

# HCBS Settings Rule Identified Isolating & Institutional Factors

The purpose of this document is to provide some examples of possible isolating and institutional factors. The State has conducted site visits to multiple settings and in the left hand column has shared some of the isolating or institutional factors that were identified during those visits. The Settings Stakeholder Work Group assisted in identifying when a factor becomes isolating or institutional in nature and how to overcome that presumption to be compliant with the HCBS Settings Rule; you can find these in the right hand column.

Identified Isolating / Institutional Factors	When does it become isolation/institutional and how to overcome:
<ul style="list-style-type: none"> <li>▪ Setting located on the grounds of a school</li> <li>▪ Setting located in a warehouse in an industrial area</li> </ul>	<p><b>Location of a setting (co-located to other settings, gated, geographically isolating, physically isolating, connected to a school or hospital, etc.)</b></p> <ul style="list-style-type: none"> <li>▪ A location can be isolating if it contributes to isolation and makes individuals feel separate from their community</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Little or no opportunities to go into community/be integrated (general)</b> <ul style="list-style-type: none"> <li>○ Only given one choice of activity/outing</li> <li>○ Only onsite activities provided</li> <li>○ Individuals rarely leave the building- nearly all programming takes place inside. When they do go out, they only stay in the surrounding area (e.g. park next door)</li> <li>○ The only community outings offered are van rides</li> <li>○ Community outings offered 1-2 times per week. ½ go one day and the other ½ go another day (e.g. Tue/Thur) to the same activity</li> <li>○ Rarely any opportunities for individuals to volunteer</li> <li>○ Volunteers come into the setting and present to individuals (only volunteer activities)</li> <li>○ While individuals are going out into the community, activities may not necessarily be meaningful or structured in a way that the activities are assisting to develop skills or integrating into the community</li> </ul> </li> <li>▪ <b>Little or no opportunities to go into community/be integrated (non-residential)</b></li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Variety of experiences, including new experiences, must be offered</li> <li>▪ Diversity of choice is evident</li> <li>▪ Activity options must reflect individual preferences; ongoing process in place to get individual input</li> <li>▪ Meaningful integration of individuals is a part of community activities; activities should foster relationships with community members unaffiliated with the setting</li> <li>▪ Process in place for individuals to choose something else (not participate and have an alternative activity)</li> <li>▪ Must have a process to evaluate individual wants/needs and take active measures to meet those needs (100% of individuals)</li> <li>▪ Process to address when an individual wants to do something that the provider is unable to do</li> <li>▪ Must have a process in place to offer activities in the community, instead of at the setting, when available (e.g. classes, skill building, etc.)</li> <li>▪ If utilizing a residential home for activities, the setting must have documented permission from all residents</li> <li>▪ Visits by community members (reverse integration) is not the only, or primary form of community integration</li> </ul>

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<ul style="list-style-type: none"> <li>○ Individuals spend majority of their time in facility at workshop</li> <li>○ Only work option is enclave work (one option)</li> <li>○ Enclave: group goes out and does not interact with anyone outside of the enclave</li> <li>○ Program requires individuals to come back to site for lunch- only has 1.5hrs in community max including travel time</li> <li>○ Individual reported they go out to a provider residential house to play games and watch TV during the day (same provider)</li> <li>○ Program holds cooking classes in a provider residential house 2x/month</li> <li>○ Individuals run snack shop in setting- they work the register and stock products</li> </ul>	<ul style="list-style-type: none"> <li>▪ Documentation of staff training</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Control of personal funds (general)</b> <ul style="list-style-type: none"> <li>○ Individuals reported that staff handled their money and they were not the ones to make transactions for themselves</li> <li>○ Individuals having their own money is discouraged</li> <li>○ Individuals do not have access to money, someone makes purchases for them</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Only restricted if appropriate modifications and restrictions have been established</li> <li>▪ Cannot be a house rule or for the convenience of staff</li> <li>▪ Individuals have access to their own money, handle their own money, and make transactions themselves when purchasing items</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Employment (general)</b> <ul style="list-style-type: none"> <li>○ All individuals at the program have “opted out” of employment</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Process in place to promote employment, volunteer opportunities, meaningful skill building opportunities <ul style="list-style-type: none"> <li>○ For providers that offer employment services; there is a process to bridge non-employment and employment services</li> <li>○ For providers that do not currently offer employment services; there is a process for individuals to access opportunities to seek employment</li> </ul> </li> <li>▪ Documentation of staff training</li> </ul>

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<ul style="list-style-type: none"> <li>▪ <b>Schedules are not individualized (general)</b> <ul style="list-style-type: none"> <li>○ There is no formal avenue for individuals to choose activities/schedule</li> <li>○ Staff present what community activities are available and individuals choose; individuals do not have input on which activities are presented</li> <li>○ Setting does not promote choice</li> <li>○ Setting reflects staff preference and convenience due to limited transportation options</li> </ul> </li> <li>▪ <b>Schedules are not individualized (non-residential)</b> <ul style="list-style-type: none"> <li>○ 5 groups, every community activity scheduled 5 times; each group goes to the same activity</li> </ul> </li> <li>▪ <b>Schedules are not individualized (residential)</b> <ul style="list-style-type: none"> <li>○ Setting provides transportation to doctor's appointments one time per week (same day every week, e.g. Tuesday)</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ There is a process in place for individuals to choose what activities they participate in</li> <li>▪ There are no activities individuals are required to participate in</li> <li>▪ Individuals are a part of the process that determines activity schedule</li> <li>▪ Activities and schedules cannot be for the convenience of staff</li> <li>▪ Staff promote individuals making decisions and exercising choice in all areas</li> <li>▪ Documentation of staff training</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>External doors locked (general)</b> <ul style="list-style-type: none"> <li>○ Exterior doors locked all the time</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Mitigate for those that do not have a restriction (keypad, code, etc.); must allow for individuals to come and go independently</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Restrictions and modifications (general)</b> <ul style="list-style-type: none"> <li>○ Restrictions are not circumvented for other individuals who do not require the restriction</li> <li>○ Restrictions are not documented and have not gone through the human rights process</li> <li>○ Common restrictions observed that were not circumvented for other individuals who did not require the restriction:           <ul style="list-style-type: none"> <li>▪ Food restrictions</li> <li>▪ Restrictions around phone usage</li> <li>▪ Locked areas of the setting</li> </ul> </li> <li>○ Individuals do not understand what their restriction is and/or why it is in place</li> </ul> </li> <li>▪ <b>Restrictions and modifications (residential)</b></li> </ul>	<p><b>Restrictions and modifications can be isolating depending on what the restriction/modification is</b></p> <ul style="list-style-type: none"> <li>▪ If the restriction or modification contributes to isolation or makes individuals feel separate from their community, it can be isolating</li> </ul> <p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Restrictions are circumvented for other individuals who do not require the restriction; circumventions allow the most amount of independence possible</li> <li>▪ Restricting independence or access to resources is appropriate only to reduce specific risks</li> <li>▪ Controls on personal freedoms and access to community cannot be imposed on a class or group of individuals</li> </ul>

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<ul style="list-style-type: none"> <li>○ Restrictions are placed as “house rules” across all residents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Restrictions or modifications cannot be implemented as “house rules” in any setting, regardless of the population served and must not be used for the convenience of staff</li> <li><b>Modifications and restrictions must be:</b> <ul style="list-style-type: none"> <li>▪ Supported by an individualized specific assessed need</li> <li>▪ Justified in the person-centered support plan</li> <li>▪ Documented in the person-centered support plan. This includes:           <ul style="list-style-type: none"> <li>○ Specific individualized assessed need</li> <li>○ Prior interventions and supports including less intrusive methods</li> <li>○ Description of condition proportionate to assessed need</li> <li>○ Ongoing data measuring effectiveness of modification</li> <li>○ Established time limits for periodic review of modifications</li> <li>○ Individual’s informed consent</li> <li>○ Assurance that interventions and supports will not cause harm</li> </ul> </li> </ul> </li> <li>▪ Documentation of staff training</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Communication (general)</b> <ul style="list-style-type: none"> <li>○ Individual reports staff talk about their past behaviors a lot and sometimes it is around others (individual was embarrassed)</li> <li>○ Staff noted concerns about disrespectful language being used towards individuals</li> <li>○ Individuals report staff are too busy and make them feel like it is a hassle to assist; they are hesitant to ask for assistance</li> <li>○ Staff actions can be isolating in nature; isolating from peers within the setting and with others in the community</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ Staff do not talk about individuals’ private information in front of others</li> <li>▪ Staff speaks to individuals in a respectful manner. If staff happens to use disrespectful language, they and/or other staff quickly correct it.</li> <li>▪ Documentation of staff training</li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Institutional qualities (general)</b> <ul style="list-style-type: none"> <li>○ Personal information posted for others to see</li> <li>○ Privacy concerns in bathrooms (e.g. lack of doors, no locks, multiple individuals using the restroom at a time)</li> <li>○ Assigned seating in dining room (including labeled chairs, place mats, or tables)</li> <li>○ Regimented daily schedules (e.g. 9am exercise, 10am computers, 11am lunch, Noon chores, etc.)</li> </ul> </li> </ul>	<p><b>This can be overcome by the following:</b></p> <ul style="list-style-type: none"> <li>▪ The setting does not have policies or practices which control the behaviors of individuals</li> <li>▪ The setting does not have policies or practices which result in rigid schedules</li> <li>▪ The setting ensures an individual’s right of privacy, dignity, and respect</li> <li>▪ The setting does not have areas of the facility that segregate individuals from others (staff or other individuals receiving services)</li> </ul>

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- Lack of choice; observed staff doing for individuals versus providing choice
- Separate staff only areas that have a segregating effect (e.g. bathrooms)
- **Institutional qualities (non-residential)**
  - Individuals grouped based on disability or amount of assistance required
    - 2 programs at the same location in separate areas with no overlap (one Autism, one all others)
    - Locked door (coded lock) to small group area- 5 individuals in the small group that require more assistance/sensory needs. Individuals segregated from the rest of program.
    - Multiple programs groups based on assistance required
- **Institutional qualities (residential)**
  - No formal process to notify individuals when they are getting a roommate
  - No formal process for individuals to meet roommates prior to moving in
  - There is no formal avenue for individuals to give input on meals served
  - There are no locks on bedroom doors
  - Staff enter individuals' private living area without permission
  - Individuals are not given a key to their house/private living space
  - There are provider set schedules for bathing, personal assistance, cleaning, laundry, etc. (activities of daily living)
  - Individuals do not have access to snacks whenever they want
    - Individuals have to ask staff for snacks
    - There are snacks available, but residents are not aware of this
    - Snack cart is not always available (e.g. not on weekends)
  - Stated visiting hours
  - Visitors limited to "known visitors" (visitors require prior approval)
  - Areas not accessible to individuals
    - Bathrooms locked from the outside; individuals have to request staff to access
    - Kitchen is off limits; individuals have to request everything from staff
    - No access to the laundry room; locked with personal information stored inside
  - Individuals cannot be segregated based on their disability
  - There must be opportunity for individuals to be fully integrated both within the setting and in the greater community
- The setting has a formal process for individuals to have a choice in roommates
- In a residential setting, the setting has a process to include individuals in the meal planning process
- Locks (see flyer) [Locks and the HCBS Settings Rule](#)
- Staff do not enter individual living spaces without permission or has documented pre-agreed upon circumstances when staff can enter
- All individuals have a key to their house/private living area unless an approved restriction is in place
- Must be a mechanism in place for individuals to choose their schedule surrounding activities of daily living and for the setting to accommodate changes to the schedule within a reasonable time frame
- Individuals independently have access to snacks whenever they want
- Individuals can have visitors of their choice at any time
- Cameras (see flyer) [Policy & the Use of Cameras in the New Choices Waiver Residential HCBS Setting](#)
- Dummy cameras or cameras that are not in working order have to meet the same requirements laid out in the flyer
  - Dummy cameras or cameras that are not in working order that do not meet requirements must be removed
- Documentation of staff training

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- No access to laundry room because of chemicals; it is unlocked if a resident requests to do laundry
- Kitchenette in each apartment; gas is disconnected to all stove tops
- **Institutional qualities (New Choice Waiver residential)**
  - Dummy cameras in the setting
  - Cameras are not set-up or not working in setting
  - Cameras located in common areas of setting ; does not meet requirements

Submit any questions to [HCBSSettings@utah.gov](mailto:HCBSSettings@utah.gov)

