



COLORADO

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-013
Provider Name	Jacob J and Anne B Walter Memorial Living Center
Setting Name	
Setting Address	900 Pine Street, Julesburg, CO 80737
Compliant as of Date	Expected to submit remaining evidence of compliance this summer, to be verified by 12/31/21.
Date of This Evaluation	May 20, 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 type is an Alternative Care Facility (ACF) that supports a group of individuals. The setting is in a small community with a population of approximately 1500. The setting is a separate, stand-alone entity next to Sedgwick Memorial Hospital. The remedial action plan included the separation of operations from those of the institution. The provider submitted revised documentation in their policies and procedures, to reflect the ACF operates separate from the nearby hospital.



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>The setting is in a small community with a population of approximately 1500. The provider has a van and a car to use for community activities. The community does not have a community center, but the individuals are involved in local churches, family events, and community activities. The provider has a posted calendar that includes activities offered within the setting as well as options available in the community. Information on community events is also shared at the monthly resident meetings.</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>In Colorado, case management agencies are responsible for</p> <ul style="list-style-type: none"> • 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. <p>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.</p> <p>As part of the site-specific verification process, the state verified that providers complied with their responsibilities relating to 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.</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 facility does not employ chemical, mechanical, or physical restraints and has ensured the required policy is specific to the setting. Name plates with identifying information have been updated to include individual's first name and last initial only. The provider submitted a revised Grievance Policy ensuring individuals are not time limited as to when they can submit a complaint.</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. <i>42 CFR § 441.301(c)(4)(iv)</i></p>	<p>Individuals are free to choose what they want to do and when they want to do it. They are free to interact with persons of their choice. They also have access to all common areas of their home.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>The setting facilitates individual choice regarding services and supports, and who provides them. <i>42 CFR § 441.301(c)(4)(v)</i></p>	<p>The setting facilitates individual choice regarding services and supports, and who provides them.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>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></p>	<p>The provider modified their residential agreement to ensure it is a legally enforceable agreement which provides protection from eviction and appeals.</p>



<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<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>42 CFR § 441.301(c)(4)(vi)(B)</i></p>	<p>Documentation indicates that all individuals have a lock and key for their bedroom doors, and any shared bathroom doors are equipped with locks. The setting has two bedrooms large enough to share, which are specifically for married couples. All other bedrooms are private. Individuals are able to furnish and decorate their bedrooms, based on their preference and taste.</p>
<input type="checkbox"/> Yes <input checked="" 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>Individuals can sit where they want for their meals, and they have access to food at all times. Individuals have input to menu planning on a weekly basis, during the resident meetings.</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 individuals can have visitors anytime they wish, including relationships of a romantic nature.</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 is physically accessible to all individuals living in the home.</p>
<input type="checkbox"/> Yes <input checked="" 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: (1) A specific and individualized assessed need.</p>	<p>The provider is working to ensure staff are trained on person-centered principles. The provider updated the House Rules to show the setting has a designated area for smoking and permits alcohol for consumption in the home. The provider updated the Resident Rights document to reflect that individuals can use the phone at any time.</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)

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
- Resident council meeting information
- Documentation of last name removal of bedroom placards

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

Summary of individual interviews: This home has not yet been visited by state staff, so there are no interviews to be summarized.

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

Additional Comments

The provider has made all the required updates to their policies and ensured the policies are specific to the ACF. The ACF has monthly resident meetings at which time a variety of topics are discussed. Individuals and staff have an opportunity to bring up ideas for group activities, menu ideas, and any other updates of interest. The ACF has ensured there is no longer assigned seating and individuals may eat wherever they want. The provider submitted a revised Residential Agreement which includes all required elements to ensure protection from eviction and appeals. The setting ensures privacy on bedroom door placards by including first name and last initial only. The ACF ensures individuals have opportunities to participate in a religion of their choosing. The ACF has a van and a car for use to provide transportation and support for individuals to participate in community activities. The ACF has ensured the House Rules reflect there is an outside designated area for individuals to smoke and alcohol is allowed. State staff will schedule a final visit to verify that compliance has been achieved.