

Environmental Scan Process

Regulatory References

North Dakota Century Code

25-16 Residential Care and Services for the Developmentally Disabled requires the operator of a treatment or care center to secure an annual license from the department as required by rules.

(Treatment or care center means any hospital, home or other premises operated to provide relief, care, custody, treatment, day activity, work activity, or extended employment services to developmentally disabled persons.)

25-16-03 Requirements for license requires the department to issue a license upon a showing that the premises are in fit, safe, sanitary condition, and properly equipped to provide good care and treatment: ... and

25-16-04 Inspection and report by department requires the department to inspect the facilities and premises to determine sanitary conditions and the adequacy of medical and nursing services.

Implementation

Effective January 1, 2015, the Environmental Scan will be completed in each residential and day program funded by North Dakota Medicaid. The scan will be conducted annually.

Effective April 1, 2019, the Environmental Scan was updated to reflect the CMS Home and Community Based Regulations.

Effective January 1, 2022, the Environmental Scan replaced the annual sanitation inspection requirement for group homes.

Persons Responsible and Implementation Schedule

Regional DD Program Administrators (DDPA) are responsible to complete the annual Environmental Scan in the following DD licensed group residential and facility-based day programs:

- ICF/IID
- Residential Habilitation (facility based)
- Day programs (facility based)

In these settings, the facilities are provider owned and paid staff is on site during the hours individuals are present. The provider has the primary responsibility to ensure the individual's health and safety.

Providers are required to submit their licensing renewal paperwork no later than 60 days before their current licenses expire to the DD Section. The DDPA's will have three months to complete the environmental scan and will be required to submit their completed checklist to the DD Licensing Administrator no later than 60 days before the provider's license expiration date. The DD Section will provide the regional DD Program Administrator with a schedule of provider license renewals.

Example: For providers whose license period is from July 1 through June 30, the Environmental

Scans for the group residential and facility-based day programs must be conducted between February 1 and April 30. The completed checklist is due to the DD Licensing Administrator in the DD Section no later than May 1.

The DD Program Administrator will complete the Environmental Scan Checklist and will contact the Executive Director of the agency after the completion to follow up on the findings and to discuss any identified concerns. The agency will be responsible to take the necessary steps to remediate the identified concerns and inform the regional DD Program Administrator of the completed action in writing. This will be made available to the DD Section upon request.

Persons Responsible and Implementation Schedule

Regional DD Program Managers are (DDPM) responsible to complete the annual Environmental Scan for individuals assigned to their caseloads in the following settings:

- Independent Habilitation (non-facility based)
- Residential Habilitation (non-facility based)
- Homemaker
- Parenting Supports

In these individualized settings, paid staff is the primary support. The Environmental Scan will be conducted during a face-to-face visit in the quarter prior to the individual's annual OSP/PCSP.

Example: If an individual's annual plan is scheduled for July 2015 the Environmental Scan will be completed in April, May, or June 2015. The DDPM's will attach the completed checklist to the OSP in Therap. Some of the areas on the checklist may not apply to those individuals who live in individualized settings and NA should be marked on the checklist. If concerns are noted and the individual and/or their legal decision maker understand the concerns and choose not to make changes, please make note of these in the comments section of the checklist. Individuals still have the choice, but we need to assure they understand the risks and document it. These observations should correspond with the risks in the RMAP, discussion and mitigation strategies in the OSP. The DD Section will review a sample of OSP's before the provider's license expiration date and before issuance of license renewals.

Persons Responsible and Implementation Schedule

Regional DD Program Managers (DDPM) are responsible to complete the annual Environmental Scan for individuals assigned to their caseloads in the following settings:

- Family Care Option (FCO)
- Adult Foster Care (AFC)

The Environmental Scan will be conducted during a face-to-face visit in the quarter prior to the individual's annual OSP/PCSP. *Example: If an individual's annual plan is scheduled for July 2015 the Environmental Scan will be completed in April, May, or June 2015.* The DDPM's will attach the completed checklist to the OSP in Therap. Some of the areas on the checklist may not apply to those

individuals who live in these settings and NA should be marked on the checklist. If concerns are noted and the individual and/or their legal decision maker understand the concerns and choose not to make changes, please make note of these in the comments section of the checklist. Individuals still have the choice, but we need to assure they understand the risks and document it. These observations should correspond with the risks in the RMAP, discussion and mitigation strategies in the OSP. Since the DD Section does not directly license these physical settings, if concerns are noted on the environmental scan, the DDPM will notify the licenser. The DD Section will review a sample of OSP's before the provider's license expiration date and before issuance of license renewals.

Persons Responsible and Implementation Schedule

Regional DD Program Managers (DDPM) are responsible to complete the annual Environmental Scan for individuals assigned to their caseloads in the following settings:

- Infant Development
- In-Home Supports
- Respite
- Self-Directed Supports

The parent is responsible for the health and safety of the individual in the home setting. This process will be conducted during a face-to-face visit in the quarter prior to the individual's annual OSP/PCSP. *Example: If an individual's annual plan is scheduled for July 2015 the Environmental Scan will be completed in April, May, or June 2015.* In these settings, the DDPM will do a general look through and is not required to complete the checklist. The DDPM will document their observations in the QER. If there are no concerns or issues noted, the DDPM will document the following statement in Significant Events in the QER, "The home appears to meet (name of individual) needs." If there are concerns that rise to the level of suspected abuse or neglect for the child, a 960 report should be filed according to requirements. The 960 is only filed for children under age 18. P&A is contacted for individuals aged 18 and older if there is suspected abuse, neglect, or exploitation. The DD Section will review a sample of QER's before the provider's license expiration date and before issuance of license renewals.

In those situations where the primary caregiver denies access to the home, the DDPM will document the following statement in Significant Events in the QER, "The family prefers not to meet in the home. The needs of (name of individual) appear to be met." This situation will need to be reviewed and documented in the QER every quarter. If there are concerns that rise to the level of suspected abuse or neglect for the child, a 960 report should be filed according to requirements. The 960 is only filed for children under age 18. P&A is contacted for individuals aged 18 and older if there is suspected abuse, neglect, or exploitation. The DD Section will review a sample of QER's before the provider's license expiration date and before issuance of license renewals.

Description of Areas

Setting is accessible (e.g., hallways, windows, doors, living areas)

- Can the individual escape through all exits in an emergency?
- Is the home adapted for the individual if the individual needs assistance in case of an emergency?
- Are exits clear and free?
- Is accessibility according to the individual's need(s) and preferences?
- Does the individual have access to all areas of the setting?
- For those who need supports to access the setting, according to their individual preferences, are those supports in place?
- If the individual cannot have full access to the setting or is restricted due to lease agreements or health and safety concerns, is documentation in the individual's plan?

Items are in place for emergency situations (such as smoke detectors, fire extinguishers, telephone numbers)

- Smoke detectors and carbon monoxide detectors are operational.
- Fire extinguishers are charged and currently inspected.
 - Check the expiration date on the fire extinguisher.
- For those in individualized settings, if the individual does not have a fire extinguisher in their home, is there one in the apartment building? Does the individual know where it is located?
- Emergency numbers are available or posted by all phones.
- There is a backup phone to use if power is unavailable.
 - Does the consumer have a cell phone or other phone to use in case of emergency and power is out?
- Setting has a basic first aid kit.

Appliances, furnishings, and fixtures are clean, safe, and in good working order

- Are there obvious signs of wear and tear that could harm the individual?
- Are furnishings and appliances clean, safe, adequate, and in functional condition?

Hazardous items/chemicals are properly identified and stored safely and separately from food

- Are chemicals properly identified and stored separately from food?
- Are toxic substances safely stored?

There are sufficient furnishings, food, clothes, and other household and personal hygiene items

- Are there sufficient items to meet basic health and safety needs of the individual?
- Does the individual have the freedom to decorate and furnish their setting according to their preferences and within their lease agreement?

Hand washing, glove use, and universal precautions are practiced (adequate handwashing sinks are supplied and accessible)

- Universal Precautions – apply to blood, all blood fluids, secretions, non-intact skin, & mucous membranes.
- Are gloves worn when having contact with blood or body fluids?
- Are gloves changed between person-to-person contacts?
- Hand washing with soap & water occurs when hands are visibly dirty or soiled with blood or other body fluids or after using the toilet.
- Hand washing should be implemented during meal preparation, med administration, after coughing, sneezing, blowing nose, completing personal care tasks, etc.

The home appears clean and free of unusual odors, trash is stored properly and no evidence of mold

- Are there any hazards from uncleanliness that could harm the individual?
- Is the interior of the home in safe condition and clean (e.g., carpet, floors, walls, rooms)?
 - Unclean is defined as anything that may represent a health or safety threat for the people living there (clutter, insects, etc.)
- Is the house free of debris or clutter that could restrict the safe movement in and around their home?
- Are there any unusual odors present (urine, feces, spoiled food, natural gas, etc.)?
- Are there obvious signs of expired or spoiled food?

Food is properly stored and protected from cross-contamination from raw or uncooked foods

- Are foods needing refrigeration or needing to be frozen properly stored?
- Are raw or uncooked foods properly kept away from cooked foods?
- Is there a separate place to prepare raw or uncooked foods to avoid cross-contamination?

Bedroom doors are lockable for provider-owned or controlled waiver settings (excluding ICF/IID)

- Bedroom doors should be lockable unless otherwise noted in the individual's plan that they cannot have lockable doors. This is applicable for all provider-owned or controlled settings.

If bedrooms in the basement are below grade level does the provider have fire extinguishers readily available, smoke detectors in each room, and do those clients in those rooms have the ability to evacuate through the egress window in the event of an emergency?

- If bedrooms are below grade level, are there working fire extinguishers readily available?
- If bedrooms are below grade level, are there working smoke detectors in each room?

The home is in good repair and free of safety hazards

- Are there any windows, steps, railings, doors, walls, electrical, yard, or structure issues that could be broken, be trip hazards, or cause harm?
- Is the exterior of home free of obvious structure & environmental hazards?

If any environmental or safety item is not met, is there documentation that reflects the reason?

- Anything of significance (affecting their supports) is documented as necessary in the individual's plan, progress notes, or admin notes.
 - For example, an individual hoards items in their home making the setting unclean and unsafe. The plan reflects this as a concern and the support needs that are in place to address hoarding.



**DEVELOPMENTAL DISABILITIES PROGRAM ADMINISTRATOR/
PROGRAM MANAGER ENVIRONMENTAL SCAN CHECKLIST**
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DEVELOPMENTAL DISABILITIES
SFN 1557 (2-2023)

Clear Fields

Provider Name			Date Completed
Service Type			
Address of Setting	City	State	ZIP Code

Setting is accessible <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
Items are in place for emergency situations (such as smoke detectors, fire extinguishers, telephone numbers) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
Appliances, furnishings, and fixtures are clean, safe, and in good working order <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
Hazardous items/chemicals are properly identified and stored safely and separately from food <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
There are sufficient furnishings, food, clothes, and other household and personal hygiene items <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up

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Hand washing, glove use, and universal precautions are practiced (adequate handwashing sinks are supplied and accessible) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
The home appears clean and free of unusual odors, trash is stored properly and no evidence of mold <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments
Follow-up
Food is properly stored and protected from cross-contamination from raw or uncooked foods <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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Follow-up
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Follow-up
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If any environmental or safety item is not met, is there documentation that reflects the reason? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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