



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

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-009
Provider Name	The Villas at Sunny Acres - ALR
Setting Name	
Setting Address	2515 E. 104 th Ave., Thornton, CO 80233
Compliant as of Date	11/4/2019
Date of This Evaluation	Updated 4/30/21

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 {move to left-hand column}

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, or intermediate care facility for individuals with intellectual or developmental disabilities (ICF/IID) or Institute for Mental Disease (IMD))
- Located in a building on the grounds of, or adjacent to, a public institution
- 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 Alternative Care Facility (ACF) is on the same grounds as a nursing facility that is owned and operated by the same provider. The ACF is in a separate building from the nursing facility, and does not share staff, house rules or operating procedures. During a site visit, state staff observed good separation of policy and practice between HCBS operations and nursing home operations. A high degree of community inclusion was observed. The site supports individuals whom are private pay and individuals receiving waiver services. All individuals have a spacious, private room with a private bathroom and a small kitchenette. Individuals that were interviewed by state staff reported living an independent, self-directed life. Individuals meet monthly with the executive chef to give their direct input on/satisfaction with menu items. Individuals also have access to a small kitchen/dining area where they may access self-serve snacks, light meals, and beverages 24/7 without staff assistance. The provider encourages independence with laundry and other daily living skills. The assessor observed ample information on community activities and support with accessing transportation. The provider also invites the community into the home, such as having Native American dancers perform. Support services optimize independence. For example, the setting supports self-administration of medications, with a high percentage of individuals self-administering some portion of their medications.



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, state staff observed that the ACF sits on a major bus line and offers a wealth of supports to access the broader community. There was ample information on community activities, and transportation was offered via a personalized sign-up system. Recent outings included an Alzheimer’s charity walk, a Rockies baseball game, and gambling in Blackhawk. The provider also invites the community into the home, such as having Native American dancers perform. Transportation is provided to all local churches.</p> <p>Individuals can leave the setting at will. The setting does not use restrictive devices such as egress alerts. In addition, after being out in the community, individuals can return at will. They have a key or key-code to enter the setting as they wish.</p> <p>Regarding access to resources, the provider described a person-centered practice for assisting residents with their funds, if needed, in a manner that continues to optimize independence. The provider completed remediation to include additional detail in its fund management policy/procedure to capture the excellent supports offered in this area.</p> <p>In addition to the site visit, the provider submitted and updated documents regarding Residents Rights, House Rules, Money Management Policy, and a recent Calendar of Community Activities as evidence of compliance.</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</p>	<p>As required by departmental standards for case management, individuals are given the choice of whether to reside in and receive services from the setting; The individuals are informed of and given a choice among setting options, including non-disability-specific options; setting options are identified and documented in their person-centered service plans; these options are based on the individual’s needs, preferences, and resources; and individuals choose who provides their supports.</p>



	available for room and board. <i>Id.</i> § 441.301(c)(4)(ii).	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	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).	During the site visit, state staff observed that individuals were treated respectfully and that their input was invited and valued. For example, residents meet monthly with the executive chef to give direct input on/satisfaction with food. The setting contains private rooms with a private bathroom. Individuals have keys to their rooms. The setting does not employ chemical, mechanical, or physical restraints.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	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. <i>Id.</i> § 441.301(c)(4)(iv)	<p>Individuals interviewed at the setting reported living an independent, self-directed life. In addition, state staff observed during the site visit that support services at the setting optimized independence. For example, the setting supports self-administration of medication, and a high percentage of residents self-administer some portion of their medications.</p> <p>It was apparent from the site visit that individuals have the choice to wear the clothing they want, style their hair as they wish, and decorate and furnish their room with personal items.</p>
<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>Id.</i> § 441.301(c)(4)(v).	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	The initial site assessment revealed that individuals did not have a legally enforceable residential agreement, however, this was remediated by the provider. The provider added information to the agreement regarding appeal rights.



	<p>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>Id.</i> § 441.301(c)(4)(vi)(A).</p>	
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No</p>	<p>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. (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>Id.</i> § 441.301(c)(4)(vi)(B).</p>	<p>State staff observed during the site visit that all rooms are private, with private bathrooms, and include a kitchenette. Individuals do not share rooms. Individuals have keys to their rooms, with only appropriate staff having keys. State staff observed that individuals have the choice to decorate and furnish their room with personal items. Individuals can have visitors at any time and engage in romantic relationships. In addition to the site visit, the provider submitted receipts for door locks and pictures of doors with locks in place, as evidence of compliance.</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>Id.</i> § 441.301(c)(4)(vi)(C).</p>	<p>During the site visit, state staff observed that resident rooms have small kitchenettes and that residents have 24/7 access to a small kitchen/dining area where they can serve themselves snacks, light meals, beverages, etc. State staff also observed and confirmed via resident interviews that the provider supports people in choosing and participating in activities in the community (with individualized sign-up for transportation support, in addition to proximity to the bus line and group outings), accessing their own money, and leading living independent, self-directed lives.</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>Id.</i> § 441.301(c)(4)(vi)(D).</p>	<p>State staff reviewed the House Rules. Individuals residing at this ACF can have visitors of their choosing at any time and engage in romantic relationships. In addition, all residents have private rooms, enhancing their freedom to enjoy private visits with people of their choosing.</p>



<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting is physically accessible to the individual. <i>Id.</i> § 441.301(c)(4)(vi)(E).</p>	<p>State staff observed during the site visit that the provider encourages independence with laundry and other living skills, and that residents have full access to all typical facilities in the home including the kitchen, dining area, laundry, and comfortable seating in shared areas. The setting does not utilize any type of monitoring/egress alerts, cameras, or chimes.</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 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. 	<p>State staff observed during the site visit and initial review of documents that the setting was largely already compliant with the federal settings criteria and did not have rules, policies, procedures, or practices that restrict individuals' rights under the federal rule on a broad basis. The provider completed a remediation plan to include changes to its policies and procedures, residential agreement, and the like, largely to reflect the rights-honoring practices already in place, to add detail where needed (e.g., adding appeal rights to the residential agreement), and to be more explicit that any rights modifications would be supported by a specific assessed need and justified in the person-centered service plan.</p> <p>The provider submitted updated documentation regarding Rights of Persons, Grievance/Complaint Policy, Mistreatment Policy, Physical Intervention Policy, Incident Reporting Policy, Money Management Policy, and Training on Person-Centered Care as evidence of compliance.</p>



	<p>(8) An assurance that interventions and supports will cause no harm to the individual. <i>Id.</i> § 441.301(c)(4)(vi)(F).</p>	
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Summary of Findings From Desk Review and/or Site Visit(s)

State staff conducted a site visit in 2017. During the site 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 during the site visit and initial review of documents that the setting was largely already compliant with the federal settings criteria.

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

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 modest changes to its documents, largely to reflect the rights-honoring practices already in place (e.g., in the money management policy), to add detail where needed (e.g., adding appeal rights to the residential agreement), and to be more explicit that any rights modifications would be supported by a specific assessed need and justified in the person-centered service plan.

In 2018 and 2019, the provider submitted updates to its PTP, including revised documents and additional evidence (such as receipts and photographs). The update process was iterative and reflected feedback and communications from state staff. In November 2019, state staff determined that the provider had finished demonstrating full compliance with the HCBS Settings Final Rule.

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

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Additional Comments

The state audit trail supports the assertion that the setting has addressed the issues found in the site assessment. This is evidenced by the additional documentation uploaded in the PTP System by the provider for each area that was assessed as needing further development and mitigation.

No IFA survey respondents at this setting.