

State Self-Assessment and Remediation Plan

Non-Residential

The purpose of the State Self-Assessment Report (document 2) is to summarize the State's review of the self-assessments submitted by your agency. The report summarizes 6 federally mandated characteristics which all non-residential HCBS settings must possess and reflects the State's assessment of the extent to which your agency currently complies with each characteristic.

If Overall Compliance is "Yes" there is no remediation plan or further action required at this time.

If Overall Compliance is "Partial" the submission of a Remediation Plan is required (document 3).

Remediation Plan Instructions:

- Each indicator (e.g. NR1-54) currently not in compliance is documented
- Providers must complete the following for each indicator: Corrective Action; Start Date; Due Date
- Date Complete and Evidence for Compliance need only be included if finalized prior to submission
- Corrective Action will document how the site will come into compliance and what evidence will be provided to demonstrate compliance
- Corrective Action information that will be deemed acceptable evidence includes, but is not limited to citation of the following: Provider policies/procedures; Participant Handbook; Staff Training curriculum, materials, schedules; Letters of support from persons served

The State will provide a response to submitted Remediation Plans within 60 calendar days of receipt of the plans. Full compliance is not expected at this time; providers will be given the opportunity to remediate issues and come into compliance within timeframes agreed upon by the provider and the State.