

## Participant Survey

HCBS Requirement	Example Questions	Required Evidence of Compliance with HCBS Rule
HCBS Setting Experience Overall – Complete for All Participants		
Allows individual to control personal resources.	<ul style="list-style-type: none"> <li>• Do you have your own bank account? Y/N</li> <li>• Do you have access to your money? Y/N</li> <li>• Can you buy the things you need? Y/N</li> </ul>	
Facilitates individual choice regarding services and supports and who provides them.	<ul style="list-style-type: none"> <li>• Were you given options to choose from when selecting your services and supports? Y/N</li> <li>• Did you choose the services and supports you receive? Y/N</li> <li>• Were you given options to choose from when selecting who provides your services and supports? Y/N</li> <li>• Did you choose who provides your services and supports? Y/N</li> <li>• Do you know how to request a change in your services and supports? Y/N</li> <li>• Do you know how to request a change in who provides your services and supports? Y/N</li> </ul>	

HCBS Requirement	Example Questions	Required Evidence of Compliance with HCBS Rule
Employment or Day Services – Complete for those Participating in Employment or Day Services		
Provides opportunities to seek employment and work in a competitive environment.	<ul style="list-style-type: none"> <li>• Do you have a job? Y/N</li> <li>• Could you have a job if you are able to work? Y/N</li> <li>• Do you have the help you need to look for a job if</li> </ul>	

	you want one? Y/N	
Ensures individual's rights of privacy, dignity, respect and freedom from coercion and restraint.	<ul style="list-style-type: none"> <li>• Can you be alone if you want to? Y/N</li> <li>• Can you have a private conversation without others listening in? Y/N</li> </ul>	
Integrated and supports access to the greater community	<ul style="list-style-type: none"> <li>• If you want to, can you go out in the community? Y/N</li> </ul>	

HCBS Requirement	Example Questions	Required Evidence of Compliance with HCBS Rule
<b>Residential Services – Complete for Those Living in a Residential Setting</b>		
The setting was selected by the individual from among setting options, including non-disability specific settings.	<ul style="list-style-type: none"> <li>• Did you choose where you live and receive your services? Y/N</li> <li>• Did you visit other places before choosing this one? Y/N</li> <li>• Do you know how to relocate and request new housing? Y/N</li> </ul>	
Specific unit or dwelling is owned, rented or occupied under a legally enforceable agreement.	<ul style="list-style-type: none"> <li>• Do you own your home or have a lease? Y/N</li> <li>• Do you know your rights as a tenant and protections from eviction? Y/N</li> </ul>	
Unit has lockable entrance door.	<ul style="list-style-type: none"> <li>• Can you close and lock your front door? Y/N</li> <li>• Do you have the key to your front door? Y/N</li> <li>• Does anyone else have a key to your unit? Y/N</li> <li>• Do others knock before entering your unit? Y/N</li> </ul>	
Each individual has privacy in their sleeping or living unit.	<ul style="list-style-type: none"> <li>• Can you close and lock your bedroom door? Y/N</li> <li>• Can you close and lock your bathroom door? Y/N</li> <li>• Did you get to decide who has a key to your bedroom or bathroom? Y/N</li> <li>• Do others knock before entering your room? Y/N</li> </ul>	
Option for a private unit.	<ul style="list-style-type: none"> <li>• Were you given the option of a private room if you could afford</li> </ul>	

	one? Y/N	
Choice of roommates.	<ul style="list-style-type: none"> <li>• Can you choose who you share your room with? Y/N</li> <li>• Did you choose your roommate? Y/N</li> <li>• Do you like living with your roommate? Y/N</li> <li>• Do you know how to request a roommate change? Y/N</li> </ul>	
Freedom to furnish and decorate.	<ul style="list-style-type: none"> <li>• Did you decorate your room? Y/N</li> <li>• Can you move the furniture where you want it? Y/N</li> <li>• Can you hang or put up pictures if you want to? Y/N</li> <li>• Can you change the decorations in your room? Y/N</li> </ul>	
Integrated in and supports full access to the greater community.	<ul style="list-style-type: none"> <li>• Do you participate in activities like shopping, going to church or having lunch with family and friends? Y/N</li> <li>• Do you know how to find out about upcoming events or activities? Y/N</li> <li>• Do you have the help you need to participate in the activities you want to do?</li> <li>• Are you able to get to the activities you would like to participant in? Y/N</li> </ul>	
Freedom and support to control schedules and activities.	<ul style="list-style-type: none"> <li>• Do you make your own schedule? Y/N</li> <li>• Can you decide when you get up, take a bath, eat, exercise or participate in other activities? Y/N</li> <li>• Can you watch television, listen to the radio and do things that you like when you want to? Y/N</li> </ul>	
Access to food at any times	<ul style="list-style-type: none"> <li>• Can you eat when you want to? Y/N</li> <li>• Can you eat where you want to? Y/N</li> <li>• Can you eat what you want to? Y/N</li> <li>• Can you request a different meal if you want one? Y/N</li> <li>• Are snacks accessible and available anytime? Y/N</li> </ul>	
Allow visitors at any time.	<ul style="list-style-type: none"> <li>• Can you have any visitors? Y/N</li> <li>• Can you have visitors at any time? Y/N</li> <li>• Can you have private visits with family and friends if you want to?</li> </ul>	

	Y/N	
Physically accessible.	<ul style="list-style-type: none"> <li>• Do you have the supports you need to move around your room/house as you choose? Y/N</li> <li>• Can you enter and exit your room/house as you choose? Y/N</li> <li>• Do you have full access to the common areas such as the kitchen, dining area, laundry, and shared living areas? Y/N</li> </ul>	
Policies outlining residents' rights are available and accessible to the individuals	<ul style="list-style-type: none"> <li>• Do you have a resident handbook or know how to get one? Y/N</li> <li>• Do you understand the handbook or know who to ask if you have questions? Y/N</li> </ul>	
Optimizes individual initiative, autonomy, and independence in making life choices.	<ul style="list-style-type: none"> <li>• Do you have access to a phone, computer or other technology? Y/N</li> <li>• Do you have access to transportation to go to the places you want to go? Y/N</li> <li>• Can you make decisions about your schedule, where you go, who you see and when? Y/N</li> </ul>	

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