

Summary of Bismarck Edgewood on Colorado Adult Residential CMS Home and Community Based Services (HCBS) Settings Rule Site Visit

January 10, 2023 by Kathryn Good, Program Administrator and Erica Reiner, Program Administrator.

Edgewood Bismarck on Colorado is a Specialized Basic Care Facility that specializes in providing care to individuals with memory loss. The setting is a secure facility that is accessible and located in a residential area with access to provider owned or public transportation. The setting is attached to an assisted living and basic care facility. A google map, organization chart, Basic Care License, Medication error reporting and Elopement Risk Prevention policy is included in the Evidence Package.

Edgewood capacity is with 14 residents presently and one pending Medicaid.

December 29, 2022 a Microsoft Teams conference was held with Edgewood to provide education regarding the Home and Community Based Services Settings requirements published in the Federal Register on January 16, 2014. 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 33-03-24.1 Basic Care Facilities, ND Century Code Chapter 50-10.2 Rights of Health Care Facility Residents, Adult Residential Care Policy 525-05-30-16, 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 as resources to provide education during the call.

The assessment tool was completed at the Settings Review visit and the State then provided a written summary of suggestions and areas that needed change to come into compliance. The State provided further technical assistance upon request and the provider submitted an evidence package to the State to prove compliance with setting requirements.

January 10, 2023, the state made an onsite visit to tour the facility, review policies and procedures, observe client care, and staff interactions. State staff met with the consumer and conducted a care plan review. Phone and email surveys were conducted with the Medicaid consumer's legal decision maker to assess the consumers experience living in the setting. 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 |
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| 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>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.</p> <p>The facility is ADA accessible.</p> <p>A legally enforceable agreement following ND landlord tenant laws.</p> <p>There are no cameras in the facility.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none">• Lease Agreement• Site Visit and Observation by state staff summary |

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| <p>Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.</p> | <ul style="list-style-type: none"> • Survey with consumer and legal decision maker <p>All consumers at the facility are currently retired. 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.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook |
| <p>Is integrated in and supports access to the greater community</p> | <p>Activity Calendars are posted to inform consumer and family of activities within the facility. The family/natural supports are encouraged to take the consumer out into the broader community. This was noted at the site visit. The consumer can utilize the internet or paper to determine activities outside of the facility. A Resident and Family newsletter is published and is available at the reception desk.</p> <p>Public Transportation is available. The facility provides transportation.</p> <p>A “Life History Form” is filled out at Admission to determine the likes and dislikes of the consumer and to develop a individualized care of the consumer. Monthly Activity Participation logs and outing information are kept for residents and reviewed at quarterly care conferences to determine community integration needs and restrictions. The person-centered plan of care is individualized for each consumer.</p> <p>Everyone accesses the building and units the same way. A code is posted at the facility entrance door and at the memory care unit allowing access to enter and leave. The code is posted. During the night, the front entrance to the facility is not staffed, but they may ring the front doorbell at any time, and staff will assist them.</p> <p>The outside enclosed courtyard has walking paths and table and chairs, planters, and flower garden. The courtyard is locked with the code posted. The consumer can request access to the courtyard by asking staff who will ensure that the consumer is dressed properly.</p> |

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| | <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Calendar of Events • Available Activities Sheet • Monthly Activity Participation Log • Observation/Outing Information Log • Life History Form • Person Centered Plan • Site Visit and Observation by state staff |
| <p>Optimizes individual initiative, autonomy, and independence in making life choices</p> | <p>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.</p> <p>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. The interview with the consumer's legal decision maker indicated knowledge of these rights.</p> <p>The kitchen where food is prepared then brought to Memory Care. There is a kitchenette in the memory unit and, water and coffee that is available for consumers. The consumer also has access to a fridge, oven, or microwave in this area.</p> <p>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 apartment unit.</p> <p>No disposable plates and silverware. No protective coverings used. Consumers had choices of food.</p> <p>The laundry room is available to residents who wish to do their own laundry.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Site Visit and Observation by state staff |
| <p>Ensures an individual's rights of privacy, respect, and freedom from coercion and restraint</p> | <p>The Medicaid consumers have private apartments with lockable doors and a private bathroom. The bathroom in the private apartment with a private bathroom.</p> <p>Couples are not required to share an apartment.</p> |

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| | <p>Consumers can furnish and decorate their unit as desired. Observation reflected consumer's own personal tastes in decorating their private living quarters.</p> <p>Several areas were available to provide private visiting areas. Has an area with a couch and chairs, area for games for groups or one on one, their apartments and the courtyard.</p> <p>Resident handbook states Edgewood Bismarck on Colorado has a cordless phone dedicated for resident use only so that residents 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.</p> <p>Mail is hand delivered to the resident. Basic Cable TV is available. Staff training includes Resident Rights and topics of dignity and respect.</p> <p>The resident handbook reflects care and medications are given in private. The door to the medication room will remain locked.</p> <p>Observed the staff knocking on the door before entering the room.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • "Resident Complaint/Grievance" policy is included in the Admission Packet. • HIPAA Notice of Privacy Practices is included in the Admission Packet. • 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 facility provides the consumer information regarding filing a grievance.</p> <p>There is a chapel and fee for service salon, in the facility and a list of other churches and services are given to the consumer.</p> <p>Consumer medical care is provided per own preference.</p> |

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| | Supporting Documentation: <ul style="list-style-type: none"> • Resident Handbook (Includes list of services outside of facility) • Resident Rights Booklet • “Resident Complaint/Grievance” policy is included in the Admission Packet. • Site Visit and Observation by state employees |
| Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS | <p>All consumers are treated the same. Consumers can eat in place of their choosing.</p> <p>The consumer can access the broader community for services if desired.</p> Supporting Documentation: <ul style="list-style-type: none"> • Resident Handbook • Resident Rights Booklet • Site Visit and Observation by state staff |
| Person-centered service plan | <p>Edgewood has developed a care plan 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. 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>The monthly participation logs are reviewed to ensure community integration and activities.</p> Supporting Documentation: <ul style="list-style-type: none"> • HCBS Care Plan template |

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| 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> Supporting Documentation: <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. The Medicaid consumer will have a private unit.</p> |

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| | Supporting Documentation: <ul style="list-style-type: none"> • Resident Handbook • Lease Agreement • Site Visit and Observation by state staff |
| The individual controls his/her own schedule including access to food at all times | <p>If a menu is not acceptable another option will be prepared. There are no assigned seats. Snacks are available throughout the day. 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.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Site Visit and Observation by state staff |
| 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 |
| The setting is physically accessible | <p>The setting is in a residential area of Bismarck. The setting is ADA accessible.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Site Visit and Observation by state employees |

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.

To be completed 30 days after first Medicaid Consumer admitted.

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.

Reflects cultural considerations/uses plain language

Discusses individual preference for community integration within and outside the setting.

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| Includes strategies for solving disagreement | |
| Offers choices to the individual regarding services and supports the individual receives and from whom | |
| Provides method to request updates | |
| Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare | |
| Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes | |
| May include whether and what services are self-directed and includes risks and plan to minimize them | |
| Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education and others | |
| Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary | |

Date of Review of Evidence Package by the HCBS Settings Committee:

January 30, 2023

Reviewed by the following Committee members:

Nancy Nikolas Maier, Director of Aging Services
Karla Backman, State Long Term Care Ombudsman Administrator
Russ Korzeniewski, HHS Risk Manager
Kathryn Good, HCBS Program Administrator
Erica Reiner, HCBS Program Administrator
Heidi Zander, DD Program Administrator

Required remediation:

- Evidence Package: Edgewood #6: Addendum to Admission Agreement
 - The Settings Committee reviewed, and the following changes will need to be made: This document does not allow the Consumer choice in their healthcare providers. An automatic referral to CaringEdge hospice. The Consumer needs to be asked their choice first, and then if they do not have a preference, Edgewood's preferred providers can be offered.
- Plan to ensure that snacks are always available for consumers. Consumers should not need to ask staff to get a snack.
- Cannot have locks on fridges in common areas/ kitchenettes
 - This is considered a restriction

Date of Compliance with above Recommendations: January 30, 2023

Committee 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.**