

## Developmental Services Core Assurances Monitoring Checklist

Provider Number: \_\_\_\_\_

Provider Name: \_\_\_\_\_

Review Date: \_\_\_\_\_

Provider Address: \_\_\_\_\_

Reviewer Name: \_\_\_\_\_



\_\_\_\_\_



District: \_\_\_\_\_



\_\_\_\_\_

Location: \_\_\_\_\_

Agency Provider     Solo Provider     Onsite Review     Desk

Cite		Met	Not Met	N/A
<p><b>The Core Assurances represent specific administrative and programmatic requirements that are applicable to all Medicaid waiver service providers.</b></p> <p><b>To determine compliance with each Standard from the Core Assurances, elements of performance have been developed to assist the reviewer in determining whether standards have been met. The elements of performance allow the reviewer to tailor the determination of compliance to the unique service under review.</b></p> <p><b>Minimum Standards: Minimum standards delineate basic requirements that a provider must meet. An overall standard is presented, with supporting elements of performance.</b></p> <p><b>Expanded Practice: Expanded practices represent conditions that exceed minimum expectations. All minimum standards and elements of performance within a section must be met before a provider is eligible for expanded practice scoring in that section.</b></p> <p><b>DR: Code to indicate an element of performance that is subject to Desk Review. Those agency providers who have been identified to undergo a desk review will be requested to supply evidence that demonstrates their compliance with these elements of performance.</b></p>				
<p> <b>Alert: Denotes a critical standard or cite relating to health, safety and rights. A deficiency requires a more intense corrective action and follow-up cycle.</b></p> <p><b>“W” Weighted Element: A “W” followed by 2.0 or 4.0 in the Cite column denotes elements that have a greater impact on the monitoring score.</b></p> <p><b>“R” Recoupment: An “R” in the Cite column denotes an element that is subject to recoupment of funds by the State if the element is “Not Met.”</b></p>				
<b>Standard:</b>				
 <b>Rights and privileges of individuals are upheld.</b>				
1 DR	The provider has a written policy that identifies the rights and responsibilities of individuals receiving services.			
2 W2.0	There is evidence that the policy identifying individual rights and responsibilities is implemented.			

Cite		Met	Not Met	N/A
3 W2.0	Individual rights are not restricted in any way. If there is evidence that rights are restricted, the restrictions are made in accordance with state statute and regulation.			
4  W4.0	The individual(s) is treated with dignity and respect.			
5  W4.0	The individual's personal privacy is observed.			
6	The provider and staff talk to and about the person in a respectful manner.			
7	The individual is included in decisions concerning his or her life.			
8 W2.0	The individual(s) has access to personal possessions, his or her money, food, and freedom of movement.			
9	The provider and staff appear to listen to the person when he/she is speaking.			
10	There is evidence that the provider assists the individual to fully exercise rights and to make informed choices.			
Note: The following Expanded Practice will be evaluated only when all preceding, required elements of performance for the standard have been met.				
11 Expanded Practice	The provider and staff have knowledge of due process procedures and this information is made available to individuals/families/ guardians and provider staff.			
<b>Standard: Individuals have access to environments, including community settings, where services and supports are provided.</b>				
12	Individuals are not denied access to parts of the building or areas where services are delivered due to disability, including administrative offices.			
13	Community involvement is not limited due to an organization's transportation or other barriers.			
14 W2.0	Individuals are provided with opportunities to receive services in the most integrated settings appropriate to their needs and according to their choice.			
<b>Standard: Individuals are afforded choice of services and supports.</b>				
15 DR	There are written policies and procedures in place to address choice for individuals, including those with a guardian, or for those who have been adjudicated incompetent.			

Cite		Met	Not Met	N/A
16 W2.0	There is evidence that the provider's policies addressing individuals' choice for supports and services are implemented.			
<b>Standard: Individual personal information is kept confidential.</b>				
17 W2.0	Information about the individual is secured and not publicly displayed, except at the choice of the individual.			
18	Individual records are secured.			
19	Consents for release of information are specific; time limited, signed and dated by the person or authorized representative.			
<b>Standard:</b>				
 <b>Suspected abuse, neglect or exploitation is immediately reported in accordance with state law.</b>				
20 DR	The provider has a written policy to address the immediate reporting of any suspected incidents of abuse or neglect.			
21  W4.0	The provider immediately reports any suspected abuse, neglect or exploitation of an individual. <i>[Note: If Cite 21 is met, and there is evidence that staff is trained in reporting procedures, as applicable, score Cite 21 as MET if there have been no suspected incidents to report.]</i>			
22 DR	The provider has a written policy to inform the individual and/or family/guardian about how to report suspected abuse, neglect or exploitation.			
23 W2.0	The provider informs individuals, family and guardians about how to report suspected abuse, neglect or exploitation.			
24 W2.0	The registry number is posted and accessible to staff and consumers.			
<b>Standard: Individuals are assisted in achieving personal goals and desired outcomes.</b>				
25	The provider is aware of, and has taken responsibility for, coordinating services needed to meet personal goals and needs identified by the individual within the scope of the service.			
26 W2.0	Supports provided are directly related to the individual's desired goals and needs.			
27	Supports appear adequate in intensity and frequency to support desired outcomes for the individual.			

Cite		Met	Not Met	N/A
28	The provider is performing timely investigations and attempting resolution for any complaints, or inadequate supports for the person, if goals are not being achieved or appropriately supported.			
29 W2.0	The provider uses a personal outcome approach to design person-centered supports and services, and to enhance service delivery in order to assist individuals in achieving personal outcomes.			
30	The provider has considered a range of different and individualized methods and techniques to be used to achieve the individual's personal goals.			
31	The provider has identified and organized employee work tasks to facilitate the achievement of the individual's personal goals.			
32	The Provider participates in discussions related to the individual's record, progress, need for modification to the support or implementation plans, and whether the individuals' needs are being met.			
33	The provider works with the consumer/family/guardian when changes in program direction and/or the implementation plan are requested.			
34 W2.0	The provider is supporting the individual to expand life experiences through being part of the community and to achieve personal goals by offering opportunities, experiences and relevant training for the individual.			
35 W2.0	The provider takes responsibility for addressing individual outcome areas beyond their mission and scope through referral, advocacy or consultation.			
36	The provider actively coordinates the dissemination of information to the individual/family/guardian and other providers in order to promote a cohesive planning and support process.			
Note: The following Expanded Practices will be evaluated only when all preceding required elements of performance for the standard have been met.				
37 Expanded Practice	The provider has a tracking system in place to assure that all individuals are making progress and that effective and timely interventions occur when progress is not made. (Was CA 38)			
38 Expanded Practice	The provider has identified individual and aggregate outcome data for recipients of their service(s) to facilitate the evaluation of supports and services. (Was CA 39)			

Cite		Met	Not Met	N/A
39 Expanded Practice	The provider uses outcome data to implement a more person-centered service delivery system. (Was CA 40)			
40 Expanded Practice	The provider assists the individual with opportunities to meet people who share common interest. (Was CA 41)			
41 Expanded Practice	The provider assists the individual with opportunities to become involved in activities that can help develop friends and relationships. (Was CA 42)			
42 Expanded Practice	The provider assists the individual in developing desired social roles that are of value to the individual. (Was CA 43)			
43 Expanded Practice	The provider supports the individual to achieve goals that the individual is personally responsible for exploring and developing, e.g. volunteer opportunities, club memberships. (Was CA 44)			
<b>Standard: The provider markets and renders services in a professional and ethical manner.</b>				
44	The provider has a written policy that prohibits solicitation of individuals through the use of fraud, intimidation, undue influence, including offering discounts or special offers that include prizes, free services or other incentives. (Was CA 45)			
45	The provider has a written policy that prohibits solicitation of an individual currently receiving services from another vendor for the purpose of inducing the individual to switch vendors through the use of fraud, intimidation, or exertion of undue influence on an individual. (Was CA 46)			
46	The provider implements its marketing policy. (Was CA 47)			
47	There is no indication of non-compliance with acceptable marketing practices. (Was CA 48)			
48	There is no indication that the provider or any employee of a provider is named beneficiary on a Life Insurance Policy for an individual. (NEW 2003)			
49 W2.0	There is no indication that the provider or employees of a provider borrow or use money from an individual or their personal funds. (NEW 2003)			

Cite		Met	Not Met	N/A
<b>Standard: Provider procedures facilitate the resolution of grievances.</b>				
50 DR	The Provider has written grievance procedures containing all the required and relevant information that are used to resolve conflicts that may arise between the individual, family, and/or guardian and the provider. (Was CA 49)			
51	Grievance procedures are annually reviewed and signed by the individual, family and/or guardian, and the provider keeps a copy on file. (Was CA 50)			
52	There is evidence that the consumer(s) is satisfied with the grievance resolution. (NEW 2003) <i>[Note: If the provider has had no grievances filed, score this element 'Not Applicable.']</i>			
53	The provider maintains a log of grievances filed by individuals, families or guardians. (Was CA 55) <i>[Note: The provider should have a log established, even if no grievances have been registered, in order to receive a score of 'Met.']</i>			
<b>Standard: The provider has written policies on required topics, and practices appear consistent with the policy.</b>				
The elements under this standard are ONLY applicable to group or agency providers, and solo practitioners of Adult Day Training, Non-Residential Support Services, Residential Habilitation, Support Coordination, Supported Employment, and Supported Living Coaching. Score 'Not Applicable' for all other service providers.				
54	The provider has written policies on the personal outcome process and the use of outcome information for service delivery planning. (Was CA 62)			
55	The provider implements and follows their policies on the personal outcome process and the use of outcome information in service delivery planning. (New 2003)			
56	The provider has written policies on a person-centered approach to service delivery. (Was CA 63)			
57	The provider implements and follows their policies for using a person-centered approach to service delivery. (NEW 2003)			
58 DR	The provider has written policies on promoting health, safety and well-being of individuals. (Was CA 64)			
59	The provider implements and follows their policies on promoting health, safety and well-being of individuals. (NEW 2003)			
60 W2.0	The provider has written policies on the safe administration and handling of medication, that includes staff training.			

Cite		Met	Not Met	N/A
61	The provider implements and follows their policies on the safe administration and handling of medication, including those related to staff training. (NEW 2003)			
62	The provider has written policies on transitioning of individuals. (Was CA 66)			
63	The provider implements and follows their policies on transitioning of individuals. (NEW 2003)			
64	The provider has written policies on staff training, orientation, and in-service. (Was CA 67) <i>[Note: This element applies to solo as well as agency providers.]</i>			
65	The provider implements and follows their policies on staff training, orientation and in-service. (NEW 2003)			
66	The provider has written policies on self-assessment. (Was CA 68)			
67	The provider implements and follows their policies on self-assessment. (NEW 2003)			
68	If the provider is an agency or group provider, there is an available table of organization, including board of directors (when applicable), directors, supervisors, support staff and all other employees. (Was CA 69) <i>[Note: Score this element as 'Not Applicable' for solo providers.]</i>			
<b>Standard: The provider completes a self-assessment to determine the effectiveness of services being offered and compliance with established requirements</b>				
The elements under this standard are ONLY applicable to group or agency providers, and solo practitioners of Adult Day Training, Non-Residential Support Services, Residential Habilitation, Support Coordination, Supported Employment, and Supported Living Coaching. Score 'Not Applicable' for all other service providers.				
69 DR	The provider conducts a self-assessment at least annually. (Was CA 71)			
70	The assessment examines the provider's compliance with requirements found in the Medicaid Waiver Agreement and Assurances, and applicable rules and regulations. (Was CA 72)			
71 W2.0	The provider's self-assessment is effective in determining the need for improvement. (NEW 2003)			
72 W2.0 DR	A Quality Improvement Plan (QIP) is developed and implemented to address areas needing improvement. (Was CA 73)			

Cite		Met	Not Met	N/A
73 W2.0 DR	Satisfaction survey results “needing improvement” are incorporated into the provider Quality Improvement Plan.			

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 10.04.01; rev. 10.25.01; rev. 10.26.01; rev. 10.31.01; rev 11.01.01; rev 11-13-01; rev.09.05.02; rev.01.03.03;rev.02.03.03; 02.04.03; 02-10-03;  
 02.25.03