Office for Citizen's with Developmental Disabilities Crosswalk HCBS Requirement Residential Provider Assessment to Participant Experience Survey

	Domain	Residential Self-Assessment Question	Participant Survey Question	
1	Choice of Setting/Person Centered	Was the individual given a choice of available options regarding where to live/receive services? Was the individual given opportunities to visit other settings?	Did you choose where you live and receive services? For example, did you visit other places before choosing where you live now?	
2	Recipient Rights	Do individuals know how to relocate and request new housing?	If you want to move, do you know how to find and request new housing and do you have people that help you with this?	
3	Recipient Rights	Do all individuals who do not own their home have a legally enforceable agreement with the setting landlord (dates of lease, amount of rent, etc.)	Do you own your own home or have a lease?	
4	Living Arrangements	Does (each) unit have lockable entrance doors, with the individual and appropriate staff only having keys to doors as appropriate? Can the individual close and lock the bathroom door?	Do you have adequate privacy in your home? For example, can you close and lock your front door? Do you have a key to your home? Are you comfortable with the people who have keys to your home? Do you have a key to your mailbox? Does your mail come to your home?	
5	Living Arrangements	Does staff or other individuals always knock and receive permission prior to entering an individual's private space?	Do others knock before entering your home?	
6	Living Arrangements	Can the individual close and lock the bedroom door?	Can you close and lock your bedroom door?	
7	Living Arrangements	Can the individual close and lock the bathroom door?	Can you close and lock your bathroom door?	
8	Living Arrangements	Do individuals sharing units have a choice of roommates?	Do you have a roommate? If yes, did you get to choose your roommate and the person you share your home with?	
9	Living Arrangements	Do individuals know how he or she can request a roommate change?	Do you know how to ask for a new roommate?	
10	Living Arrangements	Do individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement?	Is your home set- up/decorate in a way that you choose? For example, can you move the furniture where you want it? Can you hang things on the walls?	

			Can you change things in
			your home?
11	Community Integration	Do individual's shop, attend religious services, schedule appointments, have lunch with family/friends, etc. in the community as they choose?	Do you participate in activities that you enjoy? For example, shopping, church, lunch, other activities noted in your CPOC.
12	Community Integration	Are individuals aware of or have access to materials to become aware of activities occurring outside of the setting?	Do you know how to find out about upcoming events/activities?
13.	Community Integration	Are individuals able to regularly access the community and are they able to describe how they access the community, who assists in facilitating the activity and where he or she goes?	Do you have the help you need to participate in activities that you choose to? For example, are you able to get to the activities you want to go to?
14.	Recipient Rights	Do individuals help plan the menus for their meals? Do individuals have access to food anytime, as appropriate?	Can you eat what you choose to and when you choose to eat it?
15.	Recipient Rights	Can individuals have visitors at any time?	Can you have visitors when you want to have visitors? For example, can you invite friends or family over whenever you want? Can you have private visits if you want to?
16.	Recipient Rights	For individuals who need supports to move about the setting as they choose, are supports provided, such as grab bars, seats in the bathroom, ramps for wheelchairs, viable exits for emergencies, etc.?	Do you have the supports you need to move around your home as you choose?
17.	Recipient Rights	Do individuals have full access to typical facilities in a home, such as a kitchen with cooking facilities, dining area, laundry, and comfortable seating in shared areas?	If you have a roommate, do you have full access to common areas such as the kitchen, dining area, laundry and shared living areas?
18.	Recipient Rights	Do individuals have access to such things as a television, radio, and leisure activities that interest him or her and can she or he schedule such activities at his or her convenience?	Do you have access to a phone, computer or other technology?
19.	Community Integration	Do individuals in the setting have access to public transportation? Do individuals in the setting know how to access and use public transportation? Where public transportation is limited, are other resources (wheelchair accessible, private transportation, etc.) provided for the	Do you have access to transportation to get to the places you would like to go?

		individual to access the broader community for appointments, shopping, etc.?	
20.	Recipient Rights	Is it made clear that an individual is not required to adhere to a set schedule for waking, bathing, eating, exercising, activities, etc.? Do the individuals' schedules vary from other in the same setting?	Can you make decisions about your schedule, where you go, when you go, who you see and when you see them?
21.	Recipient Rights	Do individuals have a checking or savings account or other means to control funds? Do individuals have access to his or her funds?	Do you have access to your money? For example, can you buy the things you need? Can you use your money when you choose to?