



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
**DEPARTMENT ON DISABILITY SERVICES**

<b>PROCEDURE</b>	
Subject: Person-Centered Modifications	Procedure Number: 2018-DDA-PROC002
Responsible Program or Office: Developmental Disabilities Administration	Effective Date: February 4, 2019
	Number of Pages: 4
Cross References, Related Policies and Procedures, and Related Documents: Home and Community-Based Setting Requirements at 29 DCMR § 1938 <i>et seq.</i> ; Person-Centered Planning Process and Individual Support Plans (ISP) Policy and Procedure; Initial ISP Procedure; Annual ISP Procedure; Human Rights Policy; Provider Human Rights Committee (HRC) Procedure; Provider HRC Minutes Template; and Human Rights Advisory Committee Procedures.	

**1. PURPOSE**

The purpose of this procedure is to establish the process by which the Department on Disability Services (DDS) will review and approve Person-Centered Modifications (PCMs) under the District of Columbia (D.C.) regulations implementing the federal Home and Community-Based Services Rule.

**2. APPLICABILITY**

This procedure applies to all DDS employees, subcontractors, providers, vendors, consultants, and volunteers that provide services and supports on behalf of people with intellectual disabilities who are receiving supports and services as part of the Developmental Disabilities Administration (DDA) service delivery system funded through the Department of Health Care Finance (DCHF) under the Medicaid Home and Community-Based Services (HCBS) Waiver for People with Intellectual and Developmental Disabilities.

**3. DEFINITION AND CITATIONS**

Person-Centered Modifications (PCMs): PCMs are permissible person-centered deviations from the federal HCBS Rule (42 CFR Part 441) as set forth in the District’s Home and Community-Based Setting Requirements regulations (29 DCMR § 1938 *et seq.*).





#### 4. PROCEDURE

##### A. Requirements of the Home and Community-Based Setting Requirements Regulations Eligible for a PCM.

Only specific requirements of the Home and Community-Based Setting Requirements regulations may be modified through a PCM supported by a specific assessed need and justified in the person's Individual Support Plan (ISP) as follows:

1. In Supported Living, Supported Living with Transportation, Host Home Without Transportation, Residential Habilitation, Day Habilitation, Small Group Day Habilitation, Individualized Day Supports, Companion, Supported Employment, Small Group Supported Employment and Employment Readiness settings (*see* 29 DCMR § 1938.1), a person's ISP may contain a PCM developed under this procedure where the regulations otherwise require that each person:
  - a. Have control over his or her personal funds and bank accounts, as evidenced in part by people being able to access their funds, when they want to, and without advanced notice; and
  - b. Be allowed visitors at any time within the limits of the lease or other residency agreement.
  
2. In Supported Living, Supported Living with Transportation, Host Home Without Transportation, Residential Habilitation settings (*see* 29 DCMR § 1938.2), a person's ISP may contain a PCM developed under this procedure where the regulations otherwise require that each person:
  - a. Have privacy in his or her personal space, including entrances to living spaces that are lockable by the person (with staff having keys as needed). This is evidenced in part by staff knocking and receiving permission prior to entering a person's living space;
  - b. Have the freedom to furnish and decorate his or her personal space, as evidenced in part by people's living space reflecting their taste and preferences (*e.g.*, furniture, linens and other household items reflect people's choices), within the limits of the lease or other residency agreement or consistent with the governing Human Care Agreement;
  - c. Have privacy for telephone calls, texts and/or emails, or any other form of electronic communication, *e.g.*, FaceTime or Skype, with or without support, based on person's preference; and





- d. Have access to food at any time, as evidenced in part by: each person has meals at the time and place of his or her choosing, people can request an alternative meal, if desired; and snacks are available and accessible at any time unless there is documentation of a medical condition that requires restrictions.
3. In Day Habilitation, Small Group Day Habilitation, Individualized Day Supports, Supported Employment, Small Group Supported Employment, Companion and Employment Readiness settings (*see* 29 DCMR § 1938.3), a person's ISP may contain a PCM developed under this procedure where the regulations otherwise require that each person;
    - a. Have a secure place to keep their belongings;
    - b. Have access to snacks at any time;
    - c. Have privacy for telephone calls, texts and/or emails, or any other form of electronic communication, *e.g.*, FaceTime or Skype, with or without support, based on the person's preference; and
    - b. Have meals at the time and place of a person's choosing.
- B. Review and Approval of PCMs Through Provider Human Rights Committees

In accordance with 29 DCMR § 1938.4, all PCMs must be reviewed and approved by the Provider Human Rights Committee (HRC), be reviewed and approved by the person's support team at the ISP meeting, and be supported by a specific assessed need, justified and documented in the person's ISP.

When a person and their support team identify a possible need for a PCM, the person's provider is responsible for reviewing the PCM with their HRC to discuss and record:

1. What the person's specific individualized assessed need is that results in the restriction;
2. What prior interventions and supports have been attempted, including less intrusive methods;
3. Whether the proposed restriction is proportionate to the person's assessed needs;
4. What the plan is for ongoing data collection to measure the effectiveness of the restriction;
5. When the HRC and the person's support team will review the restriction again;





6. Whether the person, or his or her substitute decision-maker, gives informed consent; and
7. Whether the HRC and the person's support team has assurance that the proposed restriction or intervention will not cause harm.

Based upon this review, the Provider HRC must make a recommendation for or against a PCM. The Provider HRC minutes must reflect each point in this conversation, including the committee's recommendation. The Provider HRC must use the DDS Provider HRC Minutes Template and upload the meeting minutes for each person into the agency database in the Behavior Support Plan section under the Person tab.

### C. Review and Approval of PCMs at ISP Meetings

1. Prior to any PCM taking effect, the support team must review the proposed PCM and findings of the Provider HRC in accordance with the DDS Person-Centered Planning Process and Individual Support Plans Policy and Procedures. This review will typically occur at the person's annual ISP meeting, but the person's service coordinator shall call an ISP amendment meeting to discuss PCMs, as needed.
2. If the support team agrees with and approves the findings of the Provider HRC, the findings from the Provider HRC shall be attached to the ISP and incorporated by reference, along with a statement that the support team has discussed, reviewed, agreed to, and approved the Provider HRC findings and the PCM.
3. If the support team disagrees with any part of the findings of the Provider HRC or the proposed PCM, the person's service coordinator must ensure that the person's ISP reflects any changes that the support team makes to the Provider HRC findings and the PCM. The remainder of the Provider HRC findings shall be attached and incorporated by reference into the ISP and only that portion of the PCM may take effect.

