

**LICENSURE INDICATOR GUIDELINES**

INDICATOR	REGULATORY REFERENCE / ADDITIONAL GUIDELINES	INFORMATION SOURCE	HOW MEASURED	CRITERIA FOR STANDARD MET	CRITERIA FOR STD. NOT MET
<p>L49 ALL</p> <p>Individuals and guardians have been informed of their human rights and know how to file a grievance or to whom they should talk if they have a concern. (Strengthened guidelines)</p>	<p><b><u>Regulations 3.09 (3) (b) (1) through and (4) ...shall designate and empower a person employed or affiliated with the provider or agency...</u></b>  <b><u>3. to provide individuals served with opportunities to exercise their rights to the fullest extent of their capabilities and interests, including informing them of the grievance procedures and the right to go to the human rights committee on any issue involving human rights;.....</u></b></p> <p><u>Guidelines:</u>            Both individuals and guardians need to be apprised of their rights to file a grievance. This is distinct from being trained in reporting an allegation of abuse or mistreatment, and is more focused on ensuring that individuals know that there is at least one person that they can turn to if questions or concerns arise. Therefore, while individuals may not understand the exact process or be familiar with the human rights committee, individuals should be able to identify one person, be it the Human Rights Officer, or someone else referenced by name with whom they feel comfortable sharing concerns and raising issues.</p> <p>In addition, guardians also need to be aware that there is someone that they can speak to in the event that they have a concern. The Office of Human</p>	<p>Individual training and guardian documentation</p> <p>Individual interview and observation</p> <p>Guardian information</p> <p>Guardian Interview</p>	<p>Review training to individuals and guardians and whether human rights training has occurred at least annually.</p> <p>Determine whether individuals/guardians have been informed of the right to be free from arbitrary eviction, through the presence of a residential agreement.</p> <p>Assess whether individuals are aware of whom they can talk to in the event of a concern. Observe individual’s capabilities and how they share concerns within the setting.</p> <p>Determine whether guardians have been informed of how to file a grievance and report concerns to human rights and/or can identify someone to whom they feel comfortable talking to if they have a concern.</p>	<p>Individuals and/or guardians have been trained in how to file a grievance and/or individuals and guardians can identify someone to whom they feel comfortable talking to if they have a concern.</p> <p>Individuals and guardians have received annual training in human rights and residential agreements are in place as appropriate.</p>	<p>Individuals and/or guardians have not been trained in how to file a grievance and/or Individuals and/or guardians cannot identify someone to whom they feel comfortable talking to if they have a concern and/or individuals and guardians have not received annual training in human rights and/or residential agreement is not in place when appropriate.</p>

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	<p>Rights suggests identifying for guardians and family members the Human Rights Officer for the program, the Human Rights Coordinator for the agency and the DDS Human Rights Specialist.</p> <p>Lastly, individuals residing in provider owned or operated homes are expected to have the same protections from arbitrary and capricious eviction that are afforded to others renting in the community.</p>				
<p>L50</p> <p>Written and oral communication <b>with and</b> about <b>and with</b> individuals is respectful.</p> <p>(Revised indicator and strengthened guidelines)</p>	<p><b><u>Regulations 7.03 (1) (a):</u></b> <b><u>All providers shall assure that the supports and services they provide to individuals promote the following ...</u></b> <b><u>(a) Rights and dignity: Protection and enhancement of the rights of individuals, including but not limited to a focus of respect of the individual...</u></b></p> <p><b><u>CMS § 441.530 Home and Community-Based Setting.(a) (1) (iii) Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</u></b></p> <p><u>Guidelines:</u> Promoting people's self-esteem is a fundamental ingredient in all services and supports. It is demonstrated when interactions with and attitudes about individuals are respectful and acknowledge the inherent value of each person. Service practices and supports, such as using a respectful tone of voice, and adult language when speaking with and</p>	<p>Individual Record</p> <p>Staff Log</p> <p>Staff Interview</p> <p>Observation</p> <p><b>Individual Interview</b></p>	<p>A sample of individual supports are reviewed to determine whether written and oral communication <b>with and</b> about individuals is respectful.</p>	<p>Oral and written communication <b>with and</b> about individuals is respectful and supports individuals as adults.</p>	<p>Oral <b>and/or</b> written communication <b>with and</b> about individuals is not always respectful <b>and/or</b> does not always support individuals as adults.</p>

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	<p>assisting people, encourage people to see themselves and have others view them as unique, valuable individuals and adults. Staff call people by their preferred names instead of overly familiar terms like “honey” or “sweetie”. Staff do not talk about people in the third person or use labels (“the runner”, “the autistic”). Staff need to listen to what individuals have to say and support individuals to have a voice. Staff should always have conversations with individuals, rather than talking at or over individuals. If staff cannot immediately address a need, staff ensure that the individual understands that the need has been heard and will be addressed soon.</p> <p>In addition, it is essential that respectful communication when discussing or reporting information about individuals occurs.</p> <p>Staff are sensitive to the ways to approach and relate to an individual with a disability when interacting with individuals specific to their needs. This includes proper wheelchair use which recognizes that wheelchairs are an extension of personal space, speaking at the appropriate tone/level of voice for people who are hearing impaired (no shouting), and having a person who is blind hold the arm instead of leading or propelling the person, etc. Staff describe people in positive and affirming ways with a focus on their abilities, not their disabilities. This includes the use of people –first language.</p>				

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<p>L52</p> <p>Individuals can make and receive phone calls and use other communication technology.</p> <p>(Revised indicator and strengthened guidelines)</p>	<p><b><u>Regulation 5.04 (1) (a): ... the right to have reasonable access to a telephone and opportunities to make and receive confidential calls and to have assistance when desired and necessary to implement this right ...</u></b></p> <p><b>CMS § 441.530 Home and Community-Based Setting.(a) (1) (iii) Ensures an individual's rights of privacy...</b></p> <p><u>Guidelines:</u> Individuals must have the opportunity to privately use communication technology (telephone, mail, email, instant messaging, facebook, twitter, and other applications) in most circumstances. However, opportunities to make and receive calls or use communication devices can be restricted for clinical / safety reasons provided however, it is part of an approved written plan, with approval from the necessary review groups including but not limited to the individual/guardian and the human rights committee.</p> <p>At an employment / work settings, reasonable practices concerning use and access to the telephone and other communication technologies may be established. For example, the service may establish guidelines in which all employees, including staff, have access to the telephone and other communication devices for personal calls only during lunch and free time. Opportunities to</p>	<p>Individual interview and observation</p> <p>Site review and staff interview</p>	<p>Review a sample of individuals to determine whether individuals can access communication devices such as telephone, cell phone, computer, mail in private if wanted.</p> <p>Compare observations and staff reports of telephone communication practices and restrictions if any with a corresponding written rationale, plan and approval to determine whether there is consistency between what is being reported and any written plan.</p>	<p>There is free access to individuals to use communication devices in private or restrictions to such use are in place with plan that has been reviewed and approved per regulation.</p>	<p>There is not free access to individuals to use communication devices in private or restrictions to such use are in place without a plan that has been reviewed and approved per regulation.</p>

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	<p>make and receive calls in emergency situations should not be restricted.</p> <p>Communication technology must be accessible to all individuals including individuals who are deaf or hard of hearing.</p> <p>Staff need to provide assistance to those who need help utilizing communication devices and the telephone such as by facilitating dialing, adjusting the volume, holding the phone, assisting individuals to send/ receive emails etc. <b>This assistance should still allow for privacy to the greatest extent possible.</b> Staff provide support in other ways as well including, but not limited to, <b>training on computer use and internet safety.</b> Training may also be provided by an outside agency/source as necessary.</p>				
<p>L54</p> <p>Individuals have privacy when taking care of personal needs and discussing personal matters.</p> <p><b>(Strengthened guidelines)</b></p>	<p><b><u>Regulation 5.03 (8): Privacy, including the opportunity wherever possible, to be provided clearly defined private living, sleeping and personal care spaces ...</u></b></p> <p><b><u>CMS § 441.530 Home and Community-Based Setting.(a) (1) (iii) Ensures an individual’s rights of privacy...</u></b></p> <p><u>Guidelines:</u> Individuals have the right to privacy. Personal care, provided for or by the individual, must occur in a private space. This means that <b>e.g., among</b></p>	<p><b>Site visit</b></p> <p>Staff interview</p> <p>Staff log</p> <p>Individual interview/ observation</p>	<p>A sample of staff is interviewed and individuals are interviewed/ observed to determine whether individuals understand that they must be afforded privacy when engaging in personal needs or discussing personal matters.</p> <p>A sample of sites is observed to determine whether privacy is supported in practice.</p>	<p>There is observational evidence that individuals have privacy when taking care of personal needs and discussing personal matters. There is no publicly displayed information about individuals.</p>	<p>There is minimal observational evidence that individuals have privacy when taking care of personal needs and discussing personal matters <u>and/or</u> there is publicly displayed information about individuals.</p>

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	<p>other situations, the bathroom door is shut when in use and that staff assist individuals with dressing/undressing in the individuals' bedroom/bathroom. Opportunities are provided for individuals to have private conversations with family, friends, other housemates and staff. Personal information and personal conversations must be kept private and not be posted or discussed.</p>		<p align="center">PW Only</p>		
<p><b>(HUMAN RIGHTS) L-90</b></p> <p>Individuals are able to have privacy in their own personal space.</p> <p>(New indicator)</p>	<p><b>CMS § 441.530 Home and Community-Based Setting.(a) (1) (iii) Ensures an individual's rights of privacy...</b></p> <p>Privacy for individuals in 24 hour residential supports and placement services begins with each individual having clearly defined private living, sleeping and personal care spaces. There should be a lock on the bedroom door, unless otherwise contraindicated and documented through the ISP process or unless the bedroom door leads to an egress. Even if individuals are sharing a room, there is an expectation that their sleeping area and furniture is their private space. Staff (Home providers) knock before entering a person's room. Staff /Home providers encourage and support other people to respect others' privacy. Staff (Home providers) do not enter people's rooms without permission. This permission can be given prior to entry. For example, staff obtained permission to enter the bedroom, but needs to step away and return momentarily, and don't need to ask for permission to reenter when she/he returns. Staff /Home providers do not open people's closets or</p>	<p>Site visit</p> <p>Individual interview/ observation</p> <p>Staff interview</p>	<p>A sample of sites is reviewed to determine whether there is environmental support for privacy (e.g. private meeting space; private bedrooms).</p> <p>A sample of staff is interviewed and individuals are interviewed/observed to determine whether individuals understand that they have privacy in their own personal space.</p> <p>A sample of sites is observed to determine whether privacy is supported in practice (i.e., staff knock on doors, individuals are able to be in their rooms).</p>	<p>There is substantial interview and observational evidence that individuals have privacy in their own personal space(s), and the individual has a lockable bedroom door (unless contra-indicated or leading to egress).</p>	<p>There is minimal indication through interview and/or observational evidence that individuals are able to have privacy in their own personal spaces and/or the individual does not have a lockable bedroom door.</p>

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	<p>drawers without permission.</p> <p>Individuals are supported to be alone when they want. They can spend time alone in their rooms, with the door closed, if they choose. They are allowed and even encouraged to close the bedroom door when they want or need privacy. For individuals with roommates, there are opportunities to be alone. Staff facilitate these opportunities and work with roommates to come to agreements that respect and foster privacy of all roommates.</p>				

Licensure revised and