Remediation Among Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD) Heightened Scrutiny Providers

Below are some examples of steps taken by IDHS-DDD Heightened Scrutiny provider settings to address the compliance issues identified by the State.

HCBS Settings Requirement	Systems to Ensure compliance with HCBS Settings rule	Provider Methods for Remediation
The setting is integrated in and supports full access of individuals receiving Medicaid Home and Community Based Services (HCBS) to the greater community, including: 1a) Opportunities to seek employment and work in competitive integrated settings	**PROVIDER DOES NOT HAVE TO COMPLETE. DDD IS RESPONSIBLE FOR THIS EXPECTATION.**	
1b) Engage in Community Life	- Individuals should have their own personal calendars - Identify/consider looking at how the specific personal plan outcomes related to or can be addressed in the community/community life and write those into the implementation strategies - Encourage natural supports in the community; ensure that individuals have access to contact information of natural supports	- Submission of personal calendars or pictures of activities - Submission of letters from natural supports, case notes documenting natural supports - Submission of documentation of attendance at community activities (e.g., pictures, receipts, ticket stubs) - Submission of documentation of discussions with person about their desires to engage in community life

1c) Control Personal Resources	• Ensure any financial management policies or practices do not restrict people's access to funds • Encourage people to be their own payee with only support needed to manage finances • Hold training courses for people you support about personal finance; utilize the Illinois Council on Developmental Disabilities (ICDD) funded Financial Wellness for Persons with Developmental Disabilities resources or make connections with people's banks • Support informed choice in their bank and financial services • Support building relationships with their banker • Support people to access and utilize typical financial products such as banking apps and financial management apps and other online tools • Hold training for staff regarding supporting people to better understand money/spending, to make financial decisions and avoid unintentional coercion based on value judgments • Consider debit cards for people so they can control access to their funds	• Submission of pictures of people at the bank, pictures of people writing checks, voided personal checks • Submission of providing tracking of anyone switching to become their own payee • Submission of training attendance logs • Submission of training agendas • Submission of case notes that discuss individuals managing their finance or withdrawing money for an activity • Submission of pictures of individual's debit cards • Submission of data tracking of individuals learning to manage their own money
1d) Receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	• Support people to maintain a personal calendar • Identify/consider looking at how the specific personal plan outcomes related to or can be addressed in the community/community life and write those into the implementation strategies • Support people to make an informed choice regarding all services. For example, interview prospective medical providers; read Google reviews to choose a pharmacy; use Trip Advisor to choose the best grocery store, restaurants, etc.	• Submission of pictures of calendars • Submission of pictures that document how vehicles are not marked with agency names or logos or other markings that draw undue attention to the person being in the service system. • Submission of photos of people doing activities such as shopping, going to the bank,

	• Identify how people who do not receive services engage in the local community and support people to identify community opportunities that might be of interest • Vehicles should be discrete and not advertise utilization of waiver services	getting their nails done, going to the doctor, in the community • Submission of case notes showing that people are utilizing the community for activities, shopping, appointments • Submission of photos of a public transportation cards
2a) The setting is selected by the participant from among setting options including non-disability specific settings and an option for a private unit in a residential setting.	**PROVIDER DOES NOT HAVE TO COMPLETE. DDD IS RESPONSIBLE FOR THIS EXPECTATION.**	
2b) Setting options are based on the individual's needs, preferences	**PROVIDER DOES NOT HAVE TO COMPLETE. DDD IS RESPONSIBLE FOR THIS EXPECTATION.**	
3a) Ensures an individual's rights of privacy	• Training for people in the house on privacy rights • Training for staff members on how to support and uphold privacy.	• Submission of monthly reporting notes documenting discussions and steps taken to ensure privacy in shared rooms. • Submission of examples of changes made to reflect a person's privacy preference • Submission of Satisfaction surveys of people receiving services to garner opinions on privacy • Submission of competency (evaluation area) for Direct Support Person's (DSP's)

3b) Ensures an individual's rights of dignity and respect	• Training for staff on dignity and respect and other rights • Training for people receiving services on their rights.	• Submission of Satisfaction surveys of people receiving services to garner opinions on dignity and respect • Submission of competency (evaluation area) for DSP's
3c) Ensures an individual's right of freedom from coercion	• Training for staff on abuse, neglect, exploitation (ANE) • Training for staff on rights and restrictions • Training for people about their rights and specifically their right to complain • Advocacy training for people	• Submission of documentation in complaint/grievance logs that people receiving supports are included in complaint process • Submission of competency (evaluation area) for DSP's
3d) Ensures an individual's right of freedom from restraint	• Training for staff and people supported • HRC policy, rights policy, positive behavior support policy, training curricula	• Submission of evidence of modifications (or commitment to follow new process). • Submission of Human Rights Committee (HRC) meeting minutes • Submission of competency (evaluation area) for DSP's
4a) The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities	• Support people to create and maintain a calendar • Identify/consider looking at how the specific personal plan outcomes related to or can be addressed in choice of activity and write this into the implementation strategies • Self-advocacy training • Training for DSPs about how to support choice/ informed choice	• Submission of individualized calendars that reflect preferences/choices in activities • Submission of documentation of efforts to support choice

4b) Optimizes, but does not regiment individual autonomy, and independence in making life choices, including but not limited to physical environment	• Self-advocacy training	• Submission of documentation of use of assistive technology and accommodations to address access • Submission of documentation about choice and education (if needed) about locking doors.
4c) Optimizes, but does not regiment individual autonomy, and independence in making life choices, including but not limited to with whom to interact	• Training for people about sexual health education, internet safety • Training on supporting people to develop and maintain relationships • Self advocacy training on rights to have visitors	• Submission of implementation strategies that are framed to encourage independence, autonomy, and personal connections • Submission of notes or discussions about creating and supporting relationship development of people with others outside the house/ organization • Submission of satisfaction surveys of people receiving services to garner opinions on friendships, relationships, and natural supports
5) Facilitates individual choice regarding services and supports, and who provides them	• Support people to maintain individualized schedules • Demonstrate how people are involved in interviewing, selecting, and evaluating staff that support them	• Submission of individualized schedules • Submission of internal organizational systems regarding tracking of people's desires and choices to ensure they are

		addressed and ensure continuity between staff • Submission of documentation of discussions with person about choice in services
6a) Individuals have the freedom and support to control their own schedules and activities,	• Support people to maintain individualized schedules • Training and other strategies to ensure artificial barriers are not inadvertently placed upon people to control their schedules	• Submission of individualized schedules • Submission of internal organizational systems for tracking people's desires and choices to ensure they are addressed and ensure continuity between staff • Submission of satisfaction surveys of people receiving services to garner opinions on controlling schedules and activities
6b) Individuals have access to food at any time	• Training for staff • Self Advocacy/Rights training for people being supported on their rights	• Submission of photos of available food • Submission of examples of modifications for those who must have modifications • Submission of examples of supporting people to shop for food and create their own menus • Submission of attendance sheet of rights trainings for people receiving services

7) Individuals can have visitors of their choosing at any time.	• Track modifications of right to visitors at any time • Policies that state visitors are allowed at any time • Rights policies and training for people	• Submission of implementation strategies that are framed to encourage visitors • Submission of implementation strategies with modifications to the right to have visitors showing you are following process • Submission of attendance sheet of rights trainings for people receiving services • Submission of HRC meeting minutes
8) The Setting is physically accessible to the individual	• Perform accessibility assessments • Physical accessibility may not be modified at any time	• Submission of accessibility assessment and photos to show it was addressed • Submission of documentation of home or vehicular modifications performed to make environment accessible

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HCBS Settings Requirement	Systems to Ensure compliance with HCBS Settings rule	Provider Methods for Remediation
10a) Each individual has privacy in their sleeping or living unit.	• Training for staff and people receiving services on privacy rights and expectations of privacy	• Submission of monthly reporting notes documenting discussions and steps taken to ensure privacy in shared rooms

		• Submission of attendance sheets from rights trainings • Submission of satisfaction surveys of people receiving services to garner opinions on privacy • Submission of implementation strategy or case notes that reflects a discussion of privacy and any steps taken to address privacy issues
10c) Individuals sharing units have a choice of roommates in that setting	• Self advocacy training • Conflict resolution processes • Complaint processes	• Submission of examples of having potential housemates meeting with others in house prior to moving in • Submission of attendance sheets from self-advocacy trainings • Submission of satisfaction surveys of people receiving services to garner opinions on room/housemates
10d) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or agreement	• Ensure residency agreements reflect people's rights to decorate their space • Training for people on their rights	• Submission of residency agreement • Submission of pictures of individualized decorating in rooms/homes