



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

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-027
Provider Name	Grand Junction Regional Center
Setting Name	
Setting Address	Street address withheld, Grand Junction, CO 81504
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 26, 2021 <i>for public comment; updated July 21, 2021 for CMS. Updates are in italicized green font.</i>

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
This setting is a group home. It was flagged for heightened scrutiny because of its potential to isolate individuals, in that the services provided do not yet ensure that individuals have the opportunity to be integrated and interact with non-disabled, non-staff persons in the community. The provider has made significant progress with revisions and updates to its policies and procedures, and staff have received training regarding person-centered thinking. State staff conducted a site visit at the home in October 2017, including a tour of the setting, a review of files, and interviews with staff, as well as with individuals, who were interviewed away from their staff for their input. A future site visit by state staff will verify that all required changes have been made, including ensuring that individuals have the opportunity to be engaged with non-disabled persons in their community, once the setting reports all issues as resolved.



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>The setting was flagged for heightened scrutiny because of its potentially isolating qualities. Initially, activities were only in the home, at a facility belonging to the provider (such as basketball at a court owned by the provider), or a walk in the neighborhood. Later, prior to the pandemic, progress was made with some community activities. However, the frequency of activities as well as time spent in the proximity of others in the community was limited, and most did not promote the opportunity to interact with persons who are not disabled and not staff. The provider submitted a Phase I and II plan to support individuals to begin to leave the home, but because of concerns relating to COVID-19, these phases still isolate individuals from others in the community. The provider will submit a plan for its next phase, to move forward with integrated activities, or as soon as possible, submit evidence of individuals being active and able to interact with persons in their community.</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>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 request 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> <p>This provider's admission policy initially did not recognize individuals' right to accept or decline services. The provider updated the policy to be person-centered and to recognize the right to choose or decline services, including the option to work with one's case manager to move to another setting without waiting for this provider to complete an assessment and decide whether and when an individual may consider a change in their provider and services.</p>
<input type="checkbox"/> Yes <input checked="" 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 provider updated most of its policies and procedures to bring them into compliance with these requirements. The grievance/complaint procedure no longer sets a time limit for someone to submit a complaint. The grievance and dispute procedures have been separated to better clarify which process to follow when, and both include external contacts of who can assist the individual or guardian, if desired. Documents reflect that any modification to rights will follow all required steps. The sample informed consent forms do not yet meet all required elements, including for the right to privacy, so the provider will submit new informed consent forms (see details below). A final policy related to access to money is forthcoming.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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>Id.</i> § 441.301(c)(4)(iv).</p>	<p>The setting is not yet in alignment with this requirement, as individuals have limited opportunity to decide with whom to interact, as well as limited choices of community-inclusive activities allowing such interaction. Interviews with individuals living in the home reflected that they relied on staff for accessing the community. State staff will verify that the provider has implemented changes to enhance choice, as detailed elsewhere in this document.</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>Id.</i> § 441.301(c)(4)(v).</p>	<p>The provider revised its admission policy to ensure choice by the individual or, if legally authorized, their guardian. Staff have received training regarding person-centered thinking.</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>Id.</i> § 441.301(c)(4)(vi)(A).</p>	<p>The provider created and revised its legally enforceable residential agreement so that it provides protections against eviction and opportunities for appeals that are at least comparable to those under the jurisdiction's landlord/tenant law.</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>Id.</i> § 441.301(c)(4)(vi)(B).</p>	<p>During the site visit in October, 2017, state staff observed that most individuals did not have a lockable bedroom door. One individual explained that they needed to knock on the front door whenever they came home, as the door was locked and the individual did not have their own key. Since that time, the setting submitted documentation reflecting that individuals have a key to their home and a bedroom door lock and key. It also reported that individuals are able to lock their bathroom door.</p> <p>The provider originally relied solely on staff to decide who would share bedrooms or have a private room. The provider submitted a new protocol, which is written in clear, plain language, to ensure individual choice and input based on first meeting any potential roommate. Under the new protocol, an individual may request a roommate change, either verbally or behaviorally, and the provider will follow up on the request.</p>



		Individuals have the freedom to furnish and decorate their bedrooms as they please. During the site visit in October, 2017, state staff noted that each bedroom was decorated based on the individual's interests. The provider has attested that bedroom doors no longer have individuals' names posted and that confidential information posted in common areas of the setting has been removed. State staff will verify these changes during a future site visit.
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	Individuals have the freedom and support to control their schedules and activities and have access to food any time. <i>Id. § 441.301(c)(4)(vi)(C).</i>	The setting is not yet in full in compliance with this requirement. The provider reports and submitted evidence that individuals have access to food in the kitchen at any time. However, additional evidence is needed to show that individuals are supported to control their schedules, including to be in the community.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	Individuals are able to have visitors of their choosing at any time. <i>Id. § 441.301(c)(4)(vi)(D).</i>	Yes, individuals are able to have visitors when they choose.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	The setting is physically accessible to the individual. <i>Id. § 441.301(c)(4)(vi)(E).</i>	Yes, the setting is physically accessible to all those who live there.
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	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. (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.	The setting is still coming into compliance with this requirement. The rights modification policy was updated to reflect the criteria outlined in this requirement. However, sample completed informed consent forms did not follow all requirements. More than one rights modification was included on one of the two forms, the narrative was not written in plain language directed to the individual, there were references to statute and other citations and quotes that were confusing to read, there was no narrative addressing how staff would mitigate the effects of a rights modification, and the state-required form was modified. The provider will submit new sample informed consent forms, implementing detailed feedback given by state staff to ensure that these changes are clear.



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	<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>Id.</i> § 441.301(c)(4)(vi)(F).</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
- Dispute Resolution Policy
- Admission/Discharge Policies
- Recent Month Calendar of Community Activities
- Pictures of snacks, drawer with scissors and knives, bedroom door locks, and house keys
- Materials on fire exit doors
- Kitchen access description
- Protocol for sharing a bedroom
- Phase I community outing plan
- Two sample completed informed consent forms
- Protocol for Sharing a Room
- Person-Centered Training Materials

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: Three individuals were interviewed by state staff during a visit to the setting in October 2017. They were happy with their staff, could use the phone to call family, and went to day program. They reported that they could ask staff for snacks. One individual reported that he was able to participate in some community activities, such as fishing, going to a park, or playing basketball at the provider's basketball court, but most activities offered were in the home.

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

As described above, state staff have verified via desk review the implementation of a number of required changes to policies and procedures and other provider documents. However, work is still in progress. Group home staff will need training to be sure they support individuals to be active and engaged in their community, with the opportunity to interact with typical persons who are not disabled or staff. Staff will work with individuals to offer activities based on interests and preferences, including exploring new opportunities such as the local recreation center, school and community events and productions, volunteer opportunities, classes or clubs, and typical community museums, gardens, and other attractions.



In addition, the provider will submit new sample completed informed consent forms, to fully reflect a person-centered approach with clear explanations for individuals to consider when reviewing the proposed rights modification with their case manager. The updated policy regarding access to funds at any time will also be submitted.

Once all final evidence of these changes has been submitted, state staff will visit the home to ensure full compliance.

Additional Comments

No public comments were received regarding this setting.