

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-017
Provider Name	Whitcomb Terrace
Setting Name	
Setting Address	0275 Castle Creek Road, Aspen, CO 81611
Compliant as of Date	4/8/21
Date of This Evaluation	6/18/2020 Updated 4/21/2021

#### **Setting Type**

<ul> <li>☑ Alternative care facility (ACF)</li> <li>☐ Group Residential Services and Supports (GRSS) group home</li> <li>☐ Individual Residential Services and Supports (IRSS) host home</li> <li>☐ Individual Residential Services and Supports (IRSS) other</li> <li>☐ Supported Living Program (SLP) facility under BI waiver</li> <li>☐ Transitional Living Program (TLP) facility under BI waiver</li> </ul>				
Waivers Served				
<ul> <li>□ Community Mental Health Services (CMHS) for Persons with Major Mental Illnesses</li> <li>☑ Elderly, Blind and Disabled (EBD)</li> <li>□ Persons with Brain Injury (BI)</li> <li>□ Persons with Developmental Disabilities (DD)</li> </ul>				
Reason(s) for Heightened Scrutiny				
<ul> <li>□ 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);</li> <li>□ Located in a building on the grounds of, or adjacent to, a public institution; or</li> <li>□ Has the effect of isolating individuals receiving Medicaid home- and community-based services (HCBS) from the broader community of individuals not receiving Medicaid HCBS</li> </ul>				

### Setting Description

The setting is an Alternative Care Facility (ACF) located on the same campus as Aspen Valley Hospital. The ACF is owned and operated by the hospital located across from the parking lot. The HCBS setting supports fewer than 30 individuals, including some funded by Medicaid.. The units have a private outside patio, which most individuals use to come and go from their home. During state staff's visit on 11/6/2017, the director informed state staff of a community senior center, not owned or operated by Whitcomb, renting space downstairs. There is a separate entrance. Whitcomb offers to pay the fee for individuals to participate at the center. Activities have included eating in the center's dining area, attending lectures and outdoor community activities, such as snowmobiling. Within the ACF, there is a dining area and individuals can pick and choose where to sit. There is a kitchenette with a microwave and refrigerator available to all individuals. Snack are available at all times.

## **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. 42 C.F.R. § 441.304(c)(4)(i).	The provider is well connected with the community. Volunteers come to the setting often to conduct activities such as foot massages and hair services. Local schools have come to conduct various programs about compassion, empathy, and dreams through the use of art. They also assist with the individuals learning and furthering computer skills. The individuals have also had the opportunity to attend the Aspen Music Festival and a performance of Spam A Lot. The setting supports people with transportation. There is also a community senior center, where individuals may choose to participate in various activities with other seniors, in the community or the center.
⊠ Yes □ Partial □ No	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).	The individuals choose whether or not they want to reside at the setting and who provides their services and supports. Individuals are informed of and given the chance to choose setting options, including those that include persons without disabilities. These options are based on the individuals' needs and preferences. The setting options are identified and documented in their personcentered service plan. An individual interviewed stated her family helped her find this setting and that she was happy with her home.
⊠ 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).	The setting does not employ the use of restraints, cameras, devices that indicate egress. The individuals can use their own communication devices and have access to computer training. They have the opportunity exercise personal choice in haircut and style, preferred clothing, and the decoration and personal items in their rooms Bathroom doors are lockable.
⊠ 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	Individuals have the ability to participate in religious or spiritual activities, ceremonies, or communities. The individuals get to choose or set their own schedule and it is not regimented by the setting. The setting offers individualized supports that enable people to choose activities or their own interest either as a group or individually. Previously, the setting did not offer a designated

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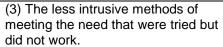
	environment, and with whom to interact.  42 CFR § 441.301(c)(4)(iv)	smoking area outside for individuals that wanted to smoke, maintaining a smoke free campus, but this has since been amended.
⊠ Yes □ Partial □ No	The setting facilitates individual choice regarding services and supports, and who provides them. 42 CFR § 441.301(c)(4)(v)	The individuals choose whether or not they want to reside at the setting and who provides their services and supports. The setting options are identified and documented in their person-centered service plan. The provider completed remediation activities and submitted documentation on 10/17/2019 stating that individuals do not have to utilize the house doctor and choose from any physician or medical professional in their community. Individuals may choose to use someone who can come in to the residence or they may arrange to choose to use someone in the community.
⊠ 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 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. 42 CFR § 441.301(c)(4)(vi)(A)	After making final revisions, based on state staff input, the provider submitted a residential agreement on 11/16/2020 which includes all required elements.
⊠ Yes □ Partial □ No	Each individual has privacy in their sleeping or living unit: (1) Units have entrance doors lockable by the individual, with only	Most individuals choose to access their individual apartments via their outside patios. The provider has submitted a work order stating the doors have been rekeyed and set up for each individual's key. An individual interviewed by state staff had her own room and furnished it with her personal items.

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	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.  42 CFR § 441.301(c)(4)(vi)(B)	
☐ Yes ⊠ Partial ☐ No	Individuals have the freedom and support to control their schedules and activities and have access to food any time.  42 CFR § 441.301(c)(4)(vi)(C)	The individuals set their own schedules. They have input and choice with respect to menu planning. The setting has a kitchenette for the people to use, complete with a refrigerator and microwave. There are no restrictions on when an individual comes and goes to access their community.
⊠ Yes □ Partial □ No	Individuals are able to have visitors of their choosing at any time. 42 CFR § 441.301(c)(4)(vi)(D)	The individuals set their own schedules. This includes being able to have visitors when they choose, including overnight and those they may be romantically involved with.
⊠ Yes □ Partial □ No	The setting is physically accessible to the individual.  42 CFR § 441.301(c)(4)(vi)(E)	The setting is fully accessible.
42 CFR § 441.301(c)(4)(vi)(F)  ⊠ Yes □ Partial □ No	Any rights modifications are supported by a specific assessed need and justified in the personcentered service plan. The following criteria are documented in the person-centered service plan:  (1) A specific and individualized assessed need.  (2) The positive interventions and supports used prior to any rights modifications.	Restrictive language was removed from the House Rules. New House Rules, attached to the Residential Agreement, allow individuals to smoke in a designated location outside. Individuals may drink alcohol and have visitors at any time, including overnight.



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- (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.
- (8) An assurance that interventions and supports will cause no harm to the individual.

42 CFR § 441.301(c)(4)(vi)(F)



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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

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:

On 11/06/2017, a site visit was completed. State staff interviewed an individual receiving Medicaid services at that time. During the interview, they said she was very happy with her services and the people who work at Whitcomb Terrace.

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

#### **Additional Comments**

There were no IFA survey respondents from this setting.