



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

Non-Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-051
Provider Name	Strive
Setting Name	Retirement
Setting Address	Withheld, Grand Junction CO 81501
Compliant as of Date	Expected to submit remaining evidence of compliance this summer, to be verified by December 31, 2021
Date of This Evaluation	April 29, 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

Setting Description
Strive Retirement provides Day Habilitation services to a small group of individuals with Intellectual or Developmental Disabilities. The setting has been flagged for heightened scrutiny because the setting has the effect of isolating people receiving services from the broader community of individuals not receiving services. Based on observation during a state visit, the setting did not have any organized activities going on at the base-site. Individuals were self-initiating their own activities of stringing beads, coloring in children's coloring books, sitting outside in a fenced in yard, and some individuals were sleeping in lounge chairs. Staff had set up a table for an individual with plastic farm animals and a barn



for him, once he arrived to the program. There was no current schedule for planned engaging age-appropriate activities at the site or in the community. The director described this program as a setting for retirees to come and hang out.



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 provider submitted a calendar with a schedule that was identical for every day of the week. There were no planned community integrated activities on the calendar, other than a list of possible options. The provider will create a community integration plan to offer individuals the opportunity to be engaged with non-disabled, non-staff 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. 42 C.F.R. § 441.301(c)(4)(ii).</p>	<p>All individuals have their setting options documented in their annual service plan.</p>
<input checked="" type="checkbox"/> Yes <input 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. 42 CFR § 441.301(c)(4)(iii).</p>	<p>The provider ensures individual's rights, dignity, and privacy are supported. However, there was a noticeable lack of staff interaction with individuals during the state's observation.</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.</p>	<p>The daily activity calendar appears to be regimented with the same schedule every day. The daily plan was for 8 am transportation, 9 am meeting, 10 am snack, 10:30 am crafts, 11:30am lunch, 12:30 pm crafts, 1:30 pm clean up, and 2pm transition. The only choice of activity were non-specific "crafts". The provider will need to create a meaningful calendar, including engaging activities in the community, as well as the facility.</p>



	<i>42 CFR § 441.301(c)(4)(iv)</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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>	Many of the activities observed were not age appropriate and geared more toward preschool activities, such as finger painting, stringing large beads, coloring in children’s coloring books and nap time. This will be addressed in their plan for increased opportunity for age-appropriate activity options at the facility and in the community.
<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 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>	The setting is nonresidential, and therefore this requirement is not applicable.
<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.	The setting is nonresidential, and therefore this requirement is not applicable.



	(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>	
<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>42 CFR § 441.301(c)(4)(vi)(C)</i>	Individuals do not yet have the freedom to support or control their own schedules. The calendar includes specific times for each scheduled item including: transportation, meetings, snacks, crafts, lunch, finishing crafts, cleaning up and transition every day of the week. The provider will include choices, when they submit and implement a plan for engaging community and site-based activities.
<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>42 CFR § 441.301(c)(4)(vi)(D)</i>	The setting reviewed and modified their current staff trainings to allow participants in the program to be able to socialize with whomever they choose.
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	The setting is physically accessible to the individual. <i>42 CFR § 441.301(c)(4)(vi)(E)</i>	The setting is physically accessible to all individuals.
<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input checked="" 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	The Informed Consent policy uploaded does not as yet give consistent or accurate information as to who is responsible for obtaining informed consent. The content of the informed consent, stated in the policy, does not describe how they will ensure there is an assessed need, positive intervention attempted or considered, a less intrusive method of support already tried, a clear description of the rights modification, or a plan to collect data. The provider will revise and submit a revised Informed Consent policy with accurate information for the rights modification process, including completion of all required content of the informed consent, and who meets with individuals to obtain the informed consent.



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	<p>proportionate to the specific assessed need.</p> <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>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
- Informed Consent
- Rights of Individuals Receiving Services
- Specialized Habilitation Brochure

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

Summary of individual interviews: One interview was partially completed. The individual had a difficult time understanding the questions and giving a response. He was also very distracted by another individual exhibiting verbal aggression.

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.

No public comments were received regarding this setting.

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

The provider needs to create more age-appropriate activities. A brochure was uploaded but it did not provide any information as to the specific choices that are also age appropriate. The provider needs to upload their plan that explains how choices and options of age-appropriate engaging activities, both at the facility and in the community, will be offered to the individuals at this setting.

Additional Comments

A visit to this site was initially completed on 4/25/2017. A second visit was completed 10/01/2019 in which many of the same issues were present, such as a lack of activities and interaction between staff and individuals. The provider has updated their Client’s Rights handout with positive language, and ensured it was given to individuals and guardians. These rights are also posted at the site. The grievance and dispute policies have been revised to include external numbers and entities which individuals and guardians can contact, should they want assistance.



Once the provider has submitted all required updates and implements their plan to ensure individuals have the opportunity to be engaged in community activities, state staff will conduct another visit.