Summary of Jamestown Blessed Homes Agency Foster Home for Adults, CMS Home and Community Based Services (HCBS) Settings Rule Site Visit

February 15, 2023, onsite by Erica Reiner, Program Administrator and Barb Hopewell, HCBS Case Manager Supervisor and virtually by Kathryn Good, Program Administrator.

Blessed Homes of Jamestown, ND is a AFHA that specializes in providing care to individuals who have cognitive impairments, brain injury, stroke, etc. and would otherwise be in an institution setting. The setting is an unsecured home that is accessible and located in a residential area with access to provider owned or public transportation. A google map, organization chart, , Medication error reporting policy is included in the Evidence Package.

Blessed Homes capacity is 4 Medicaid consumers.

Education regarding the Home and Community Based Services Settings requirements published in the Federal Register on January 16, 2014, was e-mailed to Blessed Homes owners for review. 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 ND Administrative Code Chapter 75-03-21.1 Licensing of Agency Foster Homes for Adults, and ND Administrative Code 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 as resources to provide education to Blessed Homes.

The assessment tool was completed by the State using evidence provided by Blessed Homes. The State provided further technical assistance upon request and the provider submitted an evidence package to the State to prove compliance with setting requirements.

February 15, 2023, the state made an onsite visit to tour the facility and review policies and procedures. Survey questions with consumers will be completed at least 30 days after admission. Survey questions focus 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
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.	The facility is open for tours prior to a decision to reside in the facility. There are other options for residential services in the area to choose from.
	The facility is ADA accessible.
	A legally enforceable agreement following ND landlord tenant laws.
	There are no cameras in the home.
	Supporting Documentation: • Rental Agreement

	Site Visit and Observation by state staff summary
Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	Consumers can continue employment or volunteering based on their person-centered goals.
	The consumer, power of attorney, or family control finances, the consumer can keep money in their possession if they desire.
	Engaging in community life is addressed below.
	Supporting Documentation:
	Blessed Home Operation Procedures document
Is integrated in and supports access to the greater community	The Agency QSP will assist the individual in accessing the broader community.
	Public Transportation is available.
	Everyone accesses the home and units the same way.
	During the night, they may ring the front doorbell at any time, and staff will assist them.
	Supporting Documentation:
	 Blessed Home Operation Procedures document Site Visit
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 Resident Handbook under Resident Rights states the resident has the right to choose who gives them care, how they are approached, choose all aspects of their care and right to determine schedule for waking, bathing, eating and activity participation.
	One entrée is served at mealtime, but alternate food is available upon request. There is food set out for the consumer to access during the day and night. If desired the consumer may have a fridge in their room.
	The laundry room is available to residents who wish to do their own laundry.
	 Supporting Documentation: Blessed Home Operation Procedures document Site Visit and Observation by state staff
Ensures an individual's rights of privacy, respect, and	There are two private rooms and one double occupancy

freedom from coercion and restraint	room with lockable doors and a private bathroom. The bathrooms have lockable doors.
	Couples are not required to share an apartment.
	Consumers can furnish and decorate their unit as desired.
	Areas were available to provide private visiting areas.
	Resident handbook states there will be a phone available for resident can receive or make private phone calls. Staff can assist residents in making phone calls when they are requested, and families are encouraged to purchase long distance phone cares if they need to make long distance calls.
	Mail will be hand delivered to the resident unopened.
	Staff training includes Resident Rights and topics of dignity and respect.
	 Supporting Documentation: Blessed Home Operation Procedures document
	 Complaint/grievance procedure provided in evidence Site Visit
Facilitates individual choice regarding services and supports and who provides them	The consumer has a choice in who cares for them.
	The facility provides the consumer information regarding filing a grievance.
	Consumer medical care is provided per own preference.
	Supporting Documentation:
	Blessed Home Operation Procedures document
	Resident Rights Booklet
Ensures the individual receives services in the community	All consumers are treated the same. Consumers can eat in
to the same degree of access as individuals not receiving Medicaid HCBS	place of their choosing.
	The consumer can access the broader community for services.
	Supporting Documentation:
	Blessed Home Operation Procedures document
	Resident Rights
	Site Visit

Blessed Homes have developed a care plan to include
behaviors, restrictions, and methods that have been tried
before. Individual's goals, values, beliefs, and how the
client would like to live are reviewed and goals
established. Community Integration and social supports
are reviewed to determine options available for the
individual. 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.
The monthly participation logs will be to ensure
community integration and activities.
Supporting Documentation:
Evidence Package 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	e plan.
The individual has a lease or other legally enforceable	The consumer or legal decision maker signs a lease
agreement providing similar protections	agreement when the decision has been made to move into
	the facility. The lease follows ND landlord tenant laws.
	Supporting Documentation:
	Rental Agreement Review
The individual has privacy in their unit including lockable	At the site visit it was observed the units have lockable
doors, choice or roommates and freedom to furnish or	doors. The double occupancy room has a privacy curtain
decorate unit	between sleeping spaces.
	Supporting Documentation:
	Blessed Home Operation Procedures document
	Rental Agreement
	Site Visit
The individual controls his/her own schedule including	If a menu is not acceptable, another option will be prepared.
access to food at all times	There are no assigned seats.
	Snacks are available throughout the day.
	Supporting Documentation:
	Blessed Home Operation Procedures document
The individual can have visitors at any time	Overnight guests allowed and there are no designated
	visiting hours.
	Supporting Documentation:
	Blessed Home Operation Procedures document
The setting is physically accessible	The setting is in a residential area of Jamestown.
	The setting is ADA accessible.

Supporting Documentation: • Site Visit

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.

Our mission and philosophy stems from four key components: Respect for the rights of the people we serve, Empathy and Self-Learning and Pride of Ownership.

We utilize the Person-Centered Care Plan to meet the individual needs of the people we serve. At Blessed Homes Jamestown ND LLC (BHJN), it is our mission to improve the quality of life of the people we serve by providing high-quality services to the elderly and people with physical disability in need of assistance with daily living activities in a home-like environment. Through our compassionate, caring, and competent services, we work with them at their own level to achieve their goals and full potential.

HCBS Settings requirement: The <u>Person-Centered Service Plan</u> 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	At admission and ongoing everyone's preferences personal
convenient to all involved.	At admission and ongoing, everyone's preferences, personal needs, goals and abilities, health status and other available supports are identified and utilized in the development of their personalized plan. People's person-centered plans, including healthcare supports, are modified in a timely manner based upon their acute health changes. A Person-centered planning meeting will be facilitated by the program coordinator with the client being the focus person. As required by CMS-administered Home and Community Based programs, the program coordinator at BHJN will create an initial individual Program plan for the people we serve within 30 days of acceptance into the program.
Reflects cultural considerations/uses plain language	 Dietary practices in keeping with the religious and cultural requirements of the people we serve we be observed at their request. Service Provider will discuss and review desired outcomes and plan with the individual how the outcomes can be accomplished in an individual's life. The content of the outcome will include the following: a) Personal goals b) Choice c) Social inclusion d) Relationships

	 e) Rights f) Dignity and respect g) Health h) Environment i) Security j) Satisfaction 3. Individuals with be assisted by the Service Providers. The Service Providers will ensure that individual's personal outcomes are coordinated with other providers throughout the year so that individual's goals are being attained effectively and in a timely manner. Individuals we serve will receive necessary Information and support they need to the enable them to make informed selections choices about their care. This will be done both orally and in writing in a language they understand. Receipt of this information will be acknowledged in writing. Rights reviews is done annually to ensure understanding and is documented.
Discusses individual preference for community integration within and outside the setting.	 People receiving Residential Habilitation and Community Support services have opportunities and support to access and engage in community life as desired: Daily activities will be offered in the home; you can participate in activities of your choice. We have a schedule for in-home activities and for activities outside the home. You can participate as you choose. Refer to activity binder and calendar, Appendix 1. Be independent and make your own life choices. You can participate in activities of commercial, religious, political, and community groups without interference. Engage in chosen activities and have an individual schedule that meets your person's preferences supported by the provider Observe cultural and ethnic practice and religion. Support can be provided for other communities, social, or health services including paid employment as documented in the person's ISP and support plan, if any. Consent to participate in any research or experimental treatment.
Includes strategies for solving disagreement	Blessed Homes Jamestown ND, LLC adheres to the concept of ensuring the optimum development and adaptations of the individuals served. The modification of maladaptive behaviors,

Offers choices to the individual regarding services and supports the individual receives and from whom Provides method to request updates	 which interfere with an individual's full realization of their potential, shall be the focus of all personnel's responsibilities for that individual's care and habilitation. We offer person centered care to each resident. The personalized service plan is developed through the participation of the residents, their family and facility staff and it identifies and addresses specific needs and allows each resident to make choices on how those needs are met.
Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare	May ask RN at any time for update. A Person-centered planning meeting will be facilitated by the program coordinator with the client being the focus person. Prior to the meeting, the client spent time with his/her support team member to learn more about his/her hopes dreams and preferences and to review the most recent plan; discuss changes, updates, and new goals; and make plans to implement changes. The person-centered plans will be modified by people with their individual support teams as goals and objectives are or are not realized.
Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes	 Service Provider will discuss and review desired outcomes and plan with the individual how the outcomes can be accomplished in an individual's life. The content of the outcome will include the following: Personal goals Choice Social inclusion Relationships Rights Dignity and respect Security Satisfaction Individuals with be assisted by the Service Providers. The Service Providers will ensure that individual's personal outcomes are coordinated with other providers throughout the year so that individual's goals are being attained effectively and in a timely manner.
May include whether and what services are self- directed and includes risks and plan to minimize them	To achieve the goal, we encourage and support our people to choose their own healthcare providers, make and keep their own healthcare appointments and records if they are able. They are given understandable information about their health, their

	medications, and their treatments, including the purpose,
	intended outcomes, side effects or other risks and alternatives
	and they are supported in making their choices regarding their
	medical care. Information about advanced directives, including
	Psychiatric Advanced Directive (PAD) are given and they are
	supported to develop one if desired.
	Education on medical and medication histories will be provided
	and the person's preferences and ability to self-administer
	medications and treatments will be assessed at least annually.
	Needed level of support necessary to ensure that they take
	their medications and complete treatments according to
	prescribed orders are provided.
	We ensure that the persons in our Homes have access to
	medical emergency services. Staff members know when to call
	911 and access emergency services.
	Documentation of acute health changes are done to provide a
	clear picture of the course of the illness or injury, the treatment
	provided, and the person's status from the time of
	identification through resolution are documented.
	People's person-centered plans, including healthcare supports,
	are modified in a timely manner based upon their acute health
	changes.
	Therapeutic and adaptive equipment, are provided as needed,
	ensuring that they fit them and are in good condition.
Includes individually identified goals and	The care managing team will create a comprehensive plan that
preferences related to relationships, community	The care managing team will create a comprehensive plan that will addresses the individual's needs of the people we serve in
participation, employment, income and savings,	accordance with their expressed preferences and goals. The
healthcare and wellness, education and others	person-centered plans will incorporate the results of
	assessments, evaluations and screenings required by the
	organization and by the person based on individual strengths
	and needs
Signed by all individuals and providers	All plans must be signed by responsible party whether it is the
responsible for implementation and a copy	consumer or a power of attorney.
provided to all chosen by the beneficiary	

Date of Review of Evidence Package by the HCBS Settings Committee: December 19, 2022, February 21, 2023, and made final determination on April 3, 2023

Reviewed by the following Committee members:

Nancy Nikolas Maier, Director of Aging Services Karla Backman, State Long Term Care Ombudsman Administrator Karla Kalanek, Developmental Disabilities Program Administrator Katherine Barchenger, State Autism Coordinator Kathryn Good, HCBS Program Administrator Erica Reiner, HCBS Program Administrator Heidi Zander, Developmental Disabilities Program Administrator Russ Korzeniewski, HHS Risk Manager

Recommendations to Meet Compliance:

Requires a double sink in kitchen for sanitation, General Authority: NDCC 50-06-16, 50-11 Law Implemented: NDCC 50-11-03, 75-03-21.1-17. Facility kitchens. Kitchens must provide appropriate space and equipment, including a two-compartment sink, to adequately serve the food preparation and storage requirements of the facility.

Ramp that is ADA compliant, General Authority: NDCC 50-06-16, 50-11 Law Implemented: NDCC 50-11-03, 75-03-21.1-14. Facility design. Facilities must be accessible to nonambulatory residents, visitors, and employees.

Date of Compliance with above Recommendations: April 3, 2023

Committee Decision:

- X 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.