



“Back to the Basics”
For
Support Coordinators
Regarding the HCBS Settings Rule
PART 3

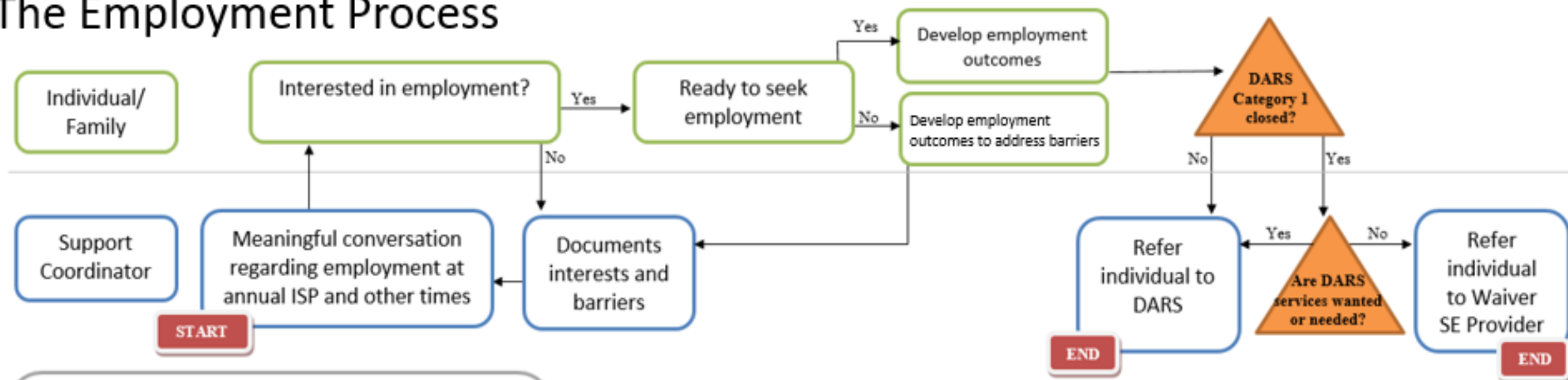
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Deanna Parker (DBHDS), and Katie Morris (DMAS)



HCBS Modifications



The Employment Process



Terms

DARS = Dept. of Aging and Rehabilitative Services

DARS Category 1 = Order of selection category with DARS, which includes individuals who are most significantly disabled, i.e., has a significant disability that results in serious functional limitations in three or more functional areas.

SE = Supported Employment

Category/Priority I: An individual with a most significant disability in accordance with the DRS definition of most significant disability. individuals in Category 1 need to meet at least 3 criteria as defined by DARS.

For more complete information about employment view the Employment Module at:

<https://dbhds.virginia.gov/wp-content/uploads/2024/05/Employment-and-Workplace-Assistance-4.10.24-final.pdf>

What If There's a Health & Safety Concern?

If a service provider wants to restrict any of these HCBS rights, there are requirements that **HAVE** to be met.

- The restriction has to be due to a health and safety concern.
- Accessibility can **NEVER** be modified or restricted.

Description
of concern

Support before
changes

Failed
attempts



Ways to measure
success

Regular review

No harm

Modifications must be Individualized

HCBS Settings Rule Modifications (restrictions) **MUST** be individualized to the person and **NOT** in place for the entire setting or program. Modifications are **NOT** one size fits all.


Common setting-wide restrictions for residential supports:

- Bed checks for everyone
- Everyone is on a low calorie/low fat diet
- No alcohol and no smoking policies
- Set visiting hours
- Bowel movements are tracked for everyone
- Food is locked up
- No eating/drinking in bedrooms
- No overnight visitors
- Restrictions on usage of personal devices – cell phones, tablets, computers, etc.
- Weekly allowance




Modification Determination


To determine if a modification is necessary, ask the following questions:

1. Are any of the residential specific protections causing a health and safety concern for the individual receiving services?
 2. Have less intrusive interventions been used? This could include specific staff supports, natural supports, specific services (AT, TC, etc.).
 3. Will the proposed modification do no harm to the individual?
 4. Does the individual/guardian/authorized representative consent to a modification?
- 

Modifications

- A provider is required to collect data on the intervention and review the modification on an ongoing basis.
 - Data collection and review must measure the ongoing effectiveness of a modification.
 - Modifications must be reviewed at time limits that are established by the provider (monthly, quarterly, etc.) At this review, the ability to terminate the modification must be discussed.
 - The modification must be documented in the **Safety Restriction Form** located in WaMS. This is found in the provider ISP section.
 - Support Coordinators should review the provider's ISP and ensure that the Safety Restriction form has been completed for all modifications.
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Justin's Story

Justin spends a great deal of time on social media and dating apps. He has made connections with many people online and has been taken advantage of in financial schemes and catfishing. Justin recently made several new online connections and invited them to his house (group home setting).


Justin did not know these people and provided them with an invitation to the home and his address and phone number. Strangers have shown up at Justin's group home.




Justin's Story (continued)

Staff discussed with Justin the safety risks of his choices and explained boundaries with strangers. Justin's mother also discussed safety awareness with him and encouraged him to meet people in public places. Justin said he feels pressure to make his online friends happy.

Modification: Justin and his support team decided that Justin's right to have visitors at any time requires a modification until additional safety awareness skills are acquired. Justin agreed that meeting people in public places (coffee shops, parks, restaurants, etc.) would be a safer option than inviting people to his home.



Justin's Story: Checklist

- ✓ Justin's internet behavior causes a safety concern.
 - ✓ Natural and paid supports have provided education and support to Justin to address the unsafe behavior.
 - ✓ Justin consents to the modification.
 - ✓ Justin is not fully restricted from meeting his new internet friends, he will have the option to meet in safer, public settings.
 - ✓ Staff will provide ongoing education and support to Justin to teach safe online behavior. This support is included in Justin's plan and the modification will be reviewed quarterly.
 - ✓ The Safety Restriction Form is completed in the Part V.
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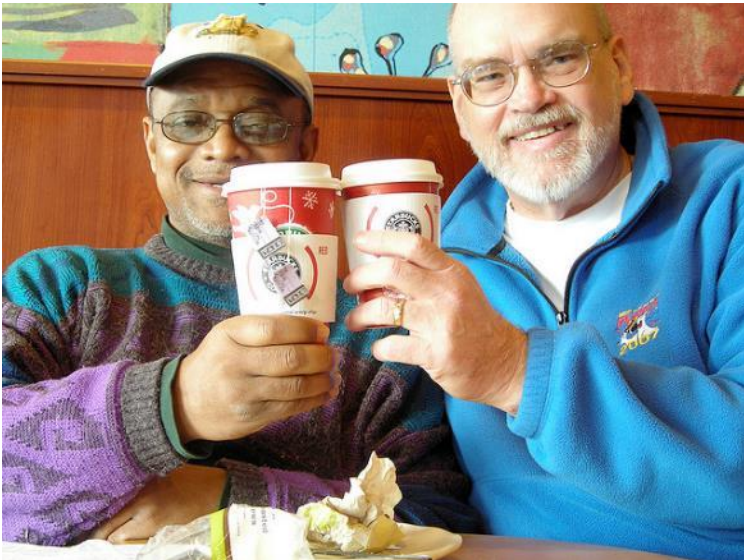
On-Site Visit

- What to look for and ask while on a face-to-face visit
- How to complete the OSVT in relation to HCBS
- Who to report a deficiency to



"Face-to-face visit" occurs in the person's service setting (e.g. home, job, or community) means an in-person meeting between the support coordinator and the individual and family/caregiver, as appropriate, **for the purpose of assessing the individual's status and determining satisfaction with services, including the need for additional services and supports.**

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In progress notes, look for the offer of choice of activities, food, when to get up, take medication, what to wear etc.

Ask individuals:

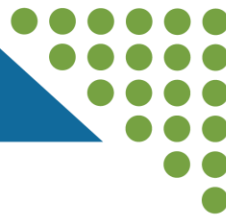
- ✓ If they are still happy there, are there any changes to be made to make them more comfortable, if they have done anything fun lately.
- ✓ If staff knock before entering their rooms
- ✓ If they can come and go as they please
- ✓ If there are restrictions
- ✓ If they had any visitors lately
- ✓ If they or their visitors must sign in and out
- ✓ Is the individual able to talk to you freely?
- ✓ If the individual does not speak with words look for facial and body expressions while talking to them. Speak to a staff person who works with them frequently



Home and Community-Based Services Review (To be completed following questions 1 through 14)

15	<p>All Home and Community-Based (HCBS) Settings must meet basic standards. Consider the items to the right and confirm all that apply during the visit.</p> <p>examples</p>	<p>The setting:</p> <ul style="list-style-type: none"> was selected by the individual/SDM? <input type="checkbox"/> Yes <input type="checkbox"/> No is accessible to the person? <input type="checkbox"/> Yes <input type="checkbox"/> No is integrated into the larger community? <input type="checkbox"/> Yes <input type="checkbox"/> No gives person ability to move freely & make choices? <input type="checkbox"/> Yes <input type="checkbox"/> No provides person with dignity and respect? <input type="checkbox"/> Yes <input type="checkbox"/> No <p>If a no is indicated for any item listed above, list reporting below and proceed as required by mandated reporting requirements, state requirements, and agency policies and procedures.</p>
16	<p>Is the visit occurring in one of the following <u>provider-controlled or owned</u> settings: Group Home Residential, Sponsored Home, or Supported Living?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If answered "yes", proceed to question 16a If answered "no", proceed to question 17</p>
16a	<p>Provider-controlled or owned HCBS residential settings must meet additional standards. Consider the items to the right and confirm all that apply during the visit.</p> <p>examples</p>	<p>The individual:</p> <ul style="list-style-type: none"> has been provided a key to their home? <input type="checkbox"/> Yes <input type="checkbox"/> No has been provided a key to their bedroom? <input type="checkbox"/> Yes <input type="checkbox"/> No can have visitors? <input type="checkbox"/> Yes <input type="checkbox"/> No can have overnight guests? <input type="checkbox"/> Yes <input type="checkbox"/> No can decorate his room? <input type="checkbox"/> Yes <input type="checkbox"/> No can access food at any time? <input type="checkbox"/> Yes <input type="checkbox"/> No can choose own schedule and activities? <input type="checkbox"/> Yes <input type="checkbox"/> No <p>If a no is indicated for any item listed above and a modification is not in place, list reporting below and proceed as required by mandated reporting requirements, state requirements, and agency policies and procedures.</p>





15

All Home and Community-Based (HCBS) Settings must meet basic standards. Consider the items to the right and confirm all that apply during the visit.

[examples](#)



The setting:

- was selected by the individual/SDM? ☐ Yes ☐ No
- is accessible to the person? ☐ Yes ☐ No
- is integrated into the larger community? ☐ Yes ☐ No
- gives person ability to move freely & make choices? ☐ Yes ☐ No
- provides person with dignity and respect? ☐ Yes ☐ No

Question is applicable to **all settings** a Support Coordinator may be in.

If a no is indicated for any item listed above, list reporting below and proceed as required by mandated reporting requirements, state requirements, and agency policies and procedures.



16	Is the visit occurring in one of the following <u>provider-controlled or owned</u> settings: <u>Group Home Residential</u> , <u>Sponsored Home</u> , or <u>Supported Living</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No If answered "yes", proceed to question 16a If answered "no", proceed to question 17
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IF the visit is in a:

- ✓ Group Home
- ✓ Residential,
- ✓ Sponsored Home, or
- Supported Living



THEN proceed to question 16a

16a

Provider-controlled or owned HCBS residential settings must meet additional standards. Consider the items to the right and confirm all that apply during the visit.

[examples](#)

The individual:

- has been provided a key to their home? ☐ Yes ☐ No
- has been provided a key to their bedroom? ☐ Yes ☐ No
- can have visitors? ☐ Yes ☐ No
- can have overnight guests? ☐ Yes ☐ No
- can decorate his room? ☐ Yes ☐ No
- can access food at any time? ☐ Yes ☐ No
- can choose own schedule and activities? ☐ Yes ☐ No

If a no is indicated for any item listed above and a modification is **not** in place, list reporting below and proceed as required by mandated reporting requirements, state requirements, and agency policies and procedures.



Pages 4 – 7 of the OSVT contains helpful guidance for each question. Examples and action considerations are included in this guidance.

15. All Home and Community-Based (HCBS) Settings must meet basic standards. [series of yes/no questions]	(e.g. the person does not have the ability to move about the space as they choose, they can't access certain places as needed, or they are isolated in some way from others or the larger community.)	If any of the items are marked no, consider if the reporting should be made to protective services, the office of Licensing or the Office of Human Rights. Speak with your supervisor as needed and follow your agency policies and procedures for reporting.
16. Is the visit occurring in one of the following provider-controlled or owned settings: Group Home Residential, Sponsored Home, or Supported Living?	The visit is occurring in one of these settings, which is controlled or owned by a provider: Group Home Residential, Sponsored Home, or Supported Living	A yes to this question determines if you need to answer 16a.
16a. Provider-controlled or owned HCBS residential settings must meet additional standards. [series of yes/no questions]	(e.g. the person has been provided keys to his home and bedroom, he can access food when he wants, he can have visitors and overnight guests, decorate his room and choose his own schedule and activities).	If any of these items are "no" confirm if there is a modification in place to address a restriction. If there is not, consider if the reporting should be made to protective services, the office of Licensing or the Office of Human Rights. Speak with your supervisor as needed and follow your agency policies and procedures for reporting.



For Individuals & Families ▾



For Providers ▾

For CSBs ▾

GET URGENT HELP ⓘ

A life of possibilities for all Virginians

Supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life

ABOUT DBHDS →



Virginia Department of Behavioral Health
and Developmental Services

For Individuals & Families ▼

For Providers ▼

For CSBs ▼

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ABOUT DBHDS →

Support Coordination/Case
Management Resources →

Provider Network Supports

Centralized Training

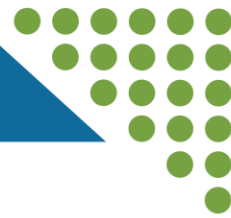
Management Services

Background Investigations Unit

Licensing

Division of Crisis Services

Licensed Provider Search



dbbds.virginia.gov/case-management/

Support Coordination/Case Management Resources

Introduction

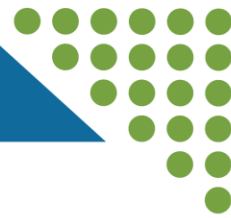
The sections provided on this page contain resources for Support Coordinators/Case Managers to access required and recommended training and resources. It will be updated over time as new content is available. Currently, access to the SC/CM Training Modules, SC/CM Developmental Disability Manual and information about housing resources is provided.

Select a Section for More Information

- Introduction
- SC/CM Training Modules
- SC/CM DD-Specific
- Housing Resources
- Employment Documents

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Support Coordination/Case Management Resources

Introduction

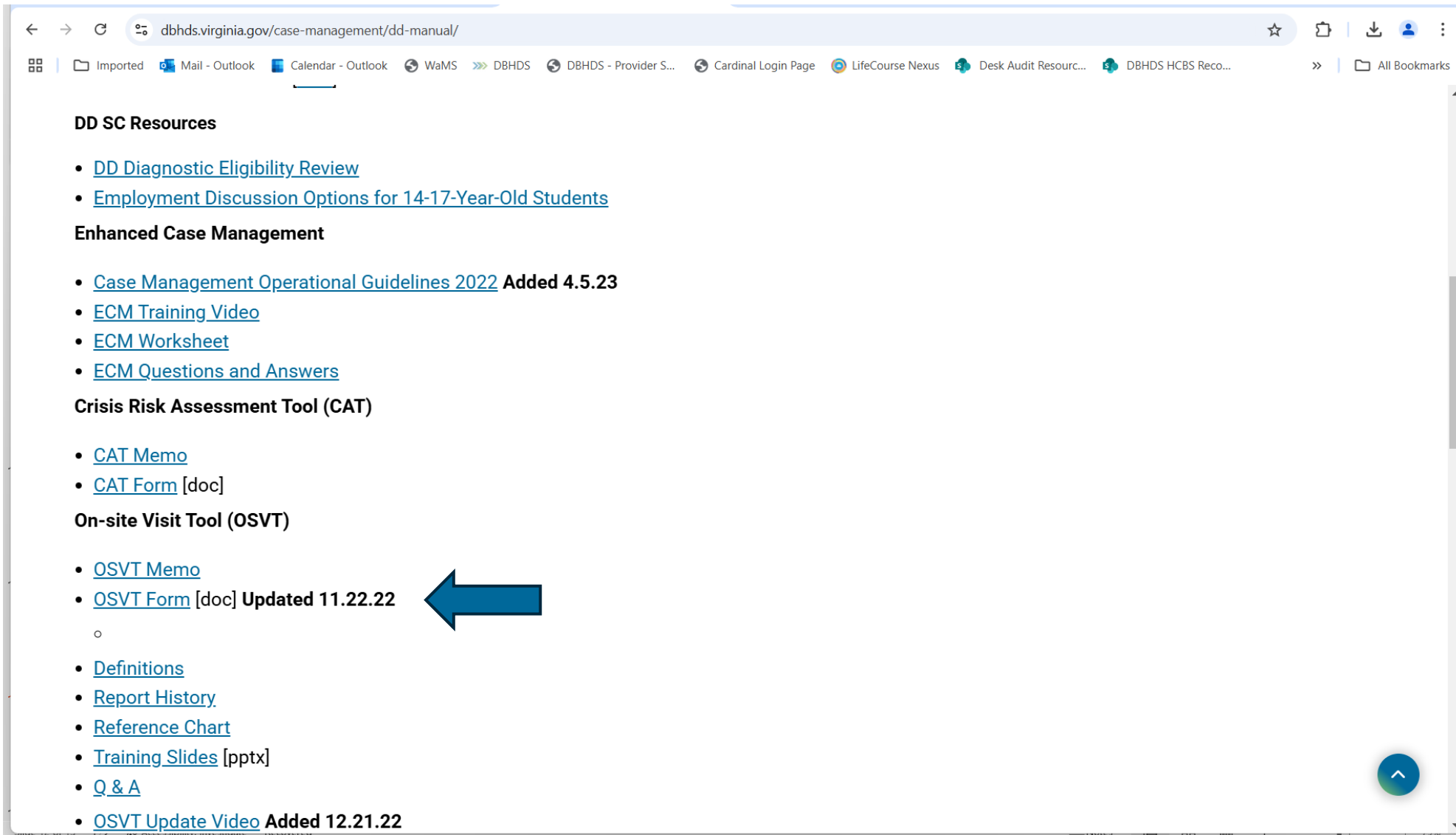
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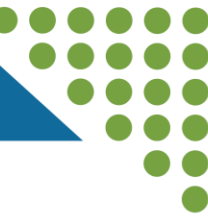




The screenshot shows a web browser window with the address bar displaying `dbhds.virginia.gov/case-management/dd-manual/`. The browser's bookmark bar includes links to 'Imported', 'Mail - Outlook', 'Calendar - Outlook', 'WaMS', 'DBHDS', 'DBHDS - Provider S...', 'Cardinal Login Page', 'LifeCourse Nexus', 'Desk Audit Resourc...', and 'DBHDS HCBS Reco...'. The page content is organized into several sections:

- DD SC Resources**
 - [DD Diagnostic Eligibility Review](#)
 - [Employment Discussion Options for 14-17-Year-Old Students](#)
- Enhanced Case Management**
 - [Case Management Operational Guidelines 2022](#) Added 4.5.23
 - [ECM Training Video](#)
 - [ECM Worksheet](#)
 - [ECM Questions and Answers](#)
- Crisis Risk Assessment Tool (CAT)**
 - [CAT Memo](#)
 - [CAT Form](#) [doc]
- On-site Visit Tool (OSVT)**
 - [OSVT Memo](#)
 - [OSVT Form](#) [doc] Updated 11.22.22
 - [Definitions](#)
 - [Report History](#)
 - [Reference Chart](#)
 - [Training Slides](#) [pptx]
 - [Q & A](#)
 - [OSVT Update Video](#) Added 12.21.22

A large blue arrow points to the [OSVT Form](#) [doc] Updated 11.22.22 link.



Information Resources




- ☐ JD = Job development
- ☐ BI=Building Independence Waiver
- ☐ PT = Placement and training
- ☐ ISE = Individual Supported Employment
- ☐ GSE = Group Supported Employment
- ☐ CSB = Community Services Board
- ☐ SE = Supported Employment
- ☐ CL = Community Living Waiver
- ☐ DARS = Department of Aging and Rehabilitative Services
- ☐ DDS = Division of Development Services
- ☐ DSP = Direct Support Professional
- ☐ DD = Developmental Disability
- ☐ FIS = Family and Individual Supports Waiver
- ☐ ISP = Individual Support Plan
- ☐ PCP = Person-centered Practices
- ☐ SC = Support Coordinator
- ☐ DBVI = Dept of Blind and Vision Impaired
- ☐ SA = Situational assessment

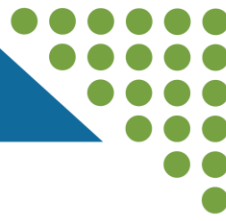
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- ☐ SA = Situational assessment
- ☐ DOE= Department of Education
- ☐ DMAS= Department of Medical Assistance Services
- ☐ PRE-ETS= Pre-Employment Transition Services
- ☐ E1AG= Employment First Advisory Group
- ☐ IDEA=Individuals with Disabilities Education Act
- ☐ VR=Vocational Rehabilitation

[Home and Community Based Services Toolkit \(virginia.gov\)](https://www.virginia.gov/healthcare/home-community-based-services-toolkit/)

<https://www.medicaid.gov/medicaid/home-community-based-services/guidance/home-community-based-settings-requirements-compliance-toolkit/index.html>



- Centers for Medicaid and Medicare Services (CMS). "Balancing Choice and Risk" PowerPoint presentation. 2019. https://www.medicaid.gov/medicaid/home-community-based-services/downloads/balancingrisk-choice_0.pdf
 - Supported Decision-Making. <https://dbhds.virginia.gov/supported-decision-making-supporteddecision-making-agreements/>
 - The Council on Quality and Leadership (CQL). The Three E's: Education, Experience, and Exposure. 2020. <https://www.youtube.com/watch?v=UZR6fm7pA2c>
 - The Council on Quality and Leadership (CQL). The Three E's: Education, Experience, and Exposure. 2021. <https://www.c-q-l.org/resources/newsletters/the-three-es-education-experience-and-exposure/>
 - Developmental Services - <https://dbhds.virginia.gov/developmental-services->
- 



[actions-that-build-community.pdf \(virginia.gov\)](#)

[DD Waivers Information | VirginiaNavigator
\(mylifemycommunityvirginia.org\)\](#)

[Office of Provider Network Supports - Virginia Department of
Behavioral Health and Developmental Services \(DBHDS\)](#)

[General Requirements for All Settings \(virginia.gov\)](#)

[Community Inclusion Toolkit -
<https://cletoolkit.communityinclusion.org/>](#)



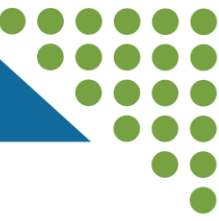
Employment - Virginia Department of Behavioral Health and Developmental Services (DBHDS)

Employment Module: <https://dbhds.virginia.gov/wp-content/uploads/2024/05/Employment-and-Workplace-Assistance-4.10.24-final.pdf>

Employment – Virginia Department of Aging and Rehabilitative Services (DARS) Vocational Rehabilitation (VR) Services - <https://www.dars.virginia.gov/drs/vr/>

Employment – Virginia Department of Aging and Rehabilitative Services (DARS) Pre-Employment Transition Services (Pre-ETS) & VR Transition Services - <https://www.dars.virginia.gov/drs/transitionservices.htm#gsc.tab=0>





- Ending Poll
- Questions?

