

<b>POLICY:</b>		<b>POLICY NO:</b>	
<b>Dept: IDT</b>	HOME AND COMMUNITY BASED SERVICES	<input type="checkbox"/> <b>New</b>	Last Date Revised: 10/25
		<input checked="" type="checkbox"/> <b>Revised</b>	Prev. Date Revised:
			Creation Date: 9/1
<b>RELATED FORMS:</b>			

### Policy:

The ADC will develop and implement policies to comply with the federal rule for Home and Community Based Settings.

### Procedure:

1. The ADC will develop and incorporate into its policies and procedures specific policies and procedures for complying with the federal rule for Home and Community Based Settings.
2. These policies and procedures will include, but not be limited to, addressing the following areas:
  - I. Registrant Freedom within the Facility
    - A. Access to space
    - B. Access to facility
    - C. Access to food
    - D. Dining choices
    - E. Physically accessible setting
    - F. Visitors
  - II. Community Integration
    - A. Resident schedules
    - B. Private communications
    - C. Access to community
    - D. Community life
  - III. Registrant Rights
    - A. Privacy, dignity and respect, freedom from coercion and restraint
    - B. Optimizing autonomy & independence
  - IV. Person-Centered Planning
    - A. Requirements for Individualized Care Plans
3. These policies are meant to supplement the ADC's existing policies and procedures and to supersede and replace any policies and procedures with which they conflict.



## **I. Registrant Freedom within the Facility**

### **A. Access to Space**

#### **Policy:**

The ADC will ensure that each registrant has access to the common spaces inside and outside of the Facility.

#### **Procedure:**

1. All registrants will have access to the amenities provided throughout the Facility. Offered amenities include therapy room, quiet room, dining area, and an enclosed courtyard. All registrants will have the freedom to move about the inside and outside spaces made available for their use, consistent with their individual needs and desires.
2. The facility will provide a number of physically accessible spaces for indoor, outdoor, large-group, small-group, or private activities and gatherings.
3. Activities will be adapted to registrant's assistance or supervision needs. The activity program will include wide array of activities, games, and outings that will be available to all registrants.
4. The assistance or supervision needs of each registrant are determined on an individual basis and documented in the registrant's record.
5. The facility will take into account the assistance and supervision need of its registrants when planning for staffing.
6. Staff members will be available to provide assistance or supervision in the event that a registrant needs assistance or supervision to use common spaces within and without the facility as documented in the registrant's record.

### **B. Access to Facility:**

#### **Policy:**

The ADC will ensure that registrants have full access to the Facility and that registrants are not inhibited from entering or exiting the building, as desired.

#### **Procedure:**

1. The Facility will not maintain locked doors to which registrants do not have keys or ability to gain entry or other barriers that would inhibit registrants from entering or exiting the building. Unless there is an emergency, registrants are not required to remain in one room or a designated area.
2. Facility's entry doors are locked overnight to ensure safety. A sign at the reception desk denotes the times that the ADC is open.
3. At time of admission, the Coordinator or designee will advise new registrants of the facility's policy for locking its entry doors, the times the doors are locked, and the hours of the program.



## **C. Access to Food**

### **Policy:**

The ADC will facilitate registrants' access to food at all times during the program hours.

### **Procedure:**

1. At the time of admission, the Coordinator or designee will discuss with new registrants how the program provides access to food at all times and outside of established meal times.
2. Registrants may have a meal or snack at a time other than the Facility's usual meal or snack times and in a location of their choosing unless a reason for not doing so is otherwise described and documented in the registrant's record.
3. Staff members will assist registrants in securing a meal or snack if requested by the registrant.

## **D. Dining Choice**

### **Policy:**

The ADC will optimize registrant choice regarding with whom to eat, what to eat and where to eat.

### **Procedure:**

1. During the pre-admission interview, the Coordinator or designee will discuss with new registrants any special diets, food allergies, other dietary restrictions, and food preferences for meals and snacks. Any special diets, food allergies, other dietary restrictions, and food preferences are documented on the registrant's record.
2. There is no assigned seating in the dining area. Registrants are encouraged to sit and eat with whomever they choose. Staff will intervene, if necessary, to ensure that registrants may sit wherever they wish, and document any intervention in the applicable case management notes.
3. The Facility will seek the input of the Registrant Council and individual registrants during care planning regarding menu planning and food choices.
4. Registrants will be encouraged to submit suggestions via the suggestion box or the Registrant Council or in writing or orally regarding menu and food preferences.
5. Staff members will respect registrants' choices regarding their food and snack choices even if they are contrary to a registrant's special diet. If the registrant is making dietary decisions that conflict with his or her physician's orders, the Case Manager will counsel the registrant regarding the registrant's dietary choices and the consequences of not following medical orders and inform the physician that the registrant is not following his or her prescribed diet.

## **E. Physical Setting**

### **Policy:**

The ADC will ensure that the setting is physically accessible.

### **Procedure:**

1. All common areas and bathrooms will be accessible to those with physical limitations.
2. Staff members will ensure that the Facility is free of any barriers preventing entrance and exit from common areas.
3. The staff will assist registrants in securing assistive devices needed to help registrants move about or access areas of the Facility.
4. The Facility will provide a number of physically accessible spaces for indoor, outdoor, large-group, small-group, or private activities and gatherings.
5. Activities will be adapted to registrant's assistance or supervision needs.
6. The assistance or supervision needs of each registrant are determined on an individual basis and documented in the registrant's record.
7. The facility will take into account the assistance and supervision needs of its registrants when planning for staffing.
8. Staff members will provide assistance or supervision in the event that a registrant needs assistance or supervision to use common spaces or participate in activities within the Facility as documented in the registrant's record.

## **F. Visitors**

### **Policy:**

The ADC will enable registrants to have visitors at any time.

### **Procedure:**

1. At the time of admission, and periodically thereafter, the Administrator or designee will discuss with registrants the facility's policies on visitors, including the registrant's right to receive visitors without staff interference, preferred visiting hours and respecting the rights and privacy of others.
2. A registrant may receive visitors at any time whether or not such time is within the facility's preferred visiting hours unless a reason for not doing so is otherwise described and documented in the registrant's record. If requested, the Facility will provide a private area in which the registrant may receive visitors.
3. If the registrant chooses to receive a visitor outside of the facility's preferred visiting hours, the registrant must respect other registrants' quiet enjoyment of the Facility.
4. Visitors must abide by all facility policies, procedure, regulations, and rules.
5. Visitors should be mindful of bringing in any germs into the Facility and are requested to abstain from visiting if they have cold, flu-like, or GI symptoms.



6. Visitors engaged in disruptive or dangerous behaviors will be asked to leave the facility immediately. If necessary, staff will request the assistance of law enforcement.
7. Visitors must sign in or out in the log book at the Front Desk in order to ensure proper response in the event of an evacuation.
8. The Facility will maintain a private, common area that a registrant may use to receive visitors.

## **II. Integration into the Community**

### **A. Registrant Schedules**

#### **Policy:**

The ADC will optimize registrant choice regarding their daily schedules and activities.

#### **Procedure:**

1. The Facility will provide flexibility, as needed, to accommodate registrant preferences regarding their daily schedule and choice of activities.
2. The Case Manager will discuss with the registrant any consequences to the registrant participating in timeframes that may be outside normally scheduled services, meals and activities. These discussions will be noted in the registrant's case management notes.
3. The Facility will encourage registrants to make their own decisions regarding their daily schedules and activities unless a reason for not doing so is otherwise described and documented in their registrant record.
4. The Facility will schedule activities, events, and planned transportation at various times throughout the month to enable registrant's to have flexibility in their schedules.
5. The Facility will seek registrant input through the Registrant Council, registrant suggestions, and individual care planning as to the types of community events and activities that interest registrants and will plan activities and events accordingly.
6. The Facility will not require the registrant to participate in any activity, outing, or event.



## **B. Private Communication**

### **Policy:**

The ADC will ensure that registrants are afforded privacy in their personal communications.

### **Procedure:**

1. Registrants may visit with their guests in private. If requested, the Facility will provide a private area in which the registrant may receive visitors.
2. Registrants. If requested, the Facility will provide a private area to registrants to make and receive phone calls.
3. Any assistance needs of registrant are determined on an individual basis and documented in the registrant's record.

## **C. Access to Community**

### **Policy:**

The ADC will provide or assist registrants in obtaining transportation for accessing the surrounding community.

### **Procedure:**

1. Administrative staff will work with registrants and the facility's transportation department to accommodate requests from registrants for transportation services outside of scheduled transportation to and from planned community events and activities.
2. Facility staff will direct registrants on how and/or assist registrants with retrieving information on routes and schedules for Centro and Oneida County Rural Transit, and on local taxi cab services.
3. The Facility will assist registrants in securing transportation services, as needed, to travel to medical appointments, religious services, activities, financial institutions, work or volunteer opportunities, and other outings.
4. Any assistance needs of registrant are determined on an individual basis and documented in the registrant's record.

## **D. Community Life**

### **Policy:**

The ADC will encourage registrants to be active participants in the surrounding community.

### **Procedure:**

1. The Facility will support access to community life and community events and activities in the surrounding community by either assisting registrants in securing transportation when needed or by providing transportation (See III.C above).
2. Registrants will be encouraged to visit local sites, go on outings, or run errands independent of the Facility's scheduled programs and offerings, according to each registrants ability.
3. The Activity Director will assemble and post a monthly listing of community events next to the Activity Calendar. Registrants will be encouraged to share with the Activity Director any community events of interest to be included on the monthly listing and may request that the Activity Director post flyers and other information to the community board.
4. The Activities program will include outings and events within the surrounding community. Offered activities will take into consideration suggestions and input from the Registrant Council and individual suggestions from Registrants.
5. Registrants who are interested in seeking employment or other volunteer opportunities may contact the Case Manager to discuss how the Facility can assist the registrant in meeting his or her employment/volunteer obligations.

## **III. Registrant Rights**

### **A. Privacy, Dignity and Respect, Freedom from Coercion and Restraint**

#### **Policy:**

The ADC will ensure each registrant's rights to privacy, dignity, and respect, and freedom from coercion and restraint.

#### **Procedure:**

1. The ADC commits to the principles set forth below and will ensure that its staff, through appropriate orientation and training, are enabled to meet the following standards:
  - All information about registrants will be kept private and confidential, including health information, which will only be discussed with the registrant or with those individuals authorized by the registrant to receive this information. Staff members who do not meet this standard will be subject to disciplinary action, up to an including termination.
  - Staff members will treat registrants and their guests respectfully and will address registrants in a courteous and professional manner at all times. Staff members who do not meet this standard will be subject to disciplinary action, up to an including termination.
  - Registrants will be provided space that enables them to speak on the phone privately, open and read mail privately, and visit with guests privately.



- Registrants will be provided with a secure space to place personal belongings;
  - The Facility will engage in person-centered care planning that meets and addresses the individual needs of the registrants and optimizes registrant choice without impeding on the rights of other registrants.
  - Registrants choose who participates in their care planning meetings. Care planning meetings are timely and occurs when and where is convenient for the registrant.
  - Registrants have the right to choose which site employees provide services. If registrant requests specifically a female or male to provide services this will be noted in registrant's record. If a specific employee is not available on a certain day the registrants will be made aware of beforehand and will have the right to choose to attend program. Registrants will be informed of their rights at the time of admission. These rights will be reinforced and readdressed throughout the care planning process.
  - A listing of registrants' rights will be provided with the registrant's admission agreement and will be posted prominently in a commonly-accessed area.
  - The Facility prohibits the use of any type of restraint, including but not limited to, seclusion, physical restraints, chemical restraints, and locked unit doors to which the registrant does not have a key.
  - All registrants are given at time of admission the procedure for filing complaints and grievances with the Facility. The Facility's complaint procedure is posted prominently in a commonly-accessed area. The complaint procedure includes the ability to make anonymous complaints. Registrants have the right to present grievances without fear of reprisal.
  - Admission agreements will only be terminated in accordance with applicable laws and regulations.
2. The Administrator or his/her designee will discuss with the registrant prior to admission and at least annually thereafter, the registrant's rights to privacy, dignity, and respect, and freedom from coercion and restraint. This discussion will be documented in the registrant's initial case management notes and annual case management evaluation.

## **B. Optimizing Autonomy & Independence**

### **Policy:**

The ADC will optimize each registrant's individual initiative, autonomy, and independence in making life choices.

### **Procedure:**

1. The Facility will:
  - Ensure that each registrant voluntarily chooses to participate in the ADC as documented in the registrant's care plan.
  - Ensure that it remains physically accessible.
  - Respect the registrant's dining choices and meal preferences unless a reason for not doing so is otherwise described and documented in the registrant's record.

- Ensure that registrants have access to food at all times unless a reason for not doing so is otherwise described and documented in the registrant's record
  - Encourage registrants to make their own decisions regarding his or her schedule, daily activities, meals, unless a reason for not doing so is otherwise described and documented in the registrant's record, and with whom they choose to socialize.
  - Schedule activities, events, and planned transportation at various times throughout the day to enable registrants to have flexibility in their schedules.
  - Seek the input of registrants in regards to menu planning.
  - Support individuals in accessing the Facility and in engaging in the surrounding community.
  - Encourage but never force registrants to engage and associate with others.
  - Support and assist registrants in observing religious and civic practices (i.e. attending services, voting).
  - Support and assist registrants in accessing and managing their funds including basic support with transportation and money management, as needed or requested.
  - ESsupport registrants in making personal decisions.
2. The Facility will not:
    - Direct with whom registrants choose to spend their time.
    - Require the registrant to participate in any day programs or employment.
  3. The Administrator or his/her designee will discuss with the registrant prior to admission and at least annually thereafter his or her right to independence in making life choices, choosing daily activities, making decisions related to his/her physical environment, and deciding with whom to interact and the right to have an opportunity to control his/her personal finances and belongings. This discussion will be documented in the registrant's initial case management notes and biannual case management evaluation.

#### **IV. Person-Centered Care Planning Process**

##### **A. Requirements for Individualized Plans of Care**

###### **Policy:**

The ADC will ensure that the individualized plans of care meet the criteria and expectations of HCBS.

###### **Procedure:**

1. Prior to admission, a preadmission interview with the registrant is completed to ensure the following areas can be addressed in our facility:
  - Physicals needs, including but not limited to, physical characteristics necessitating special considerations
  - Personal needs and activities of daily living
  - Religious and cultural preferences
  - Special medical needs
  - Special or regular diet needs, including but not limited to diets necessitated by

- cultural or religious preference or medical need
  - Social interests or needs
  - Financial management needs
2. The RN completes an Initial Assessment and a follow up Assessment every 6 month thereafter or upon a change of condition. This address:
    - Registrant's clinical history
    - Physical, mental and psychosocial symptoms/conditions
    - Medications, treatments/care, interventions needed
    - Pain management,
    - Registrant's coping mechanisms
    - Registrant's ability to participate in care and decision making
    - Family/caregiver supports
    - Home environment, appropriateness of home for care
    - Safety factors in home
    - Initial and ongoing needs
    - Teaching/registrant education required
    - Expected outcomes
    - Short-term and long-term goals
    - Functional abilities
    - Appropriate level of care determination
  3. The RN prepares a written initial care plan and every 6 months thereafter, or upon a change of condition, which identifies the patient's individualized ADL needs, including but not limited to, the registrant's level of assistance needed with showering, dressing, ambulating, transferring etc.
  4. The RN then makes recommendations to the registrant's physician based on the above assessment.
  5. The Case Manger meets with the registrants and conducts a thorough initial assessment and annually thereafter. The Social Assessment is registrant centered, and identifies the following:
    - Registrant routines, preferences, and dislikes
    - Registrant choices and ongoing discussions about their care
    - Registrant rights and responsibilities (A copy of which is given to each registrant upon admission and is also available in a Registrant common area).
  6. Additionally, besides for the initial and annual assessments and care plan adjustments the person-centered care planning process is an ongoing process as needed for any changes to a registrant preferences, likes, dislikes or special requests. All such ongoing choices/ changes and modifications are documented in the registrants case notes and the care plan updated as needed.
  7. In conjunction with the registrant's physician and the registrant the individualized care plan and services plan is developed for the Agency to provide the individualized care necessary to meet these needs and goals of the registrant. This is documented across the various components that make up the registrant's medical chart, including but not limited to, case management notes, UAS assessments, Med and Psych evaluations, and individualized care plan.
  8. Any modifications to a registrant's right to choose his or her roommate, to privacy in his or her unit, to lock and/or have a key to his or her unit, to have full access to the Facility, to access food at any time, to have visitors at any time to choose his or her daily schedules and activities, must be supported by a specific, assessed need and justified in the individualized care plan.



9. Each member of the health care team, upon review of all components of the registrant's chart (assessments, case management notes, Plan of care, UAS) may recommend changes in the Plan of Treatment. Changes in the medical treatment must be authorized by the physician of record or author.