# Colorado Home- and Community-Based Services  
## Heightened Scrutiny Evaluation  
### Nonresidential Setting Summary Sheet

<table>
<thead>
<tr>
<th>Heightened Scrutiny Identification Number</th>
<th>HS-038</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provider Name</strong></td>
<td>Parkview Medical Center</td>
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<tr>
<td><strong>Setting Name</strong></td>
<td>WITHHELD</td>
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<tr>
<td><strong>Compliant as of Date</strong></td>
<td>Expected to submit remaining evidence of compliance this summer, to be verified by December 31, 2021</td>
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<tr>
<td><strong>Date of This Evaluation</strong></td>
<td>May 11, 2021 <em>for public comment; updated July 28, 2021 for CMS. Updates are in italicized green font.</em></td>
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</tbody>
</table>

### 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
- [X] Day Habilitation for Individuals with IDD Specialized Habilitation
- [ ] Day Habilitation for Individuals with IDD Supported Community Connections (SCC)
- [ ] 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)
- [X] Persons with Developmental Disabilities (DD)
- [ ] Persons with Spinal Cord Injury (SCI)
- [ ] 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
- [X] 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

Parkview Medical Center is a Day Habilitation setting that currently offers Specialized Habilitation services for individuals with intellectual and development disabilities. The setting is identified as Heightened Scrutiny due to the effect of isolating individuals receiving services from the broader community. The provider staff created a Community Integration (CI) plan and plans on implementing the CI plan once current pandemic-related restrictions have been lifted.
### Compliance Summary

<table>
<thead>
<tr>
<th>Compliant?</th>
<th>Federal Requirement</th>
<th>Summary of Evidence of Compliance</th>
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<tbody>
<tr>
<td>☒ No</td>
<td>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 CFR 441.304(c)(4)(i)</td>
<td>During the site visit, state staff observed that the setting does not provide access to individuals receiving Medicaid HCBS to the greater community. Individuals had limited contact with non-paid, non-disabled people, and they did not have the opportunity to leave the site to engage with people outside the setting. The setting only offered on-site group therapy and did not provide transportation for individuals to participate in community integrated activities within the broader community. The setting did not organize or facilitate access to the broader community. Participation in any community event, outside of the setting, was considered to be something individuals would do apart from services. The setting did not provide support for individuals to participate in community events. The provider submitted calendars as evidence of how they met this requirement. However, the calendars did not adequately show that individuals had opportunities to seek employment and work in the community or to engage in community life off-site. A community integration plan was requested. The provider submitted a community integration plan to explain in detail how the setting plans to come into compliance with this requirement of the HCBS Settings Final Rule. Highlights include that individuals will access the greater community by:</td>
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<td>• The setting will interview all individuals at the time of enrollment and on an ongoing basis to gather information on each individual’s interests and preferences;</td>
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<td>• Provider staff will be trained on the new expectations of community integration, including monthly monitoring of planned community activities and ongoing surveying of the individuals receiving services; and,</td>
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<td>• The provider will begin providing transportation from the setting to the broader community, once COVID-19 related restrictions have been lifted.</td>
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<td>• The CI plan provided examples of what community activities may look like, such as going to libraries, museums, and entertainment venues – and frequenting stores and restaurants</td>
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Final verification that the community integration plan has been implemented, and integration achieved, will be determined during a future site visit by state staff.

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<tr>
<th>☑ Yes</th>
<th>☐ Partial</th>
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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. 42 CFR § 441.301(c)(4)(ii)

During the initial site visit, state staff observed that individuals had choice among service providers. The setting ensures it has documentation that individuals have been given a choice of setting options, and that these options are documented in each individual’s person-centered service plan.

In Colorado, case management agencies are responsible for:

- 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.

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.

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.

The setting ensures an individual’s rights of privacy, dignity, respect, and freedom from coercion and restraint. 42 CFR § 441.301(c)(4)(iii)

The setting completed a remediation plan to update policies and procedures to be in compliance with the HCBS Settings Final Rule. In addition, the setting submitted evidence that staff have been trained in person-centered thinking principles.
| Yes | Partial | No | Not Applicable | 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. 

42 CFR § 441.301(c)(4)(iv) | During the initial site visit state staff observed that there were no areas considered to be off limits for the individuals. Individuals are able to decide what days they would like to participate in services. The provider does not have a policy or procedure that prohibits the use of cell phones. |
| Yes | Partial | No | Not Applicable | The setting facilitates individual choice regarding services and supports, and who provides them. 

42 CFR § 441.301(c)(4)(v) | The setting ensures services and supports are person-centered. |
| Yes | Partial | No | 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 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) | Since this is a nonresidential site, this requirement does not apply. |
| Yes | Partial | No | 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. | Since this is a nonresidential site, parts of this requirement do not apply. The setting installed a secured storage area for individuals to keep their belongings safe. |
(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)

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**During the initial site visit, state staff observed that individuals were able to have their snacks when desired, and that individuals could not self-administer medication. The provider completed a remediation plan to allow for individuals to be able to self-administer medications.**

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)

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**The setting allows for visitors.**

Individuals are able to have visitors of their choosing at any time.  
42 CFR § 441.301(c)(4)(vi)(D)

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The setting is physically accessible to the individual.  
42 CFR § 441.301(c)(4)(vi)(E)

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**During initial site visit, state staff observed that the setting is physically accessible with no common areas off-limits to individuals. In addition, the setting installed secured storage for individuals to safely store their personal belongings.**

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.
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

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The provider has a procedure and will ensure any proposed rights modifications are supported by a specific assessed need and justified in the person-centered service plan, including the need for informed consent from the individual. The provider will use the state-approved informed consent template in the event a rights modification is being proposed. The provider completed a remediation plan to ensure all staff have been trained in person-centered thinking principles.
| 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©(4)(vi)(F)
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. Since the initial site visit from 2018, the provider submitted updates to its Provider Transition Plan (PTP) including revised documents and additional evidence. The update process has been an iterative process. The State staff will continue to work with the provider to ensure that the PTP accurately identifies remaining compliance issues and the provider’s resolution of all issues.

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
- Informed Choice Policy
- Emergency Control Policy
- Evidence of Person-Centered Training and Curriculum
- Community Integration Plan
- Photograph of secured storage area

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

A site visit was completed by state staff on 1/10/2018. During the site visit, state staff observed the setting, spoke with the provider staff, and spoke with individuals outside the presence of provider staff to learn about their daily experience at the setting. State staff reviewed the setting’s policies and procedures, and other documents.

A number of compliance issues were identified and a remediation plan was discussed during the site visit. The setting has installed secured storage areas to ensure that individuals may safely store their personal belongings while participating in HCBS Medicaid services. The provider submitted evidence that all staff have been trained in Person-Centered Thinking principles. The setting is physically accessible with no common areas off limits to individuals. The setting updated policies and procedures to be compliant with the HCBS Settings Final Rule. Furthermore, the provider will submit evidence that the setting ensures opportunities for community integration for each individual receiving HCBS waiver services, once they are able to implement their plan. Final verification of setting’s complete compliance with the HCBS Settings Final Rule will be determined during a future site visit.

Summary of individual interviews:

Interviews were conducted on 1/10/2018. Individuals reported they understood who they could contact if they had a grievance or complaint. Interviews also reflected that the setting did not have any areas considered to be “off-limits”. Individuals reported enjoying coming to the setting for services and were aware of having choice in services providers. Interviews did not result in concerns about individual rights.
### Summary of Stakeholder and Public Input; Department Responses

The Individuals, Families and Advocates (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 has been tasked with the following remediation steps to meet requirements:

- Update rules, policies, procedures, or practices to align with federal and state requirements on community integration. (This has partially been achieved through recent efforts.)
- The setting must submit evidence that its community integration Plan has been implemented, and that its implementation meets requirements of community integration as set forth by the HCBS Settings Final Rule.

### Additional Comments

*No public comments were received regarding this setting.*