

3/11/2022 HCBS Final Rule Overview Q&A

1. When will the visits begin?
 - a. We have been doing onsite reviews since last year and they are continuing. Emails will be sent out letting providers know if it is an onsite review or desk review. Reviewers will be contacting you via the email that is listed in REDcap.
2. We are a new provider that became HCBS compliant before enrollment in DMAS. Do we need to be transitioning?
 - a. Follow up with DMAS so that we can confirm where you are in the process and if you actually are compliant. In general, new providers must enter the system in full compliance and are not afforded the transitional period.
3. Will the slides be made available after the training?
 - a. Yes, they are available on the DMAS HCBS Toolkit [here](#).
4. How will we know if we are in full compliance?
 - a. You will be receiving an email containing a compliance letter letting you know that you are in full compliance that you can keep for your records. Letters are sent for each individual setting.
5. How do you register for the next training?
 - a. Invites were sent from DBHDS on 3/21/22. Every participant must register for each training individually.
6. If a resident does not ask for a lock on their bedroom, do we still need to supply that?
 - a. Yes, the lock gives the individual privacy. They do not have to use it. The individual needs to be provided with a key and an appropriate staff person should also be provided with a key to be able to access that bedroom in the event of an emergency.
7. I have started sponsored services; however, I have not input in REDCap. How can I enter the information for the program?
 - a. If you are a current provider and have added Sponsored Residential then reach out to DMAS (hbscomments@dmass.virginia.gov) and someone can help you enter information into REDCap.
 - b. If you are a new provider you have to fill out the provider self-assessment on paper and send email over to DMAS to let them know you are a new provider.
8. Who will be issuing the letter of compliance?
 - a. An email will come from the DMAS/ DBHDS reviewer who worked with you during the entire process.
9. Are staffing issues with DSPs being considered in the creation of the work groups as being a viable option?
 - a. The Commonwealth is aware of the DSP shortage. We encourage providers to utilize multiple strategies to reach compliance including: training, policy review, person-centered planning and regular disclosure of HCBS Rights. The creation of a specific HCBS work group is not a required strategy for compliance, but could be useful for culture change.

10. Can you further explain excessive signs?
 - a. There is a minimal amount of signs that are required: Licensing Agreement, Human Rights Posting, and Emergency Exit Plan/ evacuation plan. Additional forms such as: reminders to staff, policy and procedure, etc. can be housed in a staff notebook.
11. Is there is a specific form for modifications to be used?
 - a. Use the Restrictions of Everyday Freedoms form. It is a part of the Part V under the Safety Restriction dropdown.



12. If something is outlined in the plan such as assistance with hygiene due to a physical limitation, does a modification still need to be done even if everyone signs the Part V?
 - a. If nothing is being restricted then a modification does not need to be put into place. However, the support needs of the individual must be reflected in the Part V. The provider should provide the most privacy and independence possible. This may look different for every individual. **General guidelines to follow:**
 - An individual who needs assistance with grooming is groomed as he/she desires
 - All individuals who are able to complete activities of daily living without assistance are able to do so privately.
 - No unnecessary staff is in the bedroom or apartment and/or the private area of a day setting when individuals are completing activities of daily living.
 - If individuals share a bedroom or apartment, each person has the right to complete personal hygiene in private.
 - The Provider will respect an individual’s preferences to allow for choice of clothing and personal care products within resources.
13. Due to COVID-19 there will be diminished community involvement, will this be considered non-compliance?
 - a. COVID-19 has changed the lives of everyone, however there should be some community integration involved (i.e., dinner, grocery store, park, etc.)
 - b. For individuals served by your program prior to COVID we will look at the information about community integration for them from early 2020.
14. If somebody is incapable of keeping their key does this require a modification?
 - a. There may need to be a conversation about if a different type of key pad is needed. If a key is not reasonable at all in any aspect due to a health and safety concern, a modification is required.
15. Are there any examples of progress notes that can be provided to best identify the noted content and factors needed to demonstrate compliance with HCBS to assist providers with documentation training of employees?

- a. Documentation training will take place on 4/22/22.
16. When will a services description be approved regarding HCBS and group supported employment under waiver for Medicaid Waiver group supported employment providers?
 - a. There are approved final regulations and a manual that has a service description for supported employment as well as all other waiver services.
17. I thought that the rights had to be displayed in the main parts of the home?
 - a. Human Rights have to be displayed in the main part of the home or a place that the individual is likely to see it and access them.
18. Do offices need to not be in the homes or look office like?
 - a. Remember that this is the individual's home and not a work site. Offices in the home are acceptable, but they need to be accessible to the individuals as well. Multiple staff offices and spaces do take away from a home environment. We recommend limiting the staff office/work space to one area of the home.
19. How do we find out who to contact in DMAS for questions concerning clarification?
 - a. Katie.Morris@dmas.virginia.gov
20. What is the timing of the self-assessment and how long will it take?
 - a. For new providers it may take up to 45 days to come into compliance.
21. Will there be a certificate of completion once the trainings are completed?
 - a. No, there will be no issuing of certificates of completion. This information is purely for the benefit of the provider to reach and maintain compliance.
22. As of the past bedrooms were unable to be locked in the ICF. Is there a change needed for compliance that the bedrooms now be locked?
 - a. No, ICF's are not home and community-based settings and do not fall under the settings regulation.
23. Do locks need to be on bathroom doors?
 - a. Yes, an individual has a right to privacy.
24. Will DMAS issue a compliance letter?
 - a. Yes, reviewers also have the authority to issue compliance letters on behalf of DMAS as well.
25. Key pads for individuals?
 - a. Key pads may not be appropriate for all individuals. If the individual is unable to remember the code, then a standard key lock should be used. Key pads are used for individual needs not staff preference.
26. Can someone provide the email for new providers to utilize to ask questions?
 - a. hcbcomments@dmas.virginia.gov
27. Do we need to update REDCap every time we update a home to our license?
 - a. Yes, send an email to DMAS and let them know that you have a new setting that you need to add to REDCap.
28. Registration for upcoming trainings?
 - a. Registration information for all remaining sessions was sent out from DBHDS on 3/21/22.
29. Will these sessions be posted online after today?
 - a. Yes, there will be a week or two delay before the recording can be accessed.
30. What is the deadline to come out and see all providers?

- a. All reviews may not be site reviews, some are being done as desk audits. An email will be sent informing if it will be an onsite review or a desk review.
31. How can a provider remain in compliance if an individual is not physically able to use a key or it may be a safety issue for them to have one?
- a. Assess the need and identify less restrictive options that were tried before not providing a key. If a modification is needed for health and safety reasons, then a provider must go through the full modification process.
32. How does a provider remain in compliance once they are deemed compliant?
- a. Continue to follow your policies and procedures, continue to honor HCBS rights, continue ongoing training with staff, and continue to provide community-based services. The state will be providing ongoing monitoring through the different auditing entities.
33. What is the time frame as to when we can expect a review?
- a. The state is actively working on reviews and all reviews must be completed by 2023.
34. We are opening up another group home under the same name and are already compliant for the first one. Do we need to do the same for the new home?
- a. Yes, compliance is determined on a setting specific level.
35. What about signs at group day services?
- a. The required signs are: Licensing Agreement, Human Rights, and Emergency Exit Plan. Anything beyond that may be considered excessive and takes away from a home and community based experience.
36. Is maintaining compliance defined as after the self-audit and being determined compliant and on-going requests for information for rounds 2 and 3?
- a. Maintaining compliance is pertaining to once you receive your compliance letter and making sure that you continue to provide the same services.
37. If an individual wants to decorate their door to include their name, would we just need to document it?
- a. Yes, that is acceptable if it is the individual wishes to do so - not the provider. We encourage individuals to decorate their space as they wish, including the door.
38. Do we need locks on bathroom doors?
- a. Yes, locks are required on bathroom doors. Individuals should be able to lock their doors to for their own privacy.
39. Do you need evacuation plans?
- a. Emergency Procedures and how to exit the setting are regulatory requirements. Please review the DBHDS Office of Licensing regulations.
40. We have an individual who has started eloping and were thinking about installing an alarm or camera, do we need to do a modification for this addition?
- a. Reach out to your human rights advocate and follow all human rights processes for any cameras or alarms.
41. Availability of the slides?
- a. Slides are available on the DMAS HCBS Toolkit [here](#).
42. Clarify access to the office by the individual?

- a. It is acceptable to have an office, but if it is located in the home and it is an area being restricted from the individual then there will need to be documented reasons (i.e., health and safety) as to why the individual cannot have access to that area of the home.
43. Where can we locate the restrictions of everyday freedom form?
- a. It is in WaMS in the provider Part V section. See question 11.
44. What will need to be done if there is a significant safety concern for someone to have access to the front door?
- a. CMS website has good information on wandering and unsafe behavior. Please find the presentation [here](#). All support needs need to be adequately documented in the provider Part V.
45. Does it need to specifically be a key lock on the bathroom?
- a. No, it could also be a pop or turn lock.
46. Does the employee job description have to include compliance with HCBS?
- a. Including HCBS in all staff job descriptions is a good strategy for compliance; however, it is not required by the state. Staff DO need to be trained in HCBS annually and are expected to deliver services and supports according to the requirements.
47. If we add a new DS program, do we need to go into REDCap and add that site?
- a. Yes, updating REDCap allows for information regarding your new setting to be accessed faster in order to avoid delays from licensing. However, if it is a new program (i.e., residential adding a day support) then you would need to go through the new provider self-assessment.
48. Do signs that use sign language to help an individual navigate their setting require a modification?
- a. No, that is not a modification, however if someone has support needs then it needs to be documented in their Part V.
49. Who can we contact on keeping our staff trained?
- a. There are no provider specific trainings however you can always reach out to your CRC with specific questions.
50. If an individual chooses to not go into the community, how do we stay in compliance?
- a. Continue to present opportunities to the individual and document the results of each attempt.
51. Are exit signs required in sponsored residential homes?
- a. Actual exit signs are not required; however, an evacuation plan is required as per licensing regulation. Please review the human rights and licensing requirements for your setting and know what is required to be posted versus what may create an institutional like setting.
52. Is it acceptable to have names on lockers in day support?
- a. No, not unless the individual requests or wants it there.
53. If I close a setting, do I need to update that information in REDCap?
- a. Providers are not able to delete settings out of REDCap, but please contact the HCBS email address for assistance removing the setting.
54. What if it an individual's private room and they are the only ones using the bathroom and it's convenient to not have a door on the bathroom?

- a. It is a licensing requirement that all bathrooms have a door and that it is lockable. Decisions must not be based on convenience, but rather honoring privacy, dignity and respect for all individuals.
55. Are all bedrooms accessible to all individuals in the home?
- a. An individual should only have access to their own bedroom and no other bedrooms unless they have been invited in to visit. Reach out to CRC for clarification.
56. Link for the ToolKit?
- a. <https://www.dmas.virginia.gov/for-providers/long-term-care/waivers/home-and-community-based-services-toolkit>
57. What if individuals are leasing specific areas of the home and not all of the home?
- a. When developing a lease with the individual the address for the home is listed, indicating that the lease allows them access to the entire home and not just specific areas.
58. Access to the office?
- a. Individuals should be allowed access to the entire home except for other individual's bedrooms unless there is a safety concern. Please reach out to your CRC for clarification and details.
59. Does the HCBS Final Rule apply to companion care providers?
- a. No, they are not subject to on-going HCBS reviews.
60. Are parents allowed to sleep over in the individual's room?
- a. Yes, all individuals are allowed to have visitors at any time unless there is a documented modification to rights.
61. Where do we store chemicals and additional supplies if we have to allow individuals access to all of the home?
- a. They can be locked in to cabinets, closets, or storage rooms in a garage that can be used instead of locking off an entire room.
62. At what point do we run background checks on friends or family?
- a. There is no need for a background check on friends or family. Providers should not screen visitors unless there is a documented health and safety concern.
63. What if the person who wants to come over is abusive?
- a. Individuals have the right to visitors unless there is a documented modification.
64. Is there a length of time that friends and family can stay?
- a. Individuals can have visitors; however, the visitors cannot move in with them. Time guidelines are outlined in the VA Landlord and Tenant Act.
65. What if the individual meets people on social media and gives them the address? How can we ensure safety?
- a. Individuals are allowed visitors unless there is a documented modification. If there is a safety concern then it may warrant a modification, however there should be documentation of what has been done to educate the individual in order to develop safety skills.
66. For day programs, is a lockable stall door sufficient in the bathroom?
- a. Yes
67. We are required to run a background check on anyone who stays overnight?

- a. No. Only agency employees and contractors require a background check.
68. Will there be a Q&A document?
- a. Yes, it will be posted to the ToolKit.