

Summary of CMS Home and Community Based Services (HCBS) Settings Rule Site Visit

Location	Bismarck
Type	Agency Foster Home for Adults
Name	S-6 Senior Services, LLC DBA Home Instead ®
Visit Date	
State Staff	Kathryn Good, Program Administrator; Erica Reiner, Program Administrator; Heather Lindsley, Program Administrator
Specialized Services	Residential Habilitation and Community Supports
License	Agency Foster Home for Adults Licensing Policy 670-05-20
Capacity	
Medicaid Consumers	
Education Provided	Information and education regarding the Home and Community Based Services Settings requirements published in the Federal Register on January 16, 2014, was emailed to the AFHA owner. An assessment tool was developed by the state that was based on the settings criteria and the exploratory questions provided by CMS. State staff utilized North Dakota Century Code Chapter 75-03.21.1 Licensing of Agency Foster Home for Adults, and Chapter 75-03-23 Provisions of Home and Community Based Services Under the Service Payments for Elderly and Disabled Program and the Medicaid Waiver for the Aged and Disabled Program, and Agency Foster Home Licensing Policy Chapter 670-05 as resources to provide education.
Technical Assistance	The State provided technical assistance upon request and the provider submitted an evidence package for the State to review prior to onsite visit. The evidence package was used by the State to prove compliance with setting requirements. The assessment tool was completed onsite, and the State then held a Settings Review Committee meeting to provide a written summary of suggestions and areas that needed change to come into compliance.
Settings Experience Interviews	Thirty days after the first Medicaid consumer admission a Settings Experience Review will be completed by the State. Survey questions focused on the quality of the individual's experiences, integration into the broader community, options for choice in where to live, ensuring the individuals rights of privacy, dignity, and respect, freedom from coercion and restraint, ensuring the individual has initiative, autonomy, and independence in making choices to include but not limited to activities, cares, and services along with who provides them.

HCBS Settings Requirements	Review of Facility
<p>Facility is selected by the individual from among settings options including non-disability specific settings and an option for a private unit in a residential setting.</p>	<p>The home is open for tours prior to a decision to reside in the home. There are other options for residential services in the area to choose from.</p> <p>The home is ADA accessible.</p> <p>A legally enforceable agreement following ND landlord tenant laws.</p> <p>There are no cameras inside of the home. There is a ring camera present at the front door.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Lease Agreement • Site Visit and Observation by state staff summary
<p>Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.</p>	<p>Individuals can continue employment or volunteering based on their person-centered goals.</p> <p>The consumer, power of attorney, or family control finances and keep their funds in their own possession.</p> <p>S-6 Senior Services will aid with money management if requested.</p> <p>Engaging in community life is addressed below.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Client Rights Policy
<p>Is integrated in and supports access to the greater community</p>	<p>There is a calendar in the dining room to inform consumer and family of activities within the facility or community.</p> <p>Per Resident Handbook, the family/natural supports are encouraged to take the consumer out into the broader community.</p> <p>The individual is able to utilize the internet, phone, or newspaper to determine activities outside the home.</p> <p>Public Transportation is available, and staff will assist with coordination. S-6 Senior Services does have a van that may also be used for transportation but needs to be scheduled.</p> <p>A social history form is filled out at admission to determine the likes and dislikes of the consumer and to develop an Individual Program Plan (IPP) for everyone.</p> <p>Everyone accesses the home in the same way.</p> <p>During the night, individuals may ring the front doorbell at any time, and staff will assist them.</p> <p>Individuals have access to the backyard of the home.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Individual Program Plan (IPP) • Site Visit and Observation by state staff

Optimizes individual initiative, autonomy, and independence in making life choices

There are no visiting hours and guests can stay overnight. There is a voluntary check in and out process to ensure safety and accountability in an emergency or fire.

The Client Rights Policy

• **Right to dignity and respect:**

o Clients shall be treated with dignity and respect, regardless of their background or needs.

• **Right to privacy:**

o Clients have the right to privacy in their personal affairs, including personal space, correspondence, and medical information.

• **Right to freedom from abuse and neglect:**

o Clients have the right to be free from physical, emotional, or sexual abuse, neglect, and exploitation. Reports of any such incidents will be taken seriously and investigated promptly.

• **Right to make choices:**

o Clients have the right to make choices about their daily lives, including activities, meals, and personal care, in accordance with their individual care plans.

• **Right to participate in care planning:**

o Clients have the right to participate in the development and implementation of their individual care plans, including the right to refuse treatment.

• **Right to access information:**

o Clients have the right to access information regarding their care, treatment, and services, as well as their rights under state and federal law.

• **Right to voice concerns:**

o Clients have the right to express concerns or grievances about their care without fear of retaliation. A formal complaint process is in place to address these issues.

• **Right to confidentiality:**

o Clients have the right to confidentiality concerning their personal health information and any records kept by the facility.

• **Right to access advocacy services:**

o Clients have the right to access advocacy services and to have support in exercising their rights.

• **Right to visitors:**

o Clients have the right to receive visitors at reasonable times, in accordance with their preferences and privacy considerations.

• **Right to cultural and religious beliefs:**

o Clients have the right to practice their cultural and religious beliefs and to have access to related resources.

• **Right to personal property:**

o Clients have the right to retain and use their personal belongings, provided they do not interfere with the rights and

The kitchen is open to anyone. There are no locked areas in the kitchen. The menu is available, and the cook ensures consumer involvement with meal planning. Individuals can request another option if they do not like the scheduled meal.

Individuals have access to the kitchen at any time for snacks. There are no more than 14 hours between supper and breakfast meals.

	<p>The laundry room is available for consumers to do their laundry with a table provided to fold clothes. There are no locked areas in the laundry room.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Site Visit and Observation by state staff
Ensures an individual's rights of privacy, respect, and freedom from coercion and restraint	<p>Individuals are permitted to lock their bedroom doors using facility-supplied locks to ensure their privacy and protect personal belongings. They have the right to refuse access to their rooms by staff members. Such refusal will not be considered neglectful or inappropriate on the part of the staff, provided that all reasonable efforts have been made to ensure client safety and well-being.</p> <p>Couples are not required to share a room.</p> <p>Individuals are able to furnish and decorate their unit as desired. Observation reflected the individual's own personal tastes in decorating their private living quarters.</p> <p>Several areas were available to provide private visiting areas. There is a great room available on each floor.</p> <p>There is a cell phone dedicated for consumer use so that residents can receive or make private phone calls. Staff can assist residents in making phone calls when they are requested.</p> <p>Mail is hand delivered to the resident.</p> <p>Staff training includes Resident Rights and topics of dignity and respect.</p> <p>The resident handbook reflects care and medications are given in private. Medications are stored in an unlocked cupboard. Each consumer has their own medication box with a lock that staff and consumer will have the lock code.</p> <p>The agency reports they will lock the medication room in the home.</p> <p>Staff will be trained to knock before entering consumers rooms.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Grievance policy is included in the Admission Packet. • Client Confidentiality Policy • Site Visit and Observation by state staff

<p>Facilitates individual choice regarding services and supports and who provides them</p>	<p>The consumer has a choice in who cares for them.</p> <p>The agency provides the consumer information regarding filing a grievance. There is a "drop box" in the home so you are able to file anonymously.</p> <p>Individuals go out to the community for church and beautician services.</p> <p>Individual's medical care is provided per own preference.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook (Includes list of services outside of facility) • Resident Rights Booklet • Grievance policy is included in the Admission Packet. • Site Visit and Observation by state employees
<p>Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS</p>	<p>All individuals are able to eat in place of their choosing.</p> <p>The consumer can access the broader community for services if desired.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Resident Rights Booklet • Site Visit and Observation by state staff • Survey with consumer and legal representative
<p>Person-centered service plan</p>	<p>Home Instead develops Individual Program Plans to include behaviors, restrictions, and methods that have been tried before. Clients' goals, values, beliefs, and how the client would like to live are reviewed and goals established.</p> <p>Community Integration and social supports are reviewed to determine options available for the client. Level of family support and involvement is reviewed. Care planning includes health care needs, nutrition needs, and mental health needs. Employment, volunteering options, behavior, cognitive, and safety are reviewed at the quarterly meetings.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Individual Program Plan Policy review

Additional Requirement for HCBS Residential Settings—Any modifications to these must be supported by a specific assessed need and justified in the person-centered service plan.

The individual has a lease or other legally enforceable agreement providing similar protections	<p>The consumer or legal decision maker signs a lease agreement when the decision has been made to move into the facility. The lease follows ND landlord tenant laws.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Lease Agreement
The individual has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate unit	<p>At the site visit it was observed the units are private with lockable doors. Each individual will have a private room.</p> <p>Individuals are encouraged to decorate their apartment to reflect personal taste, hobbies, and interest.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Lease Agreement • Site Visit and Observation by state staff • Survey with consumer and legal decision maker • Pictures on file
The individual controls his/her own schedule including access to food at all times	<p>Work together to plan meals with the consumer's living in the home.</p> <p>Food is available at any time.</p> <p>Alternative meal choices available.</p>
The individual can have visitors at any time	<p>Overnight guests allowed and there are no designated visiting hours.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Survey with consumer and legal decision maker
The setting is physically accessible	<p>The setting is in a residential area of Bismarck.</p> <p>The setting is ADA accessible.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Site Visit and Observation by state employees • Pictures on file

HCBS Setting Requirements establish an outcome-oriented definition that focuses on the nature and quality of individuals experiences. The requirements maximize opportunities for individuals to have access to the benefits of community living and to receive services in the most integrated setting.

N/A

HCBS Settings requirement: The Person-Centered Service Plan must be developed through an individualized planning process. It must be driven by the individual. Should include people chosen by the beneficiary and/or beneficiary's representative, which may include a variety of individuals that play a specific role in the beneficiary's life. Must be able to direct the process to the maximum extent possible.

Must be timely and occur at times/locations convenient to all involved.	Power of Attorney for consumer stated that the care planning process is held at a convenient time and location, or by phone. The POA knows that the consumer and family can invite anyone they choose.
Reflects cultural considerations/uses plain language	Yes
Discusses individual preference for community integration within and outside the setting.	Individual Program Plan (IPP): Indicates previous careers and memberships. The IPP indicates the activities the consumer enjoys as painting, puzzles, crafts, reading, card making, music, parties, and Bingo. For example, if the consumer dislikes loud noises and large crowds. Going for a drive is calming. The IPP lists preferences in activities and a participation log is utilized to indicate participation in activities.
Includes strategies for solving disagreement	The IPP discusses strategies to assist the consumer in addressing any disagreements by implementing activities that the consumer enjoys. The agency has set a goal to encourage the consumer to participate in activities.
Offers choices to the individual regarding services and supports the individual receives and from whom	The IPP indicates the type of services that are being provided are based on the consumers preference.

Provides method to request updates	Resident Handbook states care meetings and updates can be requested at any time.
Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare	Goals are determined by the consumer and/or legal decision maker during the Person-Centered care plan meeting with the HCBS Case Manager and setting staff.
Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes	Care planning includes Strengths, needs, goals and task.
May include whether and what services are self-directed and includes risks and plan to minimize them	Care planning includes risks.
Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education, and others	Facility and the HCBS Care planning includes identified goals and preferences related to values. Individual Program Plan is created relating to the individuals hopes, dreams and values.
Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary	HCBS care plan is signed by the HCBS Case Manager and the family who is the POA.

Date of Review of Evidence Package by Aging Services Section:

Reviewed by the following staff:

Erica Reiner, HCBS Program Administrator,
Kathryn Good, HCBS Program Administrator, Heather Lindsley HCBS Program
Administrator

Recommendations to Meet Compliance:

Date of Compliance with above Recommendations:

8.19.24

Aging Services Decision:

- ☒ **Setting Fully Complies**
- ☐ **Setting with additional changes will fully comply**
Setting issued temporary compliance with need to submit a Corrective Action
Plan to include the intent to become compliant with the community
integration regulations of the HCBS Settings Final Rule Medicaid Waiver
1915(c) Adult Residential Care Services.
- ☐ **Does not/cannot meet HCB Settings Requirements**
Evidence package must be submitted to CMS for heightened scrutiny because
the facility is presumed to have institutional qualities based on one or more
of the following:
 - ☐ **Setting is in a publicly or privately-operated facility that provides**
inpatient institutional treatment;
 - ☐ **Setting is in a building on the grounds of, or adjacent to, a public**
institution;
 - ☐ **Setting has the effect of isolating individuals receiving Medicaid**
HCBS from the broader community of individuals not receiving
Medicaid HCBS.