



COLORADO

Department of Health Care
Policy & Financing

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

Adult Residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-057
Provider Name	Kraft Home Inc.
Setting Name	Kraft Home
Setting Address	8154 Downing Dr., Denver, CO 80229
Compliant as of Date	March 13, 2023
Date of This Evaluation	March 15, 2023 <i>for public comment; updated May 31, 2023 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
The setting is an assisted living facility in a residential neighborhood. The setting was initially identified as meeting criteria for heightened scrutiny because of the lack of opportunities for individuals to be integrated and interact with non-disabled, non-staff persons in the community. During a site visit by state staff in October 2017, it was observed that the setting did not offer community activities or support individuals with local transportation options. This issue, along with other identified changes needed, was resolved by the provider. A site verification re-visit in February 2023 confirmed that the setting ensured individuals had the opportunity to be active in their community.

Compliance Summary

Compliant?	Federal Requirement	Summary of Evidence of Compliance
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input 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>This setting was previously identified as subject to the institutional presumption because it had the effect of isolating individuals receiving Medicaid home- and community-based services from the broader community. Based on the state staff verification visit on February 21, 2023, as well as desk review, the setting has overcome this presumption. The calendar submitted on December 8, 2022 included a number of community inclusive activities. There were various activities available to individuals to be supported in attending. Public transportation is available to the individuals, in addition to personal transportation from the owner/administrator. The state staff onsite verification visit that occurred on February 21, 2023 also revealed a number of community activities that were occurring on an individualized basis. The individuals in the home reported that the staff support them in accessing public transportation. They also stated that they are able to let the owner/administrator know of activities they would like to attend and she will personally transport them. State staff advised the provider to document individual community inclusive activities, in addition to the activities that the facility makes residents aware of.</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.

Compliant?	Federal Requirement	Summary of Evidence of Compliance
		<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, state staff verified that person-specific support plans were available for each individual and included choice of setting.</p> <p>Individuals are not told that they must reside at or receive services from this setting. They have been informed and given the chance to choose among setting options, including non-disability-specific settings. These options are identified and documented in the person-centered 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. <i>Id.</i> § 441.301(c)(4)(iii).</p>	<p>Provider policies and procedures align with federal and state requirements on rights of privacy, dignity, respect, and freedom from coercion and restraint. The provider revised all policies and procedures that were found to be out of compliance, including creating a plain-language version of individual rights and updating the grievance policy to include external contracts. Locks were installed on bathroom doors to ensure privacy. The setting ensures that individuals are free from physical, chemical, and mechanical restraints. Individuals have an area where private phone calls can be made.</p>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input 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 are supported to choose the setting they reside in, who provides services to them, and making informed decisions. Individuals in the setting determine their daily activities and set their own schedule. Individuals are free to come and go at will. There are no scheduled times that individuals need to be in the setting, as all individuals have a key to their home. Individuals are able to exercise personal choice in all aspects of their lives.</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>All individuals have an annual service plan documenting choice of services and supports as well as who provides them.</p>

Compliant?	Federal Requirement	Summary of Evidence of Compliance
<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.</p> <p><i>Id.</i> § 441.301(c)(4)(vi)(A).</p>	<p>The provider modified the residential agreement to ensure that it is a legally enforceable agreement and provides appropriate protection from eviction and appeals.</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:</p> <p>(1) Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.</p> <p>(2) Individuals sharing units have a choice of roommates in that setting.</p> <p>(3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</p> <p><i>Id.</i> § 441.301(c)(4)(vi)(B).</p>	<p>Individuals have privacy in their sleeping unit, with lockable doors. Staff have been trained to only enter bedrooms with permission, except in emergency situations. Additionally, bathroom doors are lockable by individuals. Individuals have their own bedroom and freedom to decorate their rooms as they choose.</p>

Compliant?	Federal Requirement	Summary of Evidence of Compliance
<input checked="" type="checkbox"/> Yes <input 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.</i> § 441.301(c)(4)(vi)(C).	All individuals living in the setting have access to all common areas of the home. Remedial action was completed by the provider to ensure individuals have access to the kitchen at all times. Individuals are supported to self-administer medications, if they so choose and have been accessed as safely able to do so. They are also supported to manage their own money and practice their preferred religion. Individuals have independent access to food/snacks in the kitchen and are encouraged to provide input for meal planning and snacks offered.
<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).	Individuals can have visitors at any time and socialize with whomever they please, including the choice to be involved in romantic relationships. Individuals can use their own communication devices to make and receive private phone calls and to send or receive private emails and texts at the times 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.</i> § 441.301(c)(4)(vi)(E).	State staff determined during site visits that the setting is physically accessible to individuals.
<input checked="" type="checkbox"/> Yes <input 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 has ensured that any proposed rights modifications are supported by a specific assessed need. A remediation plan was completed to ensure there are no broad rights restrictions within the provider policies and procedures. The provider has ensured that all staff have been trained in person-centered thinking.

Compliant?	Federal Requirement	Summary of Evidence of Compliance
	<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>	

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:

- Grievance/Complaint Policy
- Medication Policy
- Mistreatment Policy
- Physical Intervention Policy
- Incident Reporting Policy
- Money Management Policy
- Lease/Residency Agreement
- Admission/Discharge Policies
- House Rules
- Recent Month Calendar of Community Activities

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: A resident interview on February 21, 2023, during an onsite visit by state staff, indicated that the residents of the home have the opportunity to come and go from their home. The resident stated that while he chose not to participate in the activities on the community calendar, he finds his own activities and is assisted with transportation by the Kraft Home staff. He has friends outside of the home, volunteers in the community, and enjoys going out for coffee. He confirmed that he has a room key and a key to the home. He also confirmed that he is able to access all common areas of the home, including the kitchen.

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.

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

State staff have verified that the provider has completed remediation for this setting.

Additional Comments

No public comments were received regarding this setting.