



## HSW Home and Community Based Services Waiver Non-Residential Provider Survey

### Survey Instructions and Respondent Information

**Expected Respondent:** The Habilitation Supports Waiver Non-Residential Provider who has direct knowledge of the individual's day-to-day, non-residential supports and/or the operational and administrative activities of the provider agency.

#### Provide the respondent's contact information for further questions:

Name

Contact Phone Number

Contact Email Address

**Instructions:** Provide a response to each question taking into consideration how individuals spend their day at this non-residential address. This includes the services and supports separate from their residential setting.

**Note:** If you have questions about HCBS Waivers or the statewide transition process, please contact the Michigan Department of Health and Human Services at [HCBSTransition@michigan.gov](mailto:HCBSTransition@michigan.gov).

#### Enter the address information for the physical location where the individual is receiving service(s):

Name of Non-Residential Support Provider

Address

City, State, Zip Code

Phone Number

The Michigan Department of Human Services, Bureau of Children and Adult Licensing (BCAL) License Number, National Provider Identification (NPI) Number, or Employer Identification Number (EIN) associated with **#{q://QID9 /ChoiceTextEntryValue/1}** is: **#{e://Field/LicenseNumber}**.

Is this number correct?

- Yes
- No (please enter correct BCAL, EIN, or NPI)

## Section 2: Individual Experience for Non-Residential Settings (Part A)

What is the person's Waiver Supports Application (WSA) Identification Number identified in the cover email?

**WSA identified in cover email: #{e://Field/ExternalDataReference}**

**Note:** If you do not know this number, contact your Pre-Paid Inpatient Health Plan (PIHP) or Community Mental Health Service Provider (CMHSP) Home and Community Based Service (HCBS) Lead Coordinator. Click on the links below to find the PIHP and CMHSP coordinators in your region.

[HCBS PIHP Lead Coordinators](#)

[HCBS CMHSP Lead Coordinators](#)

## Section 2: Individual Experience for Non-Residential Settings (Part B)

Which of the following services do you provide the individual? (Mark all that apply)

### **Definitions:**

**Out-of-home non-vocational service:** This service assists with acquisition, retention, or improvement in self-help, socialization, and adaptive skills; and the supports services, including transportation to and from, incidental to the provision of that assistance that takes place in a non-residential setting, separate from the home or facility in which the beneficiary (beneficiary means a person who uses or receives this service) resides. Examples of incidental support include:

- Aides helping the beneficiary with his mobility, transferring, and personal hygiene functions at the various sites where habilitation is provided in the community;
- When necessary, helping the person to engage in the habilitation activities (e.g., interpreting). Services must be furnished four or more hours per day on a regularly scheduled basis for one or more days per week unless provided as an adjunct to other day activities included in the beneficiary's plan of service.

**Prevocational services:** These services involve the provision of learning and work experiences where a beneficiary (beneficiary means a person who uses or receives this service) can develop general, non-job-task-specific strengths and skills that contribute to employability in paid employment in integrated, community settings.

**Supported employment:** Supported employment is the combination of ongoing support services and paid employment that enables the beneficiary (beneficiary means a person who uses or receives this service) to work in the community. For purposes of this waiver, the definition of "supported employment" is:

- Community-based, taking place in integrated work settings where workers with disabilities work alongside people who do not have disabilities;
- For beneficiaries with severe disabilities who require ongoing intensive supports such as job coach, employment specialist, or personal assistant;
- For beneficiaries who require intermittent or diminishing amounts of supports

employment includes activities needed to sustain paid work by individuals receiving waiver services, including supervision and training, job coach, employment specialist services, personal assistance and consumer-run businesses.

- Supported Employment
- Out of Home Non-Vocational Services
- Pre-Vocational Services
- I do not provide these services to this individual.

Did the individual pick the agency who provides their non-residential services and supports?

Yes



No



Where is this service provided?

- At a place or site for people with disabilities (for example a workshop for people with disabilities, work crew of people with disabilities, or a day program for people with disabilities).
- In the community at a local business, restaurant, or as a small business owner.

Are the services for this non-residential provider located outside of the same building, off the grounds of, and disconnected from a hospital, nursing home, Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), or Institute for Mental Disease (IMD)?

### Definitions:

#### **Intermediate Care Facilities for Individuals with Intellectual Disabilities**

**(ICFs/IID):** An institution for individuals with intellectual disabilities or other related conditions, according to Federal regulations at 42 CFR 435.1009, is defined as an institution (or distinct part of an institution) that: (a) Is primarily for the diagnosis, treatment, or rehabilitation for individuals with intellectual disabilities; and (b) Provides, in a protected residential setting, ongoing evaluation, planning, 24-hour supervision, coordination, and integration for health or rehabilitative services to help individuals function at their greatest ability. [Source: CMS, "Backgrounds and Milestones: Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)"]

**Institution for Mental Disease (IMD):** The term "institution for mental diseases" means a hospital, nursing facility, or other institution of more than 16 beds, that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases, including medical attention, nursing care, and related services. [Source: Social Security Act, Sec. 1905. [42 U.S.C. 1396d]

Yes



No

**Note: Selecting "No" means that services are delivered in an institutional setting.**



When providing non-residential supports, do individuals interact with others who do not have disabilities?

**Note:** Individuals without disabilities who are hired as support staff are not considered "co-workers". Support staff assist individuals with disabilities at or with their non-residential service.

Yes



No



When providing non-residential supports, do individuals contact or connect with individuals from the community/ public?

Yes



No



What does the individual do at this non-residential setting? (Mark all that apply)

Work

Volunteer

Attends day program

Is this paid or unpaid work?

Paid

Unpaid

Do individuals have access to their personal funds?

**Note:** Access means the individual's money is available to them.

Yes



No



If no, why?

Do individuals have control over their personal funds?

**Note:** Control means the individual can decide how his or her money is spent.

Yes



No



If no, why?

Does the employment setting allow individuals to schedule their work hours or days similar to their co-workers who do not have disabilities?

**Note:** Individuals without disabilities who are hired as support staff are not considered "co-workers". Support staff assist individuals with disabilities at or with their non-residential service.

Yes



No



Does the employment setting allow individuals to schedule their breaks and/or lunch times similar to their co-workers who do not have disabilities?

Yes



No



Do individuals have employee benefits (vacation, medical benefits) similar to co-workers who do not have disabilities?

Yes



No



Do individuals perform tasks similar to co-workers who do not have disabilities?

Yes



No





Do individuals who need personal assistance at work receive this support in a private, appropriate place?

Yes



No



Can individuals schedule their volunteer hours or days similar to other volunteers who do not have disabilities?

Yes



No



Can individuals schedule their breaks and/or lunch times similar to other volunteers who do not have disabilities?

Yes



No



Do individuals do tasks similar to other volunteers who do not have disabilities?

Yes



No



If individuals need personal assistance while volunteering do they receive it in a private, appropriate place?

Yes



No



Can individuals schedule their hours and days at the day program?

Yes



No



Can individuals schedule their breaks and/or lunch times at the day program?

Yes



No



If individuals need personal assistance while attending their day program do they receive it in a private, appropriate place?

Yes



No



Is accessible transportation available to individuals to make trips to the community?

**Definition:**

**Accessible:** Accessible transportation means having transportation services going where and when one wants to travel.

Yes



No



If public transit is limited or unavailable, do individuals have another way to access the community?

Yes



No



Can individuals move around the non-residential setting, as appropriate and to the same extent that individuals who do not have disabilities?

Yes



No



Is the non-residential setting physically accessible to all individuals (For example, does it have grab bars, a wheelchair ramp if needed)?

Yes



No



Can individuals reach and use equipment as they need it?

Yes



No



Do individuals have a place to store and secure their belongings away from others?

Yes



No



## Section 2: Waiver Administration & Policy Enforcement for Non-Residential Setting

Are provider policies outlining the individual's rights, protections, and expectations of services and supports provided to the individual in an understandable format?

Yes



No



Have individuals been provided with information on how to request a new non-residential setting?

Yes



No



Copyright 2020 the Michigan Developmental Disabilities Institute (MI-DDI)

Powered by Qualtrics