Home and Community Based Settings (HCBS) Rules
On-Site Assessment
EPD Residential Setting Self-Assessment

On-Site Visit Date:		Setting Phone Number:	
Setting Name:		Setting Director Name:	
Setting Address:		Setting Asst. Director Name:	
Setting License Level of Care:		Setting Type:	
Setting Assessor Name:		AHCCCS Provider Number:	
Setting Assessor Title:		License Number:	
Setting Assessor Phone:		# of Health Plan Members:	
Setting Assessor Email:		# of Medicaid Members:	

General Questions

1	**Is the setting co-located on the property of an institutional setting?**	
2	**Is the setting co-located within an institutional setting?**	
3	If yes, describe how the setting is connected with the institutional setting including shared administration, finances, staff, etc.:	
4	What is the capacity of the setting?	
5	How many beds are designated for memory care?	
6	How many of the Health Plan's members are in the memory care unit/room?	
7	How many beds are designated for behavioral health/secured units?	
8	How many of the Health Plan's members are in the behavioral health/secured unit/room?	
9	Do you have individuals living in the setting who are private pay?	

For Interviewer Purposes Only **Examples supporting the self-assessment response**	***For Interviewer Purposes Only*** **Observations/Comments**

Local Area

Please indicate if you agree or disagree with each of the following statements below.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
10	Is the setting labeled or identified in a way that sets it apart from the surrounding residences?				
11	Are the vehicles in the setting labeled or identified in a way that sets it apart from the surrounding vehicles (e.g. vans, cars, etc.)?				
Points Possible: 0		***Points Received: 0***			

For Reference Only

Employment/Volunteerism					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
12	Does the setting engage individuals of working or school age to see if they are interested in work or school?				
13	When individuals express an interest in employment, does the setting refer them for employment services?				
14	Does the setting support individuals to have volunteer opportunities in the community?				
15	Does the setting support individuals to have employment opportunities in the community?				
16	Does the setting support individuals to have career exploration opportunities?				
17	Does the setting support individuals to learn new skills or instruction for skill developmentthat pertain to volunteer opportunities or paid employment?				
18	Do individuals have access to transportation to and from work/volunteering activities?				
Points Possible: 7		***Points Received: 0***			

For Reference Only

Community Life					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
19	Do individuals receive information about activities in the community through a variety of methods (For example written material, posted material, education, experiential learning, etc.)?				
20	**Do individuals have staff support to assist them in participating in activities in the community (i.e. personal care assistance)?**				
21	**Do individuals have informal supports to assist them in participating in activities in the community?**				
22	**Do individuals have access to transportation (provider related or otherwise) to and from the setting for the purposes of engaging in community life?**				
23	**Do individuals participate in activities in integrated settings (i.e. religious, social, cultural, recreational, etc.) comparable to peers (i.e. people of similar age, people without disabilities)?**				
24	**Do individuals have regular (more than once per week) opportunities for contact with people who don't live in the home and not receiving services (family, friends, neighbors, etc.)?**				
Points Possible: 26		***Points Received: 0***			

For Reference Only

Personal Resources					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
25	Do individuals have someone assist them in managing their personal funds?				
26	Do individuals choose the person to assist them in managing their personal funds?				
27	Do individuals decide how to spend their money, earned or unearned?				
28	Do individuals have personal bank accounts?				
29	Do individuals have another type of account whereby they can access their personal funds?				
30	Do individuals access the community to purchase goods and services?				
31	Does the setting use interest/preference inventories to inform the provision of basic necessities for the member?				
Points Possible: 6		***Points Received: 0***			

Payer Source					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
32	Do all individuals living in the setting have the same access to activities, services, and amenities regardless of who pays for the service?				
Points Possible: 1		***Points Received: 0***			

Home Selection					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
33	Does the setting allow individuals to visit the setting prior to choosing to live there (i.e. tours, share a meal, participate in an activity, offer respite stay, etc.)?				
34	Does the setting use interest and preference inventories, individual's personal goals and risks assessments to inform decisions to ensure the member is accommodated in the least restrictive manner?				
Points Possible: 2		***Points Received: 0***			

For Reference Only

Private Room					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
35	Do individuals have an option for a private room if they are able to afford it?				
Points Possible: 1		***Points Received: 0***			

MCO Person-Centered Service Plan					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
36	Does the setting provide supports so that individuals can participate in the Person-Centered Service Plan meetings?				
37	Does the setting participate in the Person-Centered Service Plan meetings?				
38	Does the setting support a discussion with the member regarding key indicators that help assess an individual's integration experience (i.e. opportunities to interact with the broader community, making choices about living situation and daily activities, and privacy)?				
39	Does the setting help to identify health and safety risks that necessitate restrictions and a risk management plan?				
40	Does the setting help to identify personal goal setting opportunities to support integration?				
41	Does the setting routinely engage in customer satisfaction exercises to ensure the staff is supporting individuals to meet their goals?				
Points Possible: 6		***Points Received: 0***			

For Reference Only

Setting Plan of Care/Service Plan					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No/Not Applicable	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
42	Are the Plans of Care/Service Plans completed within 14 days of the individual being admitted to the facility?				
43	Are the Plan of Care/Service Plans current and reviewed within appropriate time frames according to AZ State Statutes to the type of care for each resident (i.e. supervisory, personal or directed care)?				
44	Does the setting provide supports to ensure the individual understands their Plan of Care/Service Plan?				
45	Does the setting utilize detailed interest and preference inventories completed with the input of the individual and others who know their life history, including past work history, hobbies and community engagement to inform decisions on personal goals related to activities both inernal and external to the setting?				
Points Possible: 4		***Points Received: 0***			

Individual Rights					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
46	Do individuals receive personal care assistance in private?				
47	Do individuals receive information about their rights in plain language?				
48	Does the setting post information about member rights in plain language?				
49	Does the setting provide supports to ensure the individual understands their rights?				
50	Do individuals know who to contact if they have concerns or complaints?				
51	Do individuals have access to a telephone and/or computer for personal use in a location that has space around it to ensure privacy?				
52	Do individuals have protection against restrictive measures, including isolation and chemical/pharmacological and physical restraints?				
Points Possible: 7		***Points Received: 0***			

For Reference Only

Independence					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
53	**Do individuals have access to a key/code to the front door/entrance of their home/setting?**				
54	**Are members given the choice and opportunity to freely exit the facility, free from a curfew or other requirements for a scheduled return home?**				
55	**Do individuals *get to* make informed decisions about what they want to do every day, including scheduling changes?**				
56	**Do individuals *receive support* to make informed decisions about what they want to do every day, including scheduling changes?**				
57	Do individuals have access to transportation training if they are currently unable to use public transportation?				
58	Do individuals have full access to the kitchen at any time?				
59	Do individuals have full access to the dining areas at any time?				
60	Do individuals have full access to the laundry areas at any time?				
61	Do individuals have full access to shared living spaces at any time?				
Points Possible: 25		***Points Received: 0***			

Choice					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
62	Do individuals have the option to make requests for an alternate staff member to assist them?				
63	Are requests for an alternative staff member honored when the setting can accommodate?				
64	Are individuals freely make requests for changes in the way their services and supports are delivered?				
65	Do individuals get to choose their roommates?				
Points Possible: 4		***Points Received: 0***			

For Reference Only

Setting - Residency Agreements					
Please select whether the following occurs.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
66	Do individuals, or representative, have a written agreement in place providing protections to address termination of residency agreement and due process and appeals?				
67	Does the setting use the standard AHCCCS residency agreement that is in plain language?				
68	Does the setting provide supports to ensure the individual understands their residency agreement?				
Points Possible: 3		***Points Received: 0***			

Privacy					
Please select whether the following occurs in general provided there are no health and safety risks to the individual.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
69	Do individuals have access to a key to their bedroom/unit?				
70	Do individuals have lockable bedroom/unit doors?				
71	Do individuals have lockable bathroom doors?				
72	Do staff and other people knock and receive permission before entering an individual's bedroom/unit or bathroom?				
73	Do individuals have the opportunity to consider other roommate options if they want to change roommates?				
74	Are individuals allowed to decorate their own room including moving furniture and hanging up items on the walls?				
75	Are individuals consulted on décor for common areas?				
76	Does the setting have a process to help individuals make choices for roommates?				
77	Does the setting have a process to assess roommate satisfaction, if applicable?				
Points Possible: 9		***Points Received: 0***			

For Reference Only

Dining					
Please select whether the following occurs in general provided there are no health and safety risks to the individual.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
78	Do individuals have a choice on what to eat if they don't like what is being served?				
79	Do individuals have a choice in what time they want to eat?				
80	Do individuals have a choice with whom to eat?				
81	Do individuals have a choice of eating alone?				
82	Do individuals have access to food/snacks/drinks?				
83	Do individuals have an opportunity to buy their own food/snacks/drinks?				
Points Possible: 6		***Points Received: 0***			

Visitors					
Please select whether the following occurs in general provided there are no health and safety risks to the individual.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
84	**Are individuals free from restrictions (visiting hours) on when they can have family and friends to visit?**				
85	Does the setting have areas or furniture in the home that supports individuals to meet with family and friends in private?				
Points Possible: 6		***Points Received: 0***			

For Reference Only

Accessibility					
Please indicate if you agree or disagree with each of the following statements below.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
86	Is the setting accessible for people to safely and freely move around the home including entering and exiting the setting?				
87	Do all individuals have physical accessibility to appliances and furniture?				
88	Does the setting have resources for assessing and providing individualized modifications (i.e. grab bars, shower chair, etc.), if necessary based upon individual specific needs?				
89	Is the home free from barriers preventing individuals from entering or exiting common or member rooms/sleeping areas?				
Points Possible: 4		***Points Received: 0***			

Training					
Please indicate if you agree or disagree with each of the following statements below.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment	**Examples supporting the self-assessment response**	**Observations/Comments**
90	All staff are trained on the prevention of abuse, neglect, and exploitation. Training for all parties should address retaliation (e.g., harassment or loss of employment) and penalization (e.g., changes to the nature and/or location of services and supports).				
Points Possible: 1		***Points Received: 0***			

Memory Care (If applicable)					
Please indicate if you agree or disagree with each of the following statements below.			***Setting Assessor Use***	***For Interviewer Purposes Only***	
		Yes/No	Documentation supporting the self-assessment response	**Examples supporting the self-assessment response**	**Observations/Comments**
91	Does the setting utilize environmental design to accommodate individual's risks for wandering or exit seeking behaviors in an effort to maximize individual initiative, autonomy and independence?				
Are setting staff trained and able to demonstrate competencies in the following:					
92	Underlying conditions, diseases and disorders that may lead to wandering or exit seeking behavior				
93	Observing individuals for the purposes of identifying through observation (patterns, frequency and triggers) the root cause(s) for the wandering or exit seeking behavior				
94	Employing less restrictive interventions to maximize an individual's initiative, autonomy and independence				

For Reference Only

95	Assessment of the individual's communication style (verbal, non-verbal) and needs in order to support staff to interpret non-verbal cues, body language, and behavioral changes and learn to anticipate member needs and ensure staff support optimizes each member's life experience by affording them the opportunities to make decisions to the greatest extent possible				
Points Possible: 5	***Points Received: 0***				
Total Points Possible: 123	***Total Points Received: 0***				

For Reference Only