<table>
<thead>
<tr>
<th>Type of Setting</th>
<th>Section of the Rule</th>
<th>Issue</th>
<th>Oppose/Silent /Positive</th>
<th># of sites</th>
<th>Remedial Strategy</th>
<th>Lead Agency</th>
<th>Target Date</th>
<th>Ongoing Monitoring</th>
</tr>
</thead>
</table>
| All            | (a) The setting ensures an individual’s rights of privacy, dignity, respect, and freedom from coercion and restraint | DDS Human Rights Policy (2013-DDA-H&W-POL007) and implementing procedures already includes standards and guidelines to ensure safeguards are established to “protect and promote the human rights and freedoms of all people receiving services. The Human Rights policy requires that people served by DDS are “can exercise their right to personal liberty, dignity and respect.” That policy also provides protections from coercion and restraint. Please see [http://dds.dc.gov/book/iii-health-and-wellness/human-rights-policy](http://dds.dc.gov/book/iii-health-and-wellness/human-rights-policy).  

The Most Integrated Community-Based setting policy (2015-DDA-POL01) requires DDS DDA to assist people with intellectual disabilities to obtain services and supports in the “least restrictive and most integrated community-based setting that is most appropriate for the needs of the person and the person is to receive communications that are courteous, respectful of the dignity of the person, and facilitate the person’s understanding of what is being communicated. Also, this policy outlines standards that require privacy, including the opportunity where possible; to be provided clearly defined living, sleeping, entertaining, and personal care spaces. Freedom from discomfort, distress, and deprivation that arise from an unresponsive and inhumane | Positive/Silent All | Most of this was already required by DDS policy, but DDS policy did not specifically include a right to file an anonymous complaint. DDS created a Complaint Policy (2016-DDA-POL01) that includes the right to file anonymously. Please see [http://dds.dc.gov/publication/lda-complaint-policy](http://dds.dc.gov/publication/lda-complaint-policy).  

DDS will update its Most Integrated Community Based Setting policy (2015-DDA-POL01) to specifically include items referenced in the CMS Exploratory Questions – for example, our policy already requires courteous and respectful communications, but we would add that people are addressed by their name or a preferred nickname. Please see [http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy](http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy). | DDS Complaint policy: completed. Most Integrated Community Based Setting policy: 9/30/2018 | Service coordination monitoring, and provider certification review. |
environment.


**All**

b. The setting optimizes individual initiative, autonomy, and independence in making life choices

The Most Integrated Community-Based setting policy (2015-DDA-POL01) set standards that require settings to ensure the “self-determination and freedom of choice to the person’s fullest capability.”

In addition, the Most Integrated Community-Based setting policy (2015-DDA-POL01) sets the standards that “persons with intellectual disabilities have the fundamental right to gain and sustain an optimum level of independence and competency to make decisions and have control over their lives and choices.”


Positive

All

DDS policy already required this. To help ensure that each person is in the most appropriate and integrated HCBs Setting to meet their needs, DDS updated its Individual Support Plan policy, procedure and format to include a required Guided Conversation to Assess Whether a Person is in the Most Integrated Setting. Please see: http://dds.dc.gov/book/individual-support-plans-policy-and-procedures/isp-policy.

DDS Completed

Service coordination monitoring, and provider certification review.

**All**

c. The setting facilitates individual choice regarding services and supports, and who provides them

The Most Integrated Community-Based setting policy (2015-DDA-POL01) set standards that require settings to ensure the “self-determination and freedom of choice to the person’s fullest capability.”

In addition, the Most Integrated Community-Based setting policy (2015-DDA-POL01) sets the standards that “persons with intellectual disabilities have the fundamental right to gain and sustain an optimum level of independence and competency to make decisions and have control over their lives and choices.”


The Individual Support Plan policy (2015-DDA-POL24) sets the standard

Positive

All

This is already covered by DDS policy. However, to help ensure informed choice, DDS updated its Individual Support Plan policy (2015-DDA-POL24) and procedure and format to specifically include a discussion and documentation of informed choice. Please see: http://dds.dc.gov/book/individual-support-plans-policy-and-procedures/isp-policy.

DDS Completed

Service coordination monitoring, and provider certification review.
that DDS shall “support each person to make an informed choice of types of supports and providers.” Please see: http://dds.dc.gov/book/individual-support-plans-policy-and-procedures/isp-policy.

DDS Transition policy (2013-DDA-POL06) requires that “people who receive services and supports from DDA have the right to choose which providers support them.” Please see: http://dds.dc.gov/book/transition-policy-and-procedures/transition-policy.

DDS Transition policy (2013-DDA-POL06) requires that “people who receive services and supports from DDA have the right to choose which providers support them.” Please see: http://dds.dc.gov/book/transition-policy-and-procedures/transition-policy.

All

d.(i) The setting provides opportunities to seek employment and work in competitive integrated settings

<table>
<thead>
<tr>
<th>Setting Description</th>
<th>Positive</th>
<th>All</th>
<th>DDS</th>
<th>Completed</th>
</tr>
</thead>
</table>
| The Most Integrated Community-Based (2015-DDA-POL01) setting policy sets standards “Each person on his or her pathway to community integration and employment, including providing opportunities for employment, community exploration, and meaningful non-work activities in the community.” Please see http://dds.dc.gov/book/service-planning/most-integrated-community-setting-policy.

The Employment First Policy (2014-DDS-EMPL-01) requires that for people DDA supports, on-going career planning shall be addressed in the Person Centered Planning Process using Discovery or other forms of person-centered vocational assessment so that career and career advancement opportunities are explored on a regular basis. If a person is served by both DDA and RSA or with another partner, these plans should be coordinated and reflect the person's interest and career goals. Information gained from the Discovery process or other assessments, or the use of other Person Centered Thinking tools shall be used to guide and inform the development of the Person Centered Employment Plan, Individual Plan for Positive | All | DDS | Completed |

To help ensure that each person is on a pathway to competitive, integrated employment, DDS updated its Individual Support Plan policy, procedure and format to include a required Guided Conversation on Employment. Please see: http://dds.dc.gov/book/individual-support-plans-policy-and-procedures/isp-policy.

DDS Completed Service coordination monitoring, and provider certification review.
| All | d. (ii) engage in community life | The Most Integrated Community-Based setting policy (2015-DDA-POL01) sets standards that require settings to provide the “opportunity to engage in activities and styles of living that encourage and maintain the integration of the person in the community, including social integration in settings typical of the community, which maximize the person’s contact with others who live or work in that community.” Please see http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy. | Positive | All | No remedial action required. | DDS | Completed | Service coordination monitoring, and provider certification review. |
| All | d. (iii) The setting provides opportunities to control personal resources. | It is the DDS Personal Funds policy (2014-DDA-POL006) to “ensure that people who receive supports and services from DDA control their own resources to the greatest extent possible, and that people’s funds are accounted for and safeguarded.” However, the Personal Funds policy (2014-DDA-POL006) also requires each residential provider to account for maintaining of personal accounts. So therefore, the policy requires people to control their personal funds but also requires providers to manage personal resources and provide an accounting to DDS. Please see: http://dds.dc.gov/book/personal-funds-policy/personal-funds-policy. | Positive/Silent | All | DDS will work with stakeholders to update its Personal Funds policy to ensure that it is not creating any unnecessary barriers to a person’s ability to control his or her personal resources, while ensuring protections. http://dds.dc.gov/book/personal-funds-policy/personal-funds-policy. Additionally, the waiver regulations General Provisions require that any permissible deviation from HCBS Settings requirements is reviewed and approved as a restriction by the Provider’s Human Rights Committee. DDS developed a required template for meeting minutes, available on-line at http://dds.dc.gov/publication/hrc-meeting-template. DDS will update its Provider HRC procedure to align. This might also require an update to DDS’s Behavior Supports policy and procedures. | DDS | Provider HRC procedure: 9/30/2018 Personal Funds Policy: 9/30/2018 | Service coordination monitoring, and provider certification review. |
| All | e. The setting is integrated and supports access to the greater community | The Most Integrated Community-Based Setting policy (2015-DDA-POL01) requires “The ISP shall emphasize residential supports that promote the person's independence and the opportunity to actively engage with other citizens who live and work in that community. Toward this goal, the ISP | Positive | All | No remedial action required. | DDS | Completed | Service coordination monitoring, and provider certification review. |
| All | 1. The setting provides opportunities to engage in community life | The Most Integrated Community-Based Setting policy (2015-DDA-POL01) requires "The ISP shall emphasize residential supports that promote the person's independence and the opportunity to actively engage with other citizens who live and work in that community. Toward this goal, the ISP team process shall consider residential supports that actively promote and enhance each person's growth, attainment, and maintenance of independence, and that least interfere with the person's independence while providing the services that address the person's needs." Please see [http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy](http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy). | Positive | All | No remedial action required. | DDS | Completed | Service coordination monitoring, and provider certification review. |

| All | g. the setting provides opportunities to control personal resources | It is the DDS Personal Funds policy (2014-DDA-POL006) to “ensure that people who receive supports and services from DDA control their own resources to the greatest extent possible, and that people’s funds are accounted for and safeguarded.” However, the Personal Funds policy (2014-DDA-POL006) also requires each residential provider to account for maintaining of personal accounts. So therefore, the policy requires people to control their personal funds but also | Mixed | All | DDS will work with stakeholders to update its Personal Funds policy (2014-DDA-POL006) and procedures to ensure that it is not creating any unnecessary barriers to a person’s ability to control his or her personal resources, while ensuring protections. [http://dds.dc.gov/book/personal-funds-policy/personal-funds-policy](http://dds.dc.gov/book/personal-funds-policy/personal-funds-policy). Additionally, the waiver regulations General Provisions require that any permissible deviation from HCBS Settings requirements is reviewed and approved as a restriction by the Provider Human Rights Committee (HRC). | DDS | | |
requires providers to manage personal resources and provide an accounting to DDS.


DDS developed a required template for meeting minutes, available on-line at http://dds.dc.gov/publication/hrc-meeting-template.


9/30/2018

All

8. The setting provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS

No policies speak to this currently. Silent All DDS will update its Most Integrated Community-Based Setting policy to specifically include this. http://dds.dc.gov/book/ii-service-planning/most-integrated-community-setting-policy.

DDS Most Integrated Community Based Setting policy: 9/30/2018

Service coordination monitoring, and provider certification review.

All

1. (i) The setting is selected by the individual from among other options including non-disability specific settings and a private unit in a residential setting

No policies spoke to this. Silent All DDS updated its Individual Support Plan policy (2015-DDA-POL24) and procedure to more specifically include a requirement that people consider non-disability specific settings. This is also a part of the guided conversation on Most Integrated Setting. Please see: http://dds.dc.gov/book/individual-support-plan-policy and http://dds.dc.gov/publication/assessing-most-integrated-day-informed-consent.

DDS Completed Service coordination monitoring, and provider certification review.

All

1. (ii) The setting is a private unit in a residential setting

No policies speak to this currently. Silent All DDS will issue a policy on Contribution to Cost of Supports that will address choice of units and ability to have a private unit, if the person is able to contribute.

DDS Contrib. to cost of supports: 9/30/2018

Service coordination monitoring, and provider certification review.

All Residential

1. If provider-owned or controlled, the setting provides a specific

No policies speak to this currently. Silent All No remedial action required. This is governed by the General Provision regulations and Human Care Agreements.

DDS Completed Service coordination monitoring, and
| All Residential | k. If provider-owned or controlled, the setting provides the same responsibilities/protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity | No policies speak to this currently. | Silent | All | No remedial action required. This is governed by the General Provision regulations and Human Care Agreements. General Provisions, http://www.dcregs.dc.gov/Gateway/RuleHome.aspx?RuleNumber=29-1900, Home and Community Based Settings Requirements. A sample HCA for residential expenses is available on-line at: http://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Residential%20Expenses%20and%20Services%20DCJM-2015-H-0006.pdf. | DDS | Completed | Service coordination monitoring, and provider certification review. |
| All Residential | l. If the setting is provider-owned or controlled and the tenant laws do not apply, the state ensures that the lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction’s landlord tenant law. | No policies speak to this currently. | Silent | All | No remedial action required. This is governed by the General Provision regulations and Human Care Agreements. General Provisions, http://www.dcregs.dc.gov/Gateway/RuleHome.aspx?RuleNumber=29-1900, Home and Community Based Settings Requirements. A sample HCA for residential expenses is available on-line at: http://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Residential%20Expenses%20and%20Services%20DCJM-2015-H-0006.pdf. | DDS | Completed | Service coordination monitoring, and provider certification review. |
| All | m. If provider-owned or Although the Human Rights (2013-2014) | All | DDS will update it’s the Human Rights (2013-2014) | DDS | Most | Service |

The waiver regulations General Provisions require that any permissible deviation from HCBS Settings requirements is reviewed and approved as a restriction by the Provider’s Human Rights Committee. 


DDS developed a required template for meeting minutes, available on-line at: [http://dds.dc.gov/publication/hrc-meeting-template](http://dds.dc.gov/publication/hrc-meeting-template).


<table>
<thead>
<tr>
<th>All Residential</th>
<th>o. If provider-owned or controlled, the setting provides individuals who are sharing units a choice of roommates.</th>
<th>No policies speak to this currently.</th>
<th>Silent</th>
<th>All</th>
<th>DDS will issue a policy on Contribution to Cost of Supports that will address choice of units and ability to have a private unit, if the person is able to contribute.</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Residential</td>
<td>p. If provider-owned or controlled, the setting provides individuals with the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</td>
<td>No policies speak to this currently.</td>
<td>All</td>
<td>DDS will update its Most Integrated Community Based Setting policy (2015-DDA-POL01) to specifically address this.</td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>q. (i) If provider-owned or controlled, the setting provides individuals with the freedom and support to control their schedules and activities</td>
<td>No policies speak to this specifically</td>
<td>All</td>
<td>DDS issued guidance on the requirement for Individualized Schedules. DDS also updated the General Provisions to require that “All Supported Living, Supported Living with Transportation, Host Home, Residential Habilitation, Day Habilitation and Employment Readiness settings must create individualized daily schedules for each person receiving supports, that includes activities that align with the person’s goals, interests and preferences, as</td>
<td></td>
</tr>
</tbody>
</table>
| All | (ii) If provider-owned or controlled, the setting provides individuals with the freedom and support to access to food at any time | No policies speak to this currently. | Silent | DDS will update its Human Rights Policy (2013-DDA-H&W-POL007) to specifically include this. [http://dds.dc.gov/book/iii-health-and-wellness/human-rights-policy](http://dds.dc.gov/book/iii-health-and-wellness/human-rights-policy)  


### All

s. If provider-owned or controlled, the setting is physically accessible to the individual.
