



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

*Nonresidential Setting Summary Sheet*

<b>Heightened Scrutiny Identification Number</b>	HS-030
<b>Provider Name</b>	Grand Junction Regional Center
<b>Setting Name</b>	
<b>Setting Address</b>	Street address 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 25, 2021

**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 Spinal Cord Injury (SCI)
- 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

**Setting Description**

This setting provides day habilitation services in Grand Junction. Services have primarily been isolated in the setting, with only occasional outings with little to no contact with others in the community who are not disabled and not staff. The provider has made significant progress with updates and revisions to its policies and procedures to ensure that services are person-centered, including recognizing the individual's preferences, input, and decisions regarding their services. All staff have been trained in person-centered principles, and the provider's overall leadership embraces the values of the HCBS Settings Final Rule. Final verification of compliance for the provider's services, including ensuring that all individuals have the opportunity to be active in the community, will be completed via a state staff visit.



**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>Currently, this provider has not demonstrated community integration. A September 2020 calendar reflected that most activities were site-based services, including working on puzzles, baking, crafting, and decorating the setting. Individuals only had the opportunity to be in the community for a car ride, a walk in the neighborhood, and walks to a park. These activities provided little if any engagement with others in the community. The activities are also an exact duplication of another small setting operated by this provider. The provider has submitted and is able to implement its Phase I plan, which ensures that individuals are able to start leaving the setting again, as COVID-19 restrictions are loosening. The provider will need to submit either a plan or actual evidence reflecting how individuals will be or are now supported to engage in community integrated activities, which include interaction with non-disabled, non-staff persons.</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"> <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> <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 revised the grievance policy and dispute policy to ensure that individuals understand the two unique processes and how to follow them if needed. For the grievance/complaint procedure, individuals and others are now able to submit a complaint at any time, rather than within only fourteen days of their concern. External contacts have been added to each procedure, making sure individuals can request assistance when desired. Policies and procedures also reflect that restraints will not be used unless all required processes are followed, including obtaining informed consent for individuals who are anticipated to sometimes need physical holds. The provider will submit a sample informed consent form, related to the potential use of a restraint, to ensure the process outlined in the policy is followed.</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>Individuals do not yet have the opportunity to choose community integrated activities and engage with the greater community. The activities offered are determined by staff and are the exact same as another setting, so do not recognize individual's autonomy and interests.</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>Individuals are able to choose who provides their services and supports.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	<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</p>	<p>This is a nonresidential site, so this requirement does not apply.</p>



	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).	
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	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).	This a nonresidential site, so this requirement does not apply.
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" type="checkbox"/> 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).	Individuals in this setting all participate in the exact same activities, which are determined by their staff and are all the exact same as those at another setting operated by the provider. This setting is small, but the provider will need to increase choice of both site-based and community-based activities. Activities will need to not only ensure some ability to choose, based on interests, but be unique to individuals in this setting. State staff will visit the setting, to verify full compliance once the provider implements these changes.
<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.</i> § 441.301(c)(4)(vi)(D).	The provider attested that individuals are able to have visitors at any time. This will be reviewed at the time of state staff's future visit.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	The setting is physically accessible to the individual. <i>Id.</i> § 441.301(c)(4)(vi)(E).	Yes, the site is fully accessible to all individuals.
<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 provider updated its policy for rights modifications, as well as its handout for individuals and guardians regarding rights. Sample informed consent forms, completed pursuant to required steps and including plain language narrative, will be submitted by the provider as a means to verify that the provider is following its updated policies.



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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
- Dispute Resolution Policy
- Recent Month Calendar of Community Activities
- Admissions Policy
- Materials Relating to Staff Training on Person-Centered Thinking
- Pictorial Rights of Persons Receiving Services

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 as this site has not yet been visited.

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 setting needs to make these specific changes:

- Submit a plan for, or evidence of individuals engaged in, community activities, which include the opportunity to interact with non-disabled, non-staff persons.
- Train managers and staff regarding the shift from services being staff directed and site-based to support individuals with their interests and preferences, including exploring community activities with typical persons in the community.
- Ensure staff do not wear their name tags when in the community.
- Submit completed informed consent forms, with PHI removed, reflecting that individuals have clear information about a proposed rights modification.

State staff will visit the setting to verify implementation of these final changes, including community integration, once the provider is able to implement the plan, after pandemic restrictions have been lifted.

**Additional Comments**