# HCBS Provider Attestation Audit Summary for Adult Day Services

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<th>HFID #</th>
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DHS has completed the audit of this setting's provider attestation and any additional submitted documentation.

*A Provider’s Guide to Putting the HCBS Rule into Practice* contains informational guidance, best practices and examples to assist you in understanding each new HCBS requirement and help generate ideas of HCBS-compliant practices.

**Determination of compliance is as follows:**

- [ ] Initial compliance was determined after review of supporting evidence (no further action necessary).
- ✔ Not yet compliant in one or more of the HCBS requirements. Requirements that are not yet compliant are checked below. Please refer to the instructions below each requirement for specific instruction to reach full compliance. Submit the required documentation by attaching the documents to a reply to this email within 30 days of the receipt of this email.

For each HCBS requirement, DHS has specified what documents can be submitted, and specific language to add to these documents, to meet the HCBS requirement.

**Note:** Do not submit documents with participant identifiable information.
8: Employment

**Federal requirement:** The setting provides opportunities for people to seek employment and work in competitive integrated settings.

☐ **Not yet compliant: To comply – Submit the following document(s):**

☐ A staff orientation/training record, employee handbook or staff orientation checklist that includes the following language:

  “Staff are trained on each person’s Individual Plan of Care.”

  (Other acceptable terms: person’s plan, person-centered plan, person’s service/support plan.)

☐ A policy/procedure or client handbook that includes the following language (choose any one of the options below):

  - “We support people to complement their work schedule.”
  - “We offer flexible scheduling/staffing.”
  - “Adult day service attendance is flexible.”
  - “Participants choose the schedule that works right for them.”
  - “People can attend the adult day program as their work schedule permits.”

9: Community life

**Federal requirement:** The setting provides people opportunities to access and engage in community life.

☐ **Not yet compliant: To comply – Submit the following document(s):**

☐ A monthly calendar that shows planned off-site community activities. Example of a monthly calendar that would meet this requirement shown below.

☐ A policy/procedure or client/participant handbook must include the following language:

  “Community events/activities are scheduled and planned based on participant needs and suggestions. A calendar of activities is provided to participants on a monthly basis to keep them informed of community events they can choose to participate in.”
### Sample Monthly Calendar Showing Community Activities

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>1 Coffee/Snack Exercise program:</td>
<td>2 Patio/Garden time Movie of the month</td>
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<tr>
<td></td>
<td></td>
<td>Yoga/Tai Chi</td>
<td>Cards</td>
<td></td>
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<tr>
<td>5 Book Club</td>
<td>6 Band/Quilting or craft Support group(s) Planting/Gardening class</td>
<td>7 Coffee/Snack Cultural awareness seminar Cards/Cribbage</td>
<td>8 Creative writing/poetry Quilting/craft Picnic</td>
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<tr>
<td>Sports trivia</td>
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<tr>
<td>Cooking class</td>
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<tr>
<td>12 Yoga/Tai Chi Music (choir or band) Cards/Board Games Social group/independent crafts</td>
<td>13 Book Club/Independent reading/crafts Sports trivia Cooking class</td>
<td>14 Community Activity- History Museum</td>
<td>15 Pet therapy Open art studio/Group art project Independent table games/puzzles/cards</td>
<td>16 Coffee/Snack Choir/Band Cards/Cribbage Horse Shoes/Bean Bag Toss</td>
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<tr>
<td>19 Community helpers Yoga/Exercise with weights Group/independent crossword</td>
<td>20 Coffee/Snack Cultural awareness seminar Cards/Cribbage/Horse Shoes/Bean Bag Toss</td>
<td>21 Band/Quilting or craft Support group (s) Planting/Gardening class</td>
<td>22 Book Club Sports trivia Cooking class</td>
<td>23 Coffee/Snack Cultural awareness Cards/ Cribbage Horse Shoes/Bean Bag Toss</td>
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### 10: Control of money

**Federal requirement:** The setting supports the person’s control of personal resources (their money).

- ☐ **Not yet compliant:** To comply – Submit the following document(s):
  - ☐ A staff orientation/training record or employee handbook that includes the following language:
    
    “Staff are trained on each person’s Individual Plan of Care (other acceptable terms: person’s plan, person-centered plan, person’s service/support plan).”
  
  - ☐ Policy/procedure or client/participant handbook that includes the following language:
    
    “I have been informed and understand that whenever this program assists me with the safekeeping of my funds or other property, the program must ensure that I retain the use and availability of my personal funds or property unless restrictions are justified and documented.”
11: Privacy

Federal requirement: The setting ensures people’s right to privacy.

☐ Not yet compliant: To comply – Submit the following document(s):
☐ A staff orientation/training record or employee handbook that includes the following language:

“Staff are trained on people’s right to personal privacy and confidentiality of documents (records).”

☐ A recipient rights form or client/participant handbook that includes the following language (choose any one of the options below):

- “All participants have the right to privacy as it relates to their individual plan of care and will be assured confidentiality as it relates to their personal and/or medical records.”
- “All participants have the right to privacy as it relates to their medical and personal care and shall be assured confidential treatment of their personal and medical records.”
- “All participants have the right to expect consideration, courtesy, privacy of care and confidentiality regarding their records and any other information that may pertain to them.”

12: Dignity and respect

Federal requirement: The setting ensures people’s right to dignity, respect.

☐ Not yet compliant: To comply – Submit the following document(s):
☐ A staff orientation/training record or employee handbook that includes the following language:

“Staff are trained on how to exercise and protect participant’s right to be treated with respect.”

☐ A recipient rights form or client/participant handbook that includes the following language (choose any one of the options below):

- “All participants have the right to be treated with dignity and respect.”
- “You have the right to be treated with courtesy and respect.”
- “Participants have the right to be treated with courtesy and respect at all times by the person who provides services to them.”
13: No coercion/restraint

Federal requirement: The setting ensures people’s freedom from coercion and restraint.

☐ Not yet compliant: To comply – Submit the following document(s):

☐ A staff orientation/training record or employee handbook that includes the following language:

“Staff are trained on the Vulnerable Adult Act and the person’s Individual Abuse Prevention Plan, so they understand what maltreatment is, how to prevent it and what to do if it occurs.”

☐ A recipient rights form or client/participant handbook that includes the following language (choose any one of the options below):

• “You have the right to be free from abuse, neglect, coercion, restraint and seclusion.”

• “All participants have the right to be free from abuse, neglect, coercion, restraint and seclusion.”

• “All participants shall be free from mental and physical abuse as defined in the Vulnerable Adults Protection Act. All participants shall have the right to be in a safe environment that is free from coercion and restraint.”

14: Independent choices

Federal requirement: The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact.

☐ Not yet compliant: To comply – Submit the following document(s):

☐ A monthly calendar that shows a variety of daily activities for participants to choose from:

See an example of a monthly calendar that would meet this requirement under #9: Community Life.

☐ A policy/procedure of client/participant handbook that includes the following language:

“Participants are encouraged to participate in a variety of daily recreation/leisure activities while attending the adult day program. Participants will be asked about their interests and activities that they wish to participate in within the adult day program and have choices and options throughout the day that meet their interests and preferences.”
18. Shared programming

☑ This setting is a residential (home) setting that the provider also owns/operates multiple homes located on the same street or adjoining property and shares programming or activities with the other settings.

To comply – Submit a 1-2 page document answering the following questions and include examples:

☐ Describe how often (on a weekly or daily basis?) and what type of programming or activities are shared. For example, do people that live in different homes or buildings dine or share meals, transportation, social recreation activities and outings together on a weekly or daily basis?

☐ Describe how opportunities are presented and available for people to interact with the broader community individually and in groups, as they desired. How often are people asked about their interest in activities in the community? How are people participating, as desired?

☐ Describe how people can individually choose activities to participate in? For example, not everyone has the same activities or schedule. How are people informed of available activities?

Suggested practices: Activities coordinator for offsite activities, activities calendar, people are frequently asked about their interests, people use other supports to access community on an individual level (e.g. formal services, volunteers, information supports).

19. Multiple services

☑ This setting attested that it is designed to provide people with disabilities or older adults multiple types of services and activities onsite, including any two of the following: 1) residential, or 2) day services and 3) medical, and includes the option for people to choose to use community service providers instead of receiving the above multiple services onsite.

To comply – Submit the following document(s):

☐ Supporting documentation pertaining to how people are informed of their option to choose community providers.
List of additional settings:

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