

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

Nonresidential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-053
Provider Name	Ariel Clinical Services
Setting Name	Ariel Lawn and Yard Crew
Setting Address	Street address withheld, Grand Junction, CO
Compliant as of Date	March 14, 2023
Date of This Evaluation	March 22, 2023 for public comment; updated May 31, 2023 for CMS. Updates are in italicized green font.

## 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)

 $\Box$  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 group supported employment in Grand Junction. It was identified for heightened scrutiny because of its original potential to isolate HCBS participants from others. The tasks include routine lawn and garden care, as well as specialty yard clean-up projects. During certain months, the crew partners with a candy company to do seasonal work packaging products. The crew is no longer isolating, as it includes a mix of disabled and non-disabled workers. State staff completed a verification site visit on March 14, 2023. Personnel



files for both disabled and non-disabled workers were reviewed. These revealed that all members of the crew had equitable documents and similar hiring practices. Client files were also reviewed, and state staff determined that rights modifications were appropriately documented. The provider explained about its efforts to reduce or eliminate rights modifications and stated it was aware this is the goal for any rights modification. State staff observed the work crew on-site. All crew members wore similar attire. No one wore a badge or clothing to distinguish one role from another. All crew members were observed to work equally on the same tasks.



# Compliance Summary

Compliant?	Federal Requirement	Summary of Evidence of Compliance
⊠ Yes	The setting is integrated in and	Historically, services were isolated, with
□ Partial	supports full access of individuals	minimal contact with others who are not
	receiving Medicaid HCBS to the	disabled and not staff. While there is still
	greater community, including	minimal interaction with customers or the
	opportunities to seek employment	public, the agency hired a non-disabled person
	and work in competitive integrated	to work on the crew. The non-disabled crew
	settings, engage in community life,	member works every day the crew is open, with
	control personal resources, and	one to three HCBS participants also working on
	receive services in the community,	any given day. All crew members are
	to the same degree of access as individuals not receiving Medicaid	supervised by the same crew leader and follow the same set of employment rules.
	HCBS.	the same set of employment fules.
	42 C.F.R. § 441.304(c)(4)(i).	
⊠ Yes	The setting is selected by the	In Colorado, case management agencies are
□ Partial	individual from among setting	responsible for
	options including non-disability	<ul> <li>working with the individual to ensure</li> </ul>
	specific settings and an option for a	that the setting is selected by the
	private unit in a residential setting.	individual from among setting options
	The setting options are identified	including non-disability-specific settings
	and documented in the person-	and, where residential supports will be
	centered service plan and are based on the individual's needs,	provided, an option for a private unit in a residential setting;
	preferences, and for residential	<ul> <li>ensuring that setting options are</li> </ul>
	settings, resources available for	identified and documented in the
	room and board.	person-centered support plan and are
	<i>Id.</i> § 441.301(c)(4)(ii).	based on the individual's needs,
		preferences, and for residential settings,
		resources available for room and board;
		and
		<ul> <li>supplying the person-centered support</li> </ul>
		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 port of the site and site would a the more
		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.



Compliant?	Federal Requirement	Summary of Evidence of Compliance
⊠ Yes	The setting ensures an individual's	Individuals' rights of privacy, dignity, respect,
□ Partial	rights of privacy, dignity, respect,	and freedom from coercion and restraint are
	and freedom from coercion and	protected. The provider created plain-language
	restraint.	handouts to ensure that individuals understand
	<i>Id.</i> § 441.301(c)(4)(iii).	how to file a complaint or dispute if needed.
		External contacts have been added to each
		procedure, ensuring individuals can request assistance if needed.
⊠ Yes	The setting optimizes, but does not	One individual had appropriately documented
□ Partial	regiment, individual initiative,	rights modifications in this area. Staff explained
	autonomy, and independence in	their efforts to reduce or eliminate rights
	making life choices, including but	modifications, noting that the agency is aware
	not limited to, daily activities,	that this is the goal for any rights modification.
	physical environment, and with	All other individuals were independent in this
	whom to interact.	area.
⊠ Yes	Id. § 441.301(c)(4)(iv) The setting facilitates individual	The provider facilitates individual choice
□ Partial	choice regarding services and	regarding services and supports and who
	supports, and who provides them.	provides them. The choice of setting is
□ No	<i>Id.</i> § 441.301(c)(4)(v).	documented in individual person-centered
		plans.
□ Yes	The unit or dwelling is a specific	This is a nonresidential site, so this requirement
Partial	physical place that can be owned,	does not apply.
🗆 No	rented, or occupied under a legally	
☑ Not Applicable	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).	



# COLORADO

Department of Health Care Policy & Financing

Compliant?	Federal Requirement	Summary of Evidence of Compliance
	Each individual has privacy in their	This is a nonresidential site, so this requirement
Partial	sleeping or living unit:	does not apply.
□ No	(1) Units have entrance doors	
⊠ Not Applicable	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).	
	Individuals have the freedom and	Individuals in this setting are allowed to choose
⊠ Yes	support to control their schedules	their work schedules and access their food at
Partial	and activities and have access to	any time.
	food any time.	,
	<i>Id.</i> § 441.301(c)(4)(vi)(C).	
⊠ Yes	Individuals are able to have visitors	The provider attested that individuals are able
Partial	of their choosing at any time.	to have visitors at any time, as would be
□ No	<i>Id.</i> § 441.301(c)(4)(vi)(D).	applicable in any employment setting.
	The setting is physically accessible	The nature of this landscaping work requires
⊠ Yes	to the individual.	certain physical abilities consistent with any
Partial	<i>Id.</i> § 441.301(c)(4)(vi)(E).	other competitive landscaping job. The
□ No		requirements are consistent across disabled
		and non-disabled workers.
	Any rights modifications are	The provider appropriately updated its policy for
	supported by a specific assessed	rights modifications, as well as its handout for
	need and justified in the person-	individuals and guardians regarding rights.
	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	
⊠ Yes	supports used prior to any rights	
	modifications.	
□ Partial	(3) The less intrusive methods of	
□ No	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.	
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# COLORADO

Department of Health Care Policy & Financing

Compliant?	Federal Requirement	Summary of Evidence of Compliance
	(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.	
	<i>Id.</i> § 441.301(c)(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. 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 Modifications Policy
- Grievance/Complaint and Dispute Handouts
- Resource Page for Assistance
- Medication Policy
- Mistreatment Policy
- Physical Intervention Policy
- Incident Reporting Policy
- Recent Month Calendar of Community Work
- Crew Program Profile
- 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: The individual interviewed during the on-site state verification visit reported high satisfaction with his job and crewmates. He expressed that he had the ability to choose how many days a week he worked and could make adjustments to his schedule as needed. He indicated a good relationship with his crewmates and supervisor and felt respected as a hardworking employee. The individual did not indicate any concerns or want to make any changes to his services.

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

All remediation steps have been completed.

#### Summary of Stakeholder and Public Input; Department Responses

The Individual/Family/Advocate (IFA) Survey results were reviewed, and no comments were submitted for this setting.

## **Additional Comments**

No public comments were received regarding this setting.