

Department of Health Care Policy & Financing

Colorado Home and Community-Based Services Heightened Scrutiny Evaluation

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-011
Provider Name	Eagle Crest Assisted Living Community
Setting Name	
Setting Address	222 Eagle Crest Drive Rangely, CO 81646
Compliant as of Date	May 18, 2020
Date of This Evaluation	April 21, 2021

Setting Type

 \boxtimes Alternative care facility (ACF)

 $\hfill\square$ Group Residential Services and Supports

(GRSS) group home

Individual Residential Services and Supports (IRSS) host home

 \Box 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
- \boxtimes Elderly, Blind and Disabled (EBD)
- \Box 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);

 \boxtimes Located in a building on the grounds of, or adjacent to, a public institution; or

 $\hfill\square$ 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 located directly across the street from a hospital that owns and operates the Alternative Care Facility (ACF). The ACF has separate operations, staff, policies and procedures from the hospital. Policies and procedures only address the ACF and all hospital related information and logos have been removed.



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Compliance Summary

Compliant?	Federal Requirement	Summary of Evidence of Compliance
⊠ Yes □ Partial □ No	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. <i>Id.</i> § 441.304(c)(4)(i).	The setting is integrated in and supports full access of the individuals to the greater community. The setting has a monthly calendar posted, with opportunities for community activities. The calendar includes community events from the local newspaper, along with opportunities available through the local recreation center. The monthly calendar also includes transportation available to individuals with the Rangely Rambler County bus. Individuals are asked at their "resident council meeting" what they would like to do, and how they would like to get involved in the Rangely community. Individuals are also involved in community volunteer opportunities such as making ornaments for the hospital, meals on wheels recipients, supporting animal shelter food drives and making blankets to give to the local ambulance and police departments for their vehicles.
⊠ Yes □ Partial □ No	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).	 In Colorado, case management agencies are responsible for working with the individual to ensure that the setting is selected by the individual from among setting options including non-disability-specific settings and, where residential supports will be provided, an option for a private unit in a residential setting; ensuring that setting options are identified and documented in the person-centered support plan and are based on the individual's needs, preferences, and for residential settings, resources available for room and board; and supplying the person-centered support plan to provider agencies for implementation. Provider agencies are responsible for implementing the person-centered support plan. They are also responsible for referring individuals to their case management agency if they want to request a different provider or setting. As part of the site-specific verification process, the state verified that providers complied with their responsibilities relating to



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		informed choice. This process included verifying that settings did not have compliance issues such as telling individuals that they must receive services there, even if they would prefer something else.
		In conjunction with case management, the setting is selected by the individual from setting options, and those options are documented in the person-centered plan.
⊠ Yes □ Partial □ 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).	Provider policies and procedures align with federal and state requirements on rights of privacy, dignity, respect and freedom from coercion and restraint. The setting ensures that individuals are free from physical, chemical and mechanical restraints. Individuals have an area where private phone calls can be made. The provider no longer utilizes a medication cart to administer medications, as that was an institutional practice. Their staff dress code has also been updated to eliminate the use of scrubs.
⊠ Yes ⊡ Partial ⊡ 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. Id. § 441.301(c)(4)(iv)	Individuals are supported to choose the setting they reside in, who provides services to them and are supported in making informed decisions. Individuals in the setting determine their daily activities and set their own schedule. Individuals are free to come and go at will. There are no scheduled times that individuals need to be in the setting, as all individuals have a key to the home. Individuals are able to exercise personal choice in all aspects of their lives.
⊠ Yes ⊡ Partial ⊡ No	The setting facilitates individual choice regarding services and supports, and who provides them. <i>Id.</i> § $441.301(c)(4)(v)$	The individuals can exercise personal choice regarding services and supports, and who provides them.
⊠ Yes ⊡ Partial ⊡ 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	The provider has modified the residential agreement to ensure that it is a legally enforceable agreement and provides protection from eviction and appeals.



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	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>Id.§</i> 441.301(c)(4)(vi)(A	
⊠ Yes □ Partial □ 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. (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. Id.§ 441.301(c)(4)(vi)(B) 	Individuals have privacy in their sleeping unit, with lockable doors. Staff have been trained to only enter bedrooms with permission, except in emergency situations. Additionally, bathroom doors are lockable by individuals. Individuals have a choice in roommates and freedom to decorate their rooms as they choose.
⊠ Yes □ Partial □ No	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)	All individuals in the ACF have access to the typical facilities of a home, including all common areas at all times. Individuals are supported to self-administer medications, manage their own money and practice their preferred religion. They also have independent access to food/snacks at a central location within the home, and are encouraged to provide input for meal planning and snacks offered. Individuals are able to consume alcohol, if they so choose.
⊠ Yes ⊡ Partial ⊡ No	Individuals are able to have visitors of their choosing at any time. <i>Id.§</i> 441.301(c)(4)(vi)(D)	Individuals can have visitors at any time and socialize with whomever they choose, including romantic relationships.
⊠ Yes □ Partial □ No	The setting is physically accessible to the individual. ld.§ 441.301(c)(4)(vi)(E)	The site visit completed by state staff determined that the setting is physically accessible to the individuals.



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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. Through an iterative process, the state worked with the provider to ensure that the PTP accurately identified all compliance issues and heightened scrutiny triggers and reflected resolution of all such issues (or a plan to timely finish doing so).

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
- Snacks Policy
- Locking of the Doors Policy
- Dress Code Policy
- Receipt for door keys

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 in 2017. A number of compliance issues were identified, primarily with the ACF demonstrating institutional characteristics adopted from the hospital that it shares ownership with. A remedial plan was put in place and the provider made all the necessary changes required with compliance reached in 2020. To meet requirements, the provider eliminated the use of scrubs and nametags, removed references to the hospital within all policies, made changes to procedures to ensure community integrated opportunities, discontinued the use of med carts and completed person-centered thinking training for all staff. The provider also revised the house rules and residential agreement to remove all broadly restrictive information and meet the requirements of the Settings Final Rule. At this time, no further action is required. Final compliance will be verified with a future site visit.

Summary of individual interviews: Individual interviews were completed during the state site visit. Individuals reported having their own bedrooms with lockable doors. They felt that their belongings were secure. The individuals in the home stated that the staff respected their privacy and knocked before entering their bedroom. Both individuals reported being able to manage their own funds. The individuals interviewed had their own vehicles and were able to freely access the community.

The Individual/Family/Advocate (IFA) Survey results were reviewed, and no comments were submitted for this setting.