

Education Manual for Maryland Home and Community-Based Settings:

Assisted Living Facilities

Why You Are Getting This Manual

Your Assisted Living Facility (ALF) is required to meet new criteria by January 2019 due to the Home and Community Based Settings Rule.

This rule, issued by the Federal Medicaid agency, applies to all Medicaid assisted living providers. This manual will explain the rule and how you can meet the criteria. Providers who do not follow the rule will not be paid after the deadline.

How to Use the Manual

Below you will find the rule broken into six sections. In each section, there is a checklist and examples of what to do. If you can check all of the boxes, you may be compliant with the rule. Please keep in mind that to be compliant, you **must meet all of the criteria with a checkbox next to it**.

Compliance Process

The Maryland Department of Health will begin to conduct site visits to Medicaid providers in July 2017. During the site visit, MDH staff will educate providers on the rule. We will help identify areas of concern. Providers will have the chance to ask questions. A second site visit to verify full compliance will happen in 2018.

Where to Get Help

You can find more information at our website.

https://mmcp.dhmh.maryland.gov/waiverprograms/Pages/Community-Settings-Final-Rule.aspx

For questions related to the rule, please email mdh.hcbssetting@maryland.gov. Or you can call 410-767-1820.

Additional resource links are listed at the end of this manual.

Home and Community-Based Settings Criteria

1. Accessibility: Residents can move around the home on their own. They can use wheelchairs or other tools, as needed.

To comply with this rule, all of the following should be true:

- The site has bathrooms residents are able to use.
 - If a resident needs a raised toilet seat, one should be provided in the bathroom. Doors should be wide enough and grab bars may be needed.
- The site has furniture that residents can access and use.
- The site has an accessible kitchen that residents can use.
- The home is modified so people with disabilities can use it.

 If a resident uses a wheelchair, doorways should be wide enough for them to get through. A ramp should be provided, if needed.
- **2. Community Integration**: Residents should have access to the community. This means they should be able to go out just like their neighbors.



To comply with this rule, all of the following should be true:

- Residents can access the community like neighbors who do not need help.
 Residents should be able to leave the facility to attend a sporting event or go to a religious service.
- Members of the community are able to visit the residents at the ALF.
 Residents could have a game night at the ALF where community members visit and play board games.
- Residents are told about community activities.
 A calendar of community events could be posted in the kitchen to make residents aware of activities they could go to within their community.
- Residents are asked how often they want to take part in community activities outside the ALF.
- When residents take part in community activities, they are able to interact with people who do not receive help from Medicaid.
- Transportation is offered for residents to access the community.



Residents should have the same access to transportation as other community members. You could post a bus schedule in the kitchen. The phone number for local paratransit or taxi services should be posted.

3. Privacy, Dignity, and Respect: Residents have the same rights to privacy, dignity, and respect as other community members who do not reside in Medicaid-funded ALFs.

To comply with this rule, all of the following should be true:

- Staff is available to help residents privately.
- Residents have a private space to meet with their visitors.
- Residents have a private space to use the phone and/or other electronic communications.
- Residents are able to access the phone and/or other communication devices at any time.
- Staff communicates with residents in a way they can understand. Staff might communicate with residents in their native language so they are better understood.
- Staff knocks and asks for permission to enter before entering a resident's bedroom.
- Staff knocks and asks for permission before entering the bathroom when a resident is using
- Residents and/or their legal representatives are given the option of a unit with a private bedroom.
 - Every facility is not required to have private rooms. However, if the resident wants a private room, they should be made aware of other options in the area.
- Personal information about residents is kept in a secure and private location. All staff should be trained in confidentiality policies. Resident files should be kept in a locked cabinet or computer.



- Residents have a secure place to store their personal items.
- Residents have lockable bedroom doors.
- Residents have lockable bathroom doors.
- Residents have keys to the entrance door of the ALF.
- Residents have keys to their bedroom doors.





4. Choice and Autonomy: Residents should have the same choice in their daily lives as other community members.

To comply with this rule, all of the following should be true:

- Residents are asked what their needs and preferences are for types of activities at the site.
- Residents who want to work in integrated settings are encouraged to do so.
- Residents are given information regarding how to make changes to their services.
- Residents are able to choose who they interact with during group activities.
- There are activities schedules posted (Currently required by OHCQ).
- Outside of scheduled times, residents are able to choose when they eat.

 For instance, residents could keep snacks in their rooms or snacks could be left out in common areas.
- Residents are able to choose where they eat.
- Residents are able to choose what they eat.
- Residents choose the setting among other options.
- Residents know how to file a complaint.
- **5. Freedom from Coercion and Restraint**: Residents should not be pressured or physically forced into doing anything they do not wish to do.

To comply with this rule, all of the following should be true:

- Residents are informed of the use of restraints. Restraints are only used in accordance with a doctor's order and documented in the person centered plan.
- Residents have the freedom to come and go as they wish

The facility should not have a curfew.

• Residents are able to control their own funds.

Residents can choose when and how to spend their money. Any allowance or spending schedule should be controlled by the resident and be their choice.



6. Lease: ALF residents should have a legally binding agreement which gives the resident the same rights and protections as the landlord-tenant laws in the area.

To comply with this rule, all of the following should be true:

 Residents and/or their legal representatives signed a lease or other legally-binding document that describes their rights.



- Residents who are sharing bedrooms were given a choice of their roommates.
- Residents have the freedom to decorate their own space with the items of their choosing. *Residents should be able to hang pictures in their rooms.*
- Residents are able to have visitors at any time of the day.

 Visitors should be allowed to enter the ALF at any time. A facility may require guests to knock before entering and sign in when they arrive.

Modifications to the Rule:

Out of concern for a resident's health and safety, it may not be possible to comply with all of the above rules. If a part of the rule must be revised for a resident, the following steps must be taken to make sure that the ALF is still in compliance

- 1. Identify the need of the resident. For example if a resident cannot choose what they eat because of a choking hazard.
- 2. Document efforts to meet the need that did not work.

 Document that staff monitoring did not reduce the risk of choking.
- 3. Provide a clear description of the condition that is directly proportionate to the need. Document that a restricted diet of pureed food with staff monitoring is the only way to ensure safety.
- 4. Include periodic timeframes for reviews to verify that the modification is effective. *Review weekly care notes to make sure that the resident is not choking.*
- 5. Include the informed consent of the resident.

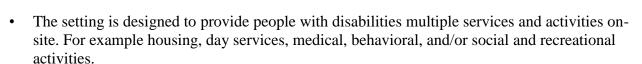
Discuss the new diet and make sure they agree with the plan.

6. Include an assurance that the modifications and supports will cause no harm to the individual.

Presumed Institutional Settings

Some settings are presumed to not meet the standards of the rule. If you can check any of the boxes in this section below, an additional review of the ALF may be required.

- My facility provides inpatient treatment
- My facility is located near, within or inside of a public institution.
- My facility is designed specifically for people with a certain type of disability.
- Individuals are exclusively people with disabilities and the staff.



The individuals in the setting have limited interactions with the broader community.

Additional Resources

The Guardianship and Its Alternatives Handbook provides information about guardianship law in Maryland.

http://www.mdlclaw.org/wp-content/uploads/2011/12/Guardianship-Handbook-2011.pdf

A Guide for Representative Payees is available from the Social Security Administration to explain the responsibilities of a representative payee. https://www.ssa.gov/pubs/EN-05-10076.pdf

The Maryland Technology Assistance Program website provides information about assistive technology.

http://mdod.maryland.gov/mdtap/Pages/MDTAP-Home.aspx

This website will provide you with information regarding accessible design to make sure that your ALF is accessible to your residents.

https://www.ada.gov/index.html

This page will provide information regarding landlord/tenant laws in Maryland. https://www.peoples-law.org/cat/housing/landlordtenant

