are not staff (visiting hours; invite to party)
4. Feel safe when in town
5. Choice of decorations and furniture arrangement
6. Know what to do to move (rights)
7. Opportunity to own a pet if wanted one
8. Help fix things in the home
9. Chose where she wanted to live; look at >1 place; like it
10. Like to own her own home
11. Chose roommate(s); likes them; how to change
12. Staff support individuals in developing relationships
13. Feel safe in her home; who to contact if not
14. Living arrangement a part of the community

Outcome #7 Supports to Families: Families are Provided With Knowledge That Empowers Them to Facilitate Opportunities for the Individual’s Self-Determination Throughout the Course of His or Her Life.

1. Spend time with family and how (visits; satisfied; community)
2. Receive correspondence from friends/family members
3. Supported in visiting friends (satisfied; close relationships)
4. Someone to confide in (problems)

Outcome #8 Service Plan
- Developed through a person-centered planning process directed by the individual and may include a representative that the individual has freely chosen and others chosen by the individual to contribute

CMS: The setting options are identified and documented in the person–centered service plan and are based on the individual’s needs, preferences, and, for residential settings, resources available for room and board. (42 C.F.R § 441.301(c)(4)(ii)) Any modification of the additional conditions, the setting options identified for an individual are supported by an assessed need and documented in the person-centered service plan based on the individual’s needs and preferences. (42 CFR § 41.301(c)(4)(vi)(F))

1. Copy of her plan
2. Supports and services being provided as wanted
3. Choose who attends the planning meeting & when/where
4. Aware of the process for scheduling a plan meeting
5. Feel plan is meeting needs (achieve; change)
6. Aware of the process to develop and update plan
7. Feel plan is helping to reach dreams and goals

Additional Comments/Concerns from the Individual: _____

Missouri - Exploratory Questions for Assessment of Home and Community-Based Services (HCBS) Residential Settings
http://dmh.mo.gov/docs/dd/moexploratoryquestions.pdf