



DDSN Executive Memo

TO: EXECUTIVE DIRECTORS OF DSN BOARDS; CEOS OF CONTRACTED SERVICE PROVIDERS; RESIDENTIAL DIRECTORS; DAY PROGRAM DIRECTORS

FROM: KYLA SCHULTZ-EXECUTIVE RISK AND COMPLIANCE MANAGER *KMS*

DATE: DECEMBER 11, 2020

RE: Fiscal Year 20/21 Licensing Information and Clarifications

Purpose:

DDSN has received several requests for additional information and clarification related to the licensing process. The information contained in this memo supplements and clarifies existing standards and tools.

Discussion:

1. In order to streamline the licensing process for SLP II programs, DDSN is moving towards a goal of having SLP II license dates align. This will eventually decrease the number of licensing visits, as there will only be the need to inspect once a year to complete all of the SLP II annual licensing inspections. As this alignment is implemented, there may be the need to have some locations inspected more than once in a 12 month period.
2. The Center for Medicaid and Medicare (CMS) has issued new requirements (known as the Final Rule) for Home and Community Based Settings (HCBS). These requirements apply to many DDSN programs and have been incorporated into a variety of standards and tools in order to provide evidence of implementation. These new rules require an adjustment of philosophy and a commitment to person centered planning/thinking. Central to this philosophy shift is ensuring that a person's environment is one that is fully physically accessible. This means that the person can fully experience all the benefits of their home with a focus on safety, choice and autonomy.

DDSN recognizes the practical physical site and budgetary challenges such a shift will require. To that end, DDSN is providing the below clarification of the licensing standard related to physical accessibility of the setting.

Standard	Clarification
<p data-bbox="196 155 350 302">2.15 The setting is physically accessible.</p>	<p data-bbox="436 155 1219 302">DDSN expects that providers are assessing the physical accessibility of settings, acknowledging the need for improvement, and putting plans in place to become compliant.</p> <p data-bbox="436 344 1312 611">The requirements for accessibility accommodations for mobility related adaptations such as full egress from all exits to the home, lips in doorways, narrow hallways/doorways etc. must be implemented per the guidance in this standard. Providers have limited flexibility with the full implementation of mobility accommodations due to their direct connection to health and safety protections.</p> <p data-bbox="436 653 1305 1024">The requirements for accessibility accommodations such as appliances, counter heights, and furniture must be implemented in consideration of the assessment and person-centered planning process. The decision to make an accessibility change in the home for these types of items, must include consideration of the abilities of the person and their interest to have accommodations put in place in their home. Assessments must include documentation of the discussion with the person about their interests in accessibility changes at their home.</p> <p data-bbox="436 1066 1317 1415">For example: if a person has an interest to learn to prepare meals, the provider needs to assess the person's needs in that area. Then provider can create a plan that describes how to move towards adding accessibility options to the home to meet that need/desire. However, if the person does not express any interest in learning to prepare meals, the provider needs to document the outcome of that discussion in the assessment and no further plan would be needed and no modifications to the home would be necessary.</p> <p data-bbox="436 1457 1265 1604">When a setting has people living at it that are assessed to have different accessibility desires and needs, the provider will work with the people in the home to create a plan to fairly balance accommodations.</p> <p data-bbox="436 1646 1154 1724">What must a setting do in order to ensure physical accessibility?</p> <p data-bbox="436 1766 1289 1984">At a minimum, the setting must comply with existing requirements under federal, state, and local law (e.g., fire safety codes, the Fair Housing Act and the Americans with Disabilities Act (ADA), if applicable). In addition, the setting must ensure that people can come and go from the setting and have visitors at times of their choosing. The setting also</p>

must ensure that people have unrestricted access to all common areas of setting (e.g., the kitchen, living room, laundry room, deck, yard etc.). In order to ensure that all parts of the setting that are normally available to people are accessible to people with disabilities, the setting may need to provide widened doorways, laundry machines with front (not top) access, cabinets and counters at a non-standard height, ramps, or other accommodations.

In considering whether a setting meets the accessibility requirements, the DDSN will consider the following factors suggested by CMS:

- Do people have full access to typical facilities in a home such as a kitchen with cooking facilities, dining area, laundry, and comfortable seating in the shared areas?
- Are there gates, Velcro strips, locked doors, or other barriers preventing entrance to or exit from certain areas of the setting?
- Is the setting physically accessible and there are no obstructions such as steps, lips in a doorway, narrow hallways, etc., limiting mobility in the setting or if they are present are there environmental adaptations such as a stair lift or elevator to overcome the obstruction?
- For people who need supports to move about the setting as they choose, are supports provided, such as grab bars, seats in the bathroom, ramps for wheel chairs, viable exits for emergencies, etc.?
- Are appliances accessible (e.g. the washer/dryer are front loading for individuals in wheelchairs)?
- Are tables and chairs at a convenient height and location so that people can access and use the furniture comfortably?

Where immediate achievement of all of the above standards—or prompt achievement of these standards as new needs arise—would entail a significant capital expense (e.g., buying new laundry appliances or adjusting counter heights), providers may wait to incur the expense until the affected part of the setting is rebuilt/remodeled/replaced. This delay is not allowed for new settings and does not authorize any provider to delay compliance with the Fair Housing Act, the ADA, or any other existing law.

In cases where the provider would incur a significant capital expense to bring a setting up to standard for any reason, providers must show evidence of an assessment of the setting and plan to bring the setting up to accessibility

	<p>standards. The plan must align with the assessed needs of each person in the home and be documented via the person centered planning process.</p> <p>Exceptions for this standard may be made in cases where the provider does not own the setting and has limitations for which environmental modifications are permissible. In those cases, it would be expected that the assessment of the setting would acknowledge these limitations and determine if the setting remains appropriate for the persons served in the setting.</p>
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3. Effective July 1, 2020, specific residential services indicators have been moved out of the realm of contract compliance and to the realm of licensing. This means that certain documents will need to be available to the licensing reviewer. DDSN has created a checklist to assist providers to prepare for licensing (it is attached to this memo and available on the DDSN website at the following links:
[DDSN Day Licensing Prep List](#)
[DDSN Residential Licensing Prep List](#)
4. Providers have options when providing licensing information to Alliant. Documents may be provided to Alliant as described below:
 - a. At the time of the visit to the home-Due to concerns with the spread of Covid-19, DDSN requests that providers copy information and give it to Alliant to review remotely;
 - b. In Therap-If your agency has an "index" to assist reviewers with the location of specific information in Therap, that index should be provided;
 - c. Via an upload to the Alliant portal within the required timeframes.

Questions regarding these clarifications or the application of them during licensing inspections should be directed to: license@ddsn.sc.gov.