



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

*Non-Residential Setting Summary Sheet*

<b>Heightened Scrutiny Identification Number</b>	HS-016
<b>Provider Name</b>	Strive
<b>Setting Name</b>	Wood Shop
<b>Setting Address</b>	Withheld, Grand Junction CO 81501
<b>Compliant as of Date</b>	Expected to submit remaining evidence of compliance this summer, to be verified by December 31, 2021
<b>Date of This Evaluation</b>	May 27, 2021 <i>for public comment; updated July 28, 2021 for CMS. Updates are in italicized green font.</i>

**Setting Type**

- Adult Day Services (Not IDD Specific) Basic
- Adult Day Services (Not IDD Specific) Brain Injury Waiver
- Adult Day Services (Not IDD Specific) Specialized
- Day Habilitation for Individuals with IDD Prevocational Services
- Day Habilitation for Individuals with IDD Specialized Habilitation
- Day Habilitation for Individuals with IDD Supported Community Connections (SCC)
- Day Treatment under Brain Injury Waiver

- Supported Employment Group Supported Employment

**Waivers Served**

- Children's Extensive Support (CES)
- Community Mental Health Supports (CMHS) for Persons with Major Mental Illness
- Elderly, Blind and Disabled (EBD)
- Persons with Brain Injury (BI)
- Persons with Developmental Disabilities (DD)
- Supported Living Services (SLS)

**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

<b>Setting Description</b>
Wood shop is a program that serves a small group of individuals in 2 program settings with a few staff. The building has 3 separate spaces that are joined by doors making it possible to walk through each space without leaving the building. Half of the individuals work in a separate space from the other half of the supported employment group. Each space has its own main entrance. This program teaches people how to safely use equipment, build and complete projects/orders for internal and external customers. The setting is owned and operated by the provider in a



commercial area of the community. The individuals at this setting make products for sale. Historically, and due to COVID restrictions, individuals are only helping to make deliveries rather than receiving customers to come in and make an order. The provider's future plan is to turn the building into a store front where they can be open to the public and have routine customers. Implementation of the provider's plan and the outcome of community integration will be evaluated by state staff completing a future site visit, once the provider reports the services are community integrated.



**Compliance Summary**

Compliant?	Federal Requirement	Summary of Evidence of Compliance
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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>Based on the assessment completed and the supporting evidence, the setting still requires additional modifications in order to become compliant. The provider does not have any community members working alongside participants of the program. The calendar has a designated time in which deliveries are completed but does not actually indicate if they had orders to deliver. The provider will submit a plan that details how the current program will transform into a community integrated shop with the same degree of access to the community as individuals not receiving Medicaid.</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>42 CFR § 441.301(c)(4)(ii)</i></p>	<p>The setting is compliant with this requirement.</p> <p>In Colorado, case management agencies are responsible for</p> <ul style="list-style-type: none"> <li>• 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;</li> <li>• 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</li> <li>• supplying the person-centered support plan to provider agencies for implementation.</li> </ul> <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>



		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.
<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>42 CFR § 441.301(c)(4)(iii)</i>	The provider has revised and submitted a Rights policy that supports an individuals' right to privacy, dignity, and respect, free from coercion and restraint. The Rights hand out is written in plain language.
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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>42 CFR § 441.301(c)(4)(iv)</i>	The calendar uploaded was identical every day, as it relates to working on projects. The provider will submit and plan as to what and how often orders are completed and delivered.
<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 allows and supports choice regarding the services provided at the Wood Shop.
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	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	The setting is nonresidential, and therefore this requirement is not applicable.



	<p>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><input type="checkbox"/> Yes  <input type="checkbox"/> Partial  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Not Applicable</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>42 CFR § 441.301(c)(4)(vi)(B)</i></p>	<p>The setting is nonresidential, and therefore this requirement is not applicable.</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>In the supporting documentation, individuals have freedom to control their schedule and activities and have access to food as they want. The provider submitted a calendar with a list of things to complete each day without any time constraints.</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>The setting reviewed and modified their current staff trainings to allow participants in the program to socialize with whomever they choose.</p>



<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	<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.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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"> <li>(1) A specific and individualized assessed need.</li> <li>(2) The positive interventions and supports used prior to any rights modifications.</li> <li>(3) The less intrusive methods of meeting the need that were tried but did not work.</li> <li>(4) A clear description of the rights modification that is directly proportionate to the specific assessed need.</li> <li>(5) A plan for the regular collection and review of data to measure the ongoing effectiveness of the modification.</li> <li>(6) Established time limits for periodic reviews to determine whether the modification is still necessary or can be terminated.</li> </ol>	<p>The policy on Informed Consent will be updated by the provider, due to inconsistent information as to who obtains signatures. In one place it says the case manager and another place behavior specialist reviews the form for signature. The Informed Consent process described in the provider's policy does not include all required elements, such as the reason for the rights modification being based on an assessed need, ways the individual has been supported and how the right will be tracked and restored. The provider will submit a revised Informed Consent policy with these revisions.</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
- Grievance/Complaint Policy
- Medication Policy
- Mistreatment Policy
- Physical Intervention Policy
- Incident Reporting Policy
- Dispute Resolution Policy
- Recent Month Calendar of Community Activities
- ISP Program
- Rights of individuals
- Supported Employment Brochure
- 4-5 Informed Consent 11202020
- Rights of Individuals with plain language and pictures

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

Summary of individual interviews: There are no individual interviews to be summarized.

**Summary of Stakeholder and Public Input; Department Responses**

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

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

The provider needs to provide enhanced support for career development leading to competitive integrated employment. A brochure with a brief description of various supported employment groups was provided. However, it did not explain what community integration looks like. Provider needs to describe how individuals are routinely integrated into the community and work alongside others who do not receive same services.

The provider also needs to update their Informed Consent policy because currently it is not clear if the Behavioral Specialist or Case Manager is responsible for obtaining informed consent for rights modifications.

State staff will visit the setting to verify implementation of these steps once the provider is able to fully implement its plan, after pandemic restrictions have been lifted.

**Additional Comments**

*No public comments were received regarding this setting.*