

practices to collect, compile and analyze the information.

- 2) How information from critical incident reports is used to identify issues within the waiver population, specific providers at a system-wide level, and how that information is used to develop strategies to reduce occurrences in the future.
- 3) The frequency of oversight activities.

CMS Review Criteria

The waiver specifies:

- The state entity or entities responsible for overseeing the operation of the incident management system.
- When oversight is not performed by the Medicaid agency or the operating agency (if applicable), the process for the oversight agency to communicate information and findings to the Medicaid agency and/or operating agency.
- The methods for overseeing the operation of the incident management system, including how data are collected, compiled, and used to prevent re-occurrence.
- The frequency of oversight activities.

Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions

Overview

This Appendix concerns the use of restraints and/or restrictive interventions during provision of waiver services. When either is permitted, the state must specify the safeguards that it has established concerning their use and how the state ensures that such safeguards are followed. Providing effective safeguards in the use of restraints and/or restrictive interventions is integral to assuring the health and welfare of waiver participants. When restraints and/or restrictive interventions are not permitted, the state must have a means to detect unauthorized use. The terms used in this Appendix are defined in the Glossary. The Version 3.5 HCBS Waiver Application restructures and simplifies this Appendix as it appeared in Version 3.3.

Detailed Instructions for Completion of Appendix G-2

Item G-2-a: Use of Restraints or Seclusion

Instructions

Select one of the two main choices. If the state does not permit the use of either restraints or seclusion as part of the provision of waiver services and/or their use is prohibited under state policy, select the first choice. Also, identify the state agency or agencies that are responsible for detecting the unauthorized use of restraints or seclusion and how oversight is performed to ensure that unauthorized use does not take place. If the use of restraints and/or restrictive interventions by a paid caregiver is permitted during the course of providing waiver services, including in the participant's private residence, select the second choice and complete the next two items.

Technical Guidance

For the purposes of this item, restraints include personal restraints (e.g., holds), drugs used as

restraints, and mechanical restraints. Seclusion means involuntarily isolating an individual as a means of controlling the person's behavior. Seclusion is distinguished from "time out" which does not involve preventing a person from leaving an area and which is considered to be a restrictive intervention. Again, consult the Glossary for the definition of the terms used in this item.

When a state prohibits the use of restraints or seclusion during the delivery of waiver services, it still must have processes that are designed to detect their unauthorized use. Such processes may include regular monitoring of participant health and welfare, the performance of periodic provider quality reviews, and an incident management system in which unauthorized restraint or seclusion is a reportable incident.

CMS Review Criteria

- When the first choice is selected, the response is consistent with the remainder of the waiver application.
- When the first choice is selected, the state provides specific methods to detect unauthorized use of restraints and/or seclusion, and specifies the state agency (or agencies) responsible for conducting this oversight.

Item G-2-a-i: Safeguards Concerning the Use of Restraints or Seclusion

Instructions

Specify the safeguards that have been established concerning the use of each type of restraint (i.e., personal restraints, drugs used as restraints, mechanical restraints or seclusion). If state laws, regulations, and policies are referenced in the response to this item, they must be available upon request to CMS through the Medicaid agency or the operating agency (if applicable).

Technical Guidance

When the use of restraints is permitted, identify the types of restraints (i.e., personal restraints, drugs used as restraints, mechanical restraints or seclusion) that are allowed and describe in detail the safeguards that the state has established concerning the use of each type of restraint that is permitted. If the use of specific types of restraint is explicitly prohibited in policy, identify the restraints that are not allowed. For example, personal restraints may be permitted but the use of mechanical restraints prohibited.

For each type of restraint that is allowed, the safeguards should address:

- 1) Requirements concerning the use of alternative strategies to avoid the use of restraints and seclusion;
- 2) Methods for detecting the unauthorized use of or misapplication of restraints;
- 3) The protocols that must be followed when restraints or seclusion are employed (including the circumstances when their use is permitted and when they are not) and how their use is authorized;
- 4) The practices that must be employed in the administration of a restraint or seclusion to ensure the health and safety of individuals;
- 5) Required documentation (record keeping) concerning the use of restraints or seclusion; and,
- 6) The education and training requirements that provider agency personnel must meet who are involved in the administration of a restraint or seclusion.

CMS Review Criteria

For each type of restraint permitted, the State has identified safeguards that address:

- The use of alternative methods to avoid the use of restraints and seclusion;
- Methods for detecting the unauthorized use of restraints;
- The protocols that must be followed when restraints or seclusion are employed (including the circumstances when their use is permitted) and how their use is authorized;
- The practices that must be employed to ensure the health and safety of individuals;
- Required documentation concerning the use of restraints or seclusion; and
- Education and training requirements that personnel who are involved in the administration of restraints or seclusion must meet.

Item G-2-a-ii: State Oversight Responsibility**Instructions**

Specify the State agency (or agencies) responsible for overseeing the use of restraints or seclusion and ensuring that State safeguards concerning their use are followed. Describe how this oversight is conducted and its frequency

Technical Guidance

- **Identify the state agency (or agencies) responsible for overseeing the use of restraints or seclusion and ensuring that state safeguards concerning their use are followed.** When the Medicaid agency or the operating agency (if applicable) does not conduct this oversight, describe how the results of monitoring the use of restraints or seclusion are regularly communicated to the agency that operates the waiver. Since the use of restraints or seclusion has potential implications for the health and welfare of waiver participants, it is important that the agency that administers the waiver be informed and aware of potential violations of state policies concerning the use of restraints or seclusion.
- **How oversight is conducted.** Oversight methods include monitoring the use of restraints or seclusion to ensure that all applicable state requirements are followed and to detect unauthorized, inappropriate/ineffective use or over use. Oversight methods should include gathering information about frequency, length of time of each use and the duration of use over time as well as the impact of restraints and seclusion on the individual. Oversight also includes using information to assure proper use and to reduce the use of restraints and seclusion in the future. The response should include
 - 1) How information about restraints and seclusion is collected and compiled so that it can be analyzed to enable the identification of trends/patterns and the development of quality improvement strategies. For example, reports may be filed by phone, in written form, or through the use of information technology, each of which requires specific practices to collect and then compile and analyze the information
 - 2) How information about the use of restraints and seclusion is used to identify issues related to the waiver populations, providers at the system-wide level and how that information is used to develop strategies to ensure the proper use and achieve a reduction in the use of restraints and seclusion.
 - 3) The frequency of oversight activities.

CMS Review Criteria

The response specifies:

- The state agency (or agencies) responsible for overseeing the use of restraints or seclusion and ensuring that the state’s safeguards are followed.
- When oversight is not performed by the Medicaid agency or the operating agency (if applicable), the process for the oversight agency to communicate information and findings to the Medicaid agency and/or operating agency.
- Methods for detecting unauthorized use, over use or inappropriate/ineffective use of restraints or seclusion and ensuring that all applicable state requirements are followed.
- How data are analyzed to identify trends and patterns and support improvement strategies.
- The methods for overseeing the operation of the incident management system including how data are collected, compiled, and used to prevent re-occurrence.
- The frequency of the oversight activities.

Item G-2-b: Use of Restrictive Interventions

Instructions

Select one of the two main choices. If the state does not permit the use of restrictive interventions during the provision of waiver services and/or their use is prohibited under state policy, select the first choice. Also, identify the state agency or agencies that are responsible for detecting the unauthorized use of restrictive interventions and how oversight is performed to ensure that unauthorized use does not take place. If the use of restrictive interventions by a paid provider is permitted during the course of providing waiver services, including in the participant’s private residence, select the second choice and complete the next two items.

Technical Guidance

Restrictive interventions limit an individual’s movement; a person’s access to other individuals, locations or activities, or restrict participant rights. Restrictive interventions also include the use of other aversive techniques (not including restraint or seclusion) that are designed to modify a person’s behavior.

When a state prohibits the use of restrictive interventions during the delivery of waiver services, it still must have specific processes that are designed to detect their unauthorized use.

CMS Review Criteria

- The response is consistent with the remainder of the waiver application.
- When the first choice is selected, the state specifies methods to detect unauthorized use of restraints and/or seclusion, and the state agency (or agencies) responsible for conducting this oversight.

Item G-2-b-i: Safeguards Concerning the Use of Restrictive Interventions

Instructions

Specify the safeguards that the State has in effect concerning the use of interventions that restrict participant movement, participant access to other individuals, locations or activities, restrict participant rights or employ aversive methods (not including restraints or seclusion) to modify behavior. State laws, regulations, and policies referenced in the specification must be available to CMS upon request through the Medicaid agency or the operating agency.

Technical Guidance

The use of restrictive interventions has potential adverse ramifications for the health and welfare of waiver participants. Consequently, when their use is permitted during the course of the provision of waiver services, it is important that there be effective safeguards in place to ensure that such interventions are only used when necessary and are carried out in a manner that avoids harm to the waiver participant.

When the use of restrictive interventions is permitted during the course of the provision of waiver services, identify the types of interventions that are allowed (including the circumstances under which they are allowed) and the types of restrictive interventions that are specifically prohibited. For example, a state may prohibit the use of aversive methods altogether. Do not include here restraints or seclusion that already have been addressed in Item G-2-a.

Describe in detail the safeguards that have been established for each type of permitted restrictive intervention. These safeguards should address:

- 1) First use of non-aversive methods (i.e., a requirement that aversive methods may only be employed as a last resort);
- 2) Methods to detect the unauthorized use of restrictive interventions;
- 3) Protocols for authorizing the use of restrictive interventions, including treatment planning requirements and review/reauthorization procedures (including, as applicable the use of Human Rights Committees);
- 4) Required documentation (record keeping) when restrictive interventions are used; and,
- 5) Required education and training of personnel involved in the authorization and administration of restrictive interventions.

CMS Review Criteria

The response specifies:

- The types of restrictive interventions that are permitted, the circumstances under which they are allowed, and the types of restrictive interventions that are not allowed.
- For each type of restrictive intervention that is permitted, the state's safeguards address:
 - First use of non-aversive methods;
 - Methods to detect the unauthorized use of restrictive interventions;
 - Protocols for authorizing the use of restrictive interventions, including treatment planning requirements and review/reauthorization procedures;
 - Required documentation when restrictive interventions are used; and
 - Required education and training of personnel involved in authorization and administration of restrictive interventions.

Item G-2-b-ii: State Oversight Responsibility

Instructions

Specify the State agency (or agencies) responsible for monitoring and overseeing the use of restrictive interventions, how this oversight is conducted, and its frequency. When the state does not permit the use of restrictive interventions, the response to this item should focus on how the state detects the unauthorized use of restrictive interventions.

Technical Guidance

- **Identify the state agency (or agencies) responsible for overseeing the use of restrictive interventions and ensuring that state safeguards concerning their use are followed.** When this oversight is not carried out by the Medicaid agency or the operating agency (if applicable), describe how the results of monitoring the use of restrictive interventions are regularly communicated to the agency that operates the waiver. Since use of restrictive interventions has potential implications for the health and welfare of waiver participants, it is important that the agency that administers the waiver be aware of potential violations of state policies concerning the use of restrictive interventions.
- **How oversight is conducted.** Oversight methods include monitoring the use of restrictive interventions to ensure that all applicable state requirements are followed and detecting their unauthorized, inappropriate/ineffective use or over use. Oversight methods should include gathering information about frequency, length of time of each use and the duration of use over time as well as the impact of restrictive interventions on the individual. Oversight also includes using information to assure proper use and to reduce the use of restrictive interventions in the future. The response should include;
 - 1) How information about restrictive interventions is collected and compiled so that it can be analyzed to enable the identification of trends/patterns and the development of quality improvement strategies . For example, reports may be filed by phone, in written form, or through the use of information technology, each of which requires specific practices to collect, compile and analyze the information.
 - 2) How information about the use of restrictive interventions used to identify issues related to the waiver populations, providers and at the system-wide level and how that information is used to develop strategies to ensure the proper use and achieve a reduction in the use of restrictive interventions in the future.
 - 3) The frequency of oversight activities.

CMS Review Criteria

The waiver specifies:

- The state agency (or agencies) responsible for overseeing the use of restrictive procedures and ensuring that the state’s safeguards are followed.
- When oversight is not performed by the Medicaid agency or the operating agency (if applicable), the process for the oversight agency to communicate information and findings to the Medicaid agency and/or operating agency.
- Methods for detecting unauthorized use, over use or inappropriate/ineffective use of restrictive procedures and ensuring that all applicable state requirements are followed.
- How data are analyzed to identify trends and patterns and support improvement strategies.
- The methods for overseeing the operation of the incident management system including how data are collected, compiled, and used to prevent re-occurrence.
- The frequency of oversight activities.

Appendix G-3: Medication Management and Administration

Overview

This Appendix addresses two distinct topics: (a) medication management, which means the review of waiver participant medication regimens (e.g., the appropriateness of the medications