



**Colorado Home and Community-Based Services
 Heightened Scrutiny Evaluation**

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-001
Provider Name	Bonell Good Samaritan - Manor
Setting Name	
Setting Address	708 22 nd Street, Greeley, CO 80631
Compliant as of Date	Expected to submit remaining evidence of compliance this summer, to be verified by 12/31/21
Date of This Evaluation	4/21/2020 Update 5/19/2021

Setting Type

- Alternative care facility (ACF)
- Group Residential Services and Supports (GRSS) group home
- Individual Residential Services and Supports (IRSS) host home
- Individual Residential Services and Supports (IRSS) other
- Supported Living Program (SLP) facility under BI waiver
- Transitional Living Program (TLP) facility under BI waiver

Waivers Served

- Community Mental Health Services (CMHS) for Persons with Major Mental Illnesses
- Elderly, Blind and Disabled (EBD)
- Persons with Brain Injury (BI)
- Persons with Developmental Disabilities (DD)

Reason(s) for Heightened Scrutiny

- Located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment (such as a hospital, nursing facility, ICF/IID, or IMD);
- Located in a building on the grounds of, or adjacent to, a public institution; or
- Has the effect of isolating individuals receiving Medicaid home- and community-based services (HCBS) from the broader community of individuals not receiving Medicaid HCBS

Setting Description
The setting is an Alternative Care Facility (ACF) and has been identified as Heightened Scrutiny due to it being co-located with a nursing facility, and for the effect of isolating individuals from the broader community of individuals not receiving Medicaid HCBS. The setting was flagged for heightened scrutiny due to its co-location with a nursing facility. The provider has indicated that they have closed one of the doors that leads to the corridor that connects to the skilled nursing facility that is located 412 ft. from the assisted living facility. A code is needed to access the skilled nursing floors and there is also a fire door that is always closed. The individuals have requested to have 1 door open to facilitate their use of walkers and scooters.



Compliance Summary

Compliant?	Federal Requirement	Summary of Evidence of Compliance
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS. 42 C.F.R. § 441.304(c)(4)(i).</p>	<p>During the site visit in August 2018, state staff observed that the individuals did not interact with persons that do not have disabilities and do not live or work in the place they live. Since the time of site visit, the provider has implemented various methods to support individuals to access their community by having provider staff knock on individuals' doors to remind them of upcoming activities, posting events occurring within the broader community, and educating individuals on public transit options. The setting does not have any policies or procedures that prevent people from interacting with or receiving services in the community. As described, the setting informs individuals of upcoming events and activities occurring in the broader community, and of public transit and ride hailing companies.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and for residential settings, resources available for room and board. <i>Id.</i> § 441.301(c)(4)(ii).</p>	<p>The setting worked with case management agencies to obtain the provider choice page in the statement of agreement from an individual's service plan. This page informs the individual that they have choice of HCBS service providers. The provider ensures that the individual's choice of the setting is documented in each person-centered service plan.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint. <i>Id.</i> § 441.301(c)(4)(iii).</p>	<p>The setting does not employ use of restraints, of any kind. Cameras are not used at the setting and there are no alert devices that chime or signal when a person stands near or passes through a doorway or window.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial	<p>The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in</p>	<p>The setting does not have rules, policies, procedures, or practices that restrict individual's rights under the settings rule on a broad basis. Individuals have the choice to participate in religious activities</p>



<input type="checkbox"/> No	making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. <i>42 CFR 441.301(c)(4)(iv)</i>	and in the community. The provider helps individuals learn of other transportation options such as public transit and ride hailing companies. Individuals determine their daily activities and set their own schedule. The setting offers individualized supports that enable people to choose activities of their own interests both individually and in groups. There are no specific times or scheduled times as to when people can leave the setting.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	The setting facilitates individual choice regarding services and supports, and who provides them. <i>42 CFR 441.301(c)(4)(v)</i>	The setting supports each individual in choosing the services they desire and who provides them.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at minimum, the same responsibilities and protections from eviction that tenants have under the landlord-tenant law of the State, county, city or other designated entity. For settings where landlord-tenant laws do not apply, a lease, residency agreement, or other form of written agreement is in place for each HCBS participant providing protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord-tenant law. <i>42 CFR 441.301(c)(4)(vi)(A)</i>	The provider has modified the existing residential agreement to ensure that it is a legally enforceable agreement and provides protection from eviction and appeals.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	Each individual has privacy in their sleeping or living unit: (1) Units have entrance doors lockable by the individual, with only	During the site visit state staff observed that each individual has keyed lock to their bedroom door. Individuals have the freedom to furnish and decorate their sleeping or living units.



	<p>appropriate staff having keys to doors. (2) Individuals sharing units have a choice of roommates in that setting. (3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement. <i>42 CFR § 441.301(c)(4)(vi)(B)</i></p>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>Individuals have the freedom and support to control their schedules and activities and have access to food any time. <i>42 CFR § 441.301(c)(4)(vi)(C)</i></p>	<p>All individuals have access to the typical facilities of a home including the kitchen, dining area, laundry, and common areas. They can self-administer medications, manage their own money, practice their preferred religion, and access food whenever they choose. Individuals provide input on meals and upcoming menu during resident council meetings and are able to store food in airtight containers in their rooms. Individuals have access to alternate meals when desired. Individuals have the opportunity to participate in activities, both on and offsite within the broader community, and are encouraged pursue personal interests and hobbies.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>Individuals are able to have visitors of their choosing at any time. <i>42 CFR § 441.301(c)(4)(vi)(D)</i></p>	<p>The provider developed a remediation plan to update the House Rules document to allow visitors at any time, including overnight, without requiring approval from the staff or administrator.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting is physically accessible to the individual. <i>42 CFR 441.301(c)(4)(vi)(E)</i></p>	<p>The setting removed internal alert devices that prohibited individuals from freely moving around the setting. The setting is physically accessible with no common areas off limits to individuals.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>Any rights modifications are supported by a specific assessed need and justified in the person-centered service plan. The following</p>	<p>The provider developed a remediation plan to ensure all staff are trained in person-centered principles. The provider identified a designated smoking area within the setting's grounds. And finally, the provider developed a remediation plan to modify their policies and procedures to align with federal and state requirements on</p>



	<p>criteria are documented in the person-centered service plan:</p> <ol style="list-style-type: none">(1) A specific and individualized assessed need.(2) The positive interventions and supports used prior to any rights modifications.(3) The less intrusive methods of meeting the need that were tried but did not work.(4) A clear description of the rights modification that is directly proportionate to the specific assessed need.(5) A plan for the regular collection and review of data to measure the ongoing effectiveness of the modification.(6) Established time limits for periodic reviews to determine whether the modification is still necessary or can be terminated.(7) The informed consent of the individual.(8) An assurance that interventions and supports will cause no harm to the individual. <p><i>42 CFR 441.301(c)(4)(vi)(F)</i></p>	<p>rights and autonomy. The provider must ensure any proposed rights modifications are supported by a specific assessed need and justified in the person-centered service plan, including the need for informed consent from the individual. The provider will use the state-approved informed consent template in the event a rights modification is being proposed.</p>
--	--	---



Summary of Findings From Desk Review and/or Site Visit(s)

The state reviewed the Provider Transition Plan (PTP) and supporting materials submitted by the provider for this setting. In 2018, 2019, 2020, and 2021 the provider submitted updates to its Provider Transition Plan (PTP) including revised documents and additional evidence (e.g., photographs). The update process has been an iterative process. State staff will continue to work with the provider to ensure that the PTP accurately identifies remaining compliance issues and heightened scrutiny triggers and the provider's resolution of all such issues.

The state reviewed the following materials submitted by the provider:

- Rights of Persons Handout
- Grievance/Complaint Policy
- Medication Policy
- Mistreatment Policy
- Physical Intervention Policy
- Incident Reporting Policy
- Money Management Policy
- Lease/Residency Agreement
- Admission/Discharge Policies
- House Rules
- Recent Month Calendar of Community Activities, including calendars of community events and community life enrichment activities
- Photographs of the exterior ramp, internal corridor door between the setting and the Skilled Nursing Facility, and the main door
- A Statement of Choice document
- Designated Smoking Area update memo
- Photograph of designated smoking area

If the provider updated any of these materials, the findings in this evaluation reflect the most recent version of each item.

A site visit was completed by state staff on 8/2/2018. During the site visit, state staff observed the setting, spoke with the provider staff, and spoke with individuals outside the presence of provider staff to learn about their lived experience at the setting. State staff reviewed the setting's policies and procedures, and other documents.

A number of compliance issues were identified and a remediation plan was discussed during the site visit. The setting has provided information on public and private transit options, as well as ensure individuals have the opportunity to engage in community integrated activities with the broader community. The setting removed internal alert devices that prohibited individuals from freely moving around the setting. The setting is physically accessible with no common areas off limits to individuals. The provider has submitted evidence that individuals have input to the menus, and have access to snacks 24/7. The provider updated existing policies to align with federal and state requirements. Furthermore, the provider has submitted evidence that the setting has a designated, accessible smoking area on the grounds of the facility and submitted the Designated Smoking Area update memo. The provider has trained all staff on Person-Centered Thinking principles. Final verification of setting's complete compliance with the HCBS Settings Final Rule will be determined during a future site visit.

Summary of individual interviews:



Interviews were conducted on 8/2/2018. Individuals reported feeling respected by staff. Individuals understood who they could contact if they had a grievance or complaint. Interviews also reflected individuals had full access to all common areas. Individuals reported having keyed bedroom doors, and being able to independently access the setting, using the provided code. Interviews did not result in concerns about individual rights.

Remediation Plan (If Not Already Implemented) & State Oversight to Verify Implementation

As described above, state staff have verified via desk review the implementation of a number of required changes to policies and procedures and other provider documents. State staff will visit this setting upon the provider's confirmation that it has finished implementing the remaining changes, in order to confirm that this is the case.

Additional Comments

The Individual/Family/Advocate (IFA) survey was reviewed. There were fewer than 30 IFA survey respondents, all were "person who receives Medicaid funded home and community based services." Most were very positive, a few mentioned the quality and consistency of the food could be better. There was one complaint that when a resident had a communicable illness, resident had to be confined to their room for several days and meal times were difficult.