



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

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-007
Provider Name	Prairie View Village of Las Animas
Setting Name	
Setting Address	821 Second St., Las Animas, CO 81054
Compliant as of Date	Expected to submit remaining evidence of compliance this summer, to be verified by 12/31/21.
Date of This Evaluation	6/12/2020 Updated 04/27/21

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
This setting is an Alternative Care Facility (ACF) located on the same grounds as a nursing home. The ACF is spacious, home-like in appearance, and functions entirely separate from the nursing home. There is no overlap of staff under any circumstance. The setting has its own address, administrator, policy and procedures, phone number, transportation vehicle and driver, activities, and operates under a separate budget. The setting's administrator is knowledgeable in optimizing independence and person-centered supports.



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>Public transportation is available to take individuals shopping in town at no charge. The setting also offers a door-to-door van service if individuals need or prefer that mode of transportation. This information is provided to the individuals. During a site visit in 2018, state staff observed a wealth of supports to community activities, including recreation, shopping, and church. The provider also maintains a community board, which is frequently updated with local happenings, organized events and outings, and other items of interest. Community integration is supported on an ongoing, varied, and frequent basis.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The settings 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>Residents have their choice of providers and have private units. The provider encourages independence with medication administration and other daily living skills. Residents have full access to the entire setting. Each individual sets his/her own schedule, including shower schedules. Staff have a detailed understanding of each person's preferences and supports them in a highly individualized manner.</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 provider updated their House Rules to eliminate broad restrictions, including restrictions to alcohol consumption. The provider completed a remediation action to remove all interior cameras except those that point at exits and the medication cart.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.</p>	<p>All residents have large, private suites with private bathrooms. All individuals may lock their doors, have complete privacy, and a key to enter the facility. Most units also have a private exterior door to enter/exit their suite. Each person has their own PO Box to send/receive mail privately. Residents provide frequent input to menu planning and can make menu adjustments daily. Individuals interviewed reported a high degree of satisfaction with their daily</p>



	<i>42 CFR § 441.301(c)(4)(iv)</i>	living in this home. The setting has a small kitchen, separate from the main, commercial kitchen, for individual use. Individuals can access snacks, light meals, beverages, etc. at any time. Residents also have small kitchenettes within their suites. Staff have completed Person-Centered Thinking (PCT) training.
<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 individuals are given the choice to reside and receive services from the setting. The individuals choose who provides their supports.
<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 completed a remediation action to update the agreement to include all required elements.
<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 appropriate staff having keys to doors.	All residents have large, private suites with private bathrooms. Individuals may lock their doors, have complete privacy, and have a key to enter the facility. Most units also have a private exterior door to enter/exit the suite directly. During the site visit, many residents showed state staff how they personalized and decorated their suites, which are designed like small apartments. State staff observed staff



	<p>(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>	<p>to knock on doors and seek permission before entering, and overall demonstrated respectful practices in this area.</p>
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No</p>	<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>Residents give frequent input to menu planning and can make menu adjustments daily. The setting has a small kitchen, separate from the main, commercial kitchen, for individual use. Individuals can access snacks, light meals, beverages etc. at any time. Individuals also have small kitchenettes with their suites. During the site visit, residents were observed to be engaged in a wide variety of activities, in small groups or on their own. Residents were free to come and go as they please, and staff provide individualized supports, when needed, to ensure each resident controls their daily schedule.</p>
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No</p>	<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>Individuals may have visitors at any time and socialize with whomever they choose, including engaging in romantic relationships. During the site visit, state staff observed visitors being welcomed by residents and staff.</p>
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No</p>	<p>The setting is physically accessible to the individual. <i>42 CFR § 441.301(c)(4)(vi)(E)</i></p>	<p>This setting was built with the population served in mind, and accommodates a wide variety of mobility needs. During the site visit, state staff observed the home to easily accommodate walkers, wheelchairs, etc. Other safety features are installed as needed, such as grab bars in bathrooms. The setting has retained a home-like appearance.</p>
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No</p>	<p>Any rights modifications are supported by a specific assessed need and justified in the person-centered service plan. The following criteria are documented in the person-centered service plan: (1) A specific and individualized assessed need.</p>	<p>The provider updated their House Rules to eliminate broad restrictions, which previously prohibited alcohol. The provider's policies do not restrict residents on a broad basis. The provider reports there are no rights modifications needed at this time. Residents interviewed on site reported satisfaction their rights were upheld.</p>



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	<p>(2) The positive interventions and supports used prior to any rights modifications.</p> <p>(3) The less intrusive methods of meeting the need that were tried but did not work.</p> <p>(4) A clear description of the rights modification that is directly proportionate to the specific assessed need.</p> <p>(5) A plan for the regular collection and review of data to measure the ongoing effectiveness of the modification.</p> <p>(6) Established time limits for periodic reviews to determine whether the modification is still necessary or can be terminated.</p> <p>(7) The informed consent of the individual.</p> <p>(8) An assurance that interventions and supports will cause no harm to the individual.</p> <p><i>42 CFR § 441.301(c)(4)(vi)(F)</i></p>	
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Summary of Findings From Desk Review and/or Site Visit(s)

State staff conducted a site visit in 2018. During the visit, state staff observed the setting and its operations, spoke with provider staff, and spoke with individuals outside the presence of provider staff to learn about their lived experience at the setting. State staff also reviewed the provider's policies and procedures and other documents (listed below). State staff observed the setting displayed person-centered principles throughout all of its operations and interactions with residents. At the time of the site visit, many person-centered practices were in place, though staff had not been formally trained in these concepts.

The state reviewed the following materials submitted by the provider {this list will vary by setting type}:

- 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

Using all of this information, state staff completed an initial Provider Transition Plan (PTP) for this setting, identifying certain compliance issues as well as the required remediation for these issues, and noting certain policy and procedure revisions, supplemental materials, and evidence that would be required from the provider. State staff asked the provider to make changes to its documents, largely to reflect person-centered practices already in place to add detail where needed (e.g., adding appeal rights to the residential agreement; specifying residents are supported to self-administer medications.) State staff advised the administrator to remove cameras from common areas.

From 2018 – 2020, the provider submitted updates to its PTP, including revised documents and additional evidence (such as work orders and photographs of camera removal). The administrator assembled a robust training in person-centered principles, trained all existing staff, and made such training part of the orientation for new staff. The remediation process was iterative and reflected feedback and communications from state staff. In September 2020, state staff determined the provider had demonstrated full compliance with the HCBS Settings Final Rule.

Summary of individual interviews:

Interview responses are not available

The Individual/Family/Advocate (IFA) Survey results were reviewed. There was one IFA survey respondent, no concerns.



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.