<u>Summary of Bismarck MapleView Adult Residential CMS Home and Community Based</u> Services (HCBS) Settings Rule Site Visit

October 25, 2022, by Kathryn Good, Program Administrator and Erica Reiner, Program Administrator.

Bismarck MapleView is a Basic Care Facility that specializes in providing care to individuals with memory loss. The setting is a secured facility that is accessible and located in a residential area with access to provider owned or public transportation. A google map, organization chart, Basic Care License, Medication error reporting and Elopement policy is included in the Evidence Package. Bismarck Maple View's capacity is 36 with 33 residents presently and 12 on Medicaid.

E-mail sent to Bismarck Maple View's Director 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.

The assessment tool was started with the review of evidence package and completed during the onsite visit on October 25, 2022.

October 25, 2022, 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 prior to visiting the facility. A phone survey was 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
Facility is selected by the individual from among settings	The facility is open for tours prior to a decision to reside in
options including non-disability specific settings and an	the facility. There are other options for residential services
option for a private unit in a residential setting.	in the area to choose from.
	The facility is ADA accessible.
	A legally enforceable agreement following ND landlord
	tenant laws.
	There are cameras in the facility located in the hallways,
	great room, and entrance.
	Supporting Documentation:
	Lease Agreement
	Site Visit and Observation by state staff summary
	Survey with consumer and legal decision maker
Provides opportunities to seek employment and work in	All consumers at the facility are currently retired.
competitive integrated settings, engage in community life,	Consumers can continue employment or volunteering
and control personal resources.	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. Families buy debit cards, and we keep the receipts after the individual makes purchase.

Engaging in community life is addressed below.

Supporting Documentation:

- Resident Handbook
- Survey with consumer and legal decision maker

Is integrated in and supports access to the greater community

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.

Public Transportation is available as well as facility transport

A life enrichment assessment is filled out at Admission to determine the likes and dislikes of the consumer. Encouraged the use of 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.

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 by the door.

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.

The outside enclosed courtyard has walking paths and table and chairs. The courtyard is unlocked but is locked in the winter and bad weather to ensure the safety of the consumer.

Supporting Documentation:

- Resident Handbook
- Calendar of Events
- Available Activities Sheet
- Monthly Activity Participation Log
- Observation/Outing Information Log
- Life History Form
- Person Centered Plan

Survey with consumer and legal decision maker Site Visit and Observation by state staff Optimizes individual initiative, autonomy, and There are no visiting hours and guests can stay overnight. independence in making life choices 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. The interview with the consumer's legal decision maker indicated knowledge of these rights. The kitchen where food is outside the Memory Care unit with a serving counter in the MC unit. There is a counter in the great room with water and snacks available all the One entrée is served at mealtime, but alternate food is available upon request. If desired the consumer may have a fridge in their apartment unit. Fridges are temperature checked daily. No disposable plates and silverware. No protective coverings used. Consumers had choices of food. The laundry room is available to residents who wish to do their own laundry with assist of staff. **Supporting Documentation:** Resident Handbook Site Visit and Observation by state staff Survey with consumer and legal decision maker Ensures an individual's rights of privacy, respect, and The Medicaid consumers have jack and jill style rooms. freedom from coercion and restraint The bathroom is shared and has lockable doors. Couples are not required to share an apartment. Consumers can furnish and decorate their unit as desired. Observation reflected consumer's own personal tastes in decorating their private living quarters.

areas.

Several areas were available to provide private visiting

Resident handbook states MapleView Bismarck 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.

Mail is hand delivered to the resident.

Basic cable is available in the Great Room. Staff training includes Resident Rights and topics of dignity and respect.

The resident handbook reflects care and medications are given in private.

Observed the staff knocking on the door before entering the room.

Supporting Documentation:

- 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
- Staff Training Folder
- Survey with consumer and legal decision maker

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.

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.

Consumer medical care is provided per own preference.

Supporting Documentation:

- 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
- Staff Training Folder
- Survey with consumer and legal representative

Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS	All consumers are treated the same. Consumers can eat in place of their choosing. The consumer can access the broader community for
	services if desired.
	Supporting Documentation:
	Resident Handbook
	Resident Rights Booklet
	Site Visit and Observation by state staff
	Survey with consumer and legal representative
Person-centered service plan	MapleView 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.
	The monthly participation logs are reviewed to ensure community integration and activities.
	Supporting Documentation:
	Person Centered Care Plan Review by State staff
	Participation Log review Care Note review
	Care Note review MapleView Care Plan review
	MapleView Care Plan reviewHCBS Care Plan review
	- ITCDS care Flair 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	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. Supporting Documentation: Lease Agreement	
The individual has privacy in their unit including lockable doors, choice or roommates and freedom to furnish or decorate unit	At the site visit it was observed the units are jack and jill style with lockable doors. The consumer had pictures on the wall and unit was furnished according to the desire of the consumer or family.	

	The consumer is encouraged to decorate their apartment to
	reflect personal taste, hobbies, and interest.
	Supporting Documentation:
	Resident Handbook
	Lease Agreement
	Site Visit and Observation by state staff
	Survey with consumer and legal decision maker
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.
	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 son / legal decision
	maker indicated knowledge of these rights.
	maker maleuted knowledge of these rights.
	Supporting Documentation:
	Resident Handbook
	Site Visit and Observation by state staff
	Survey with consumer and legal decision maker
The individual can have visitors at any time	Overnight guests allowed and there are no designated
	visiting hours.
	Supporting Documentation:
	Resident Handbook
	Survey with consumer and legal decision maker
The setting is physically accessible	The setting is in a residential area of Bismarck.
	The setting is ADA accessible.
	Suppositing Decumentation.
	Supporting Documentation:
	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.

On October 25, 2022, state staff conducted an onsite visit to MapleView Bismarck.

The family helps to meet the consumers community integration needs. They accompany the consumer on weekly lunch outings, go to concerts, takes drives, and help their family member get to medical appointments. The consumer participates in activities inside the facility as chosen by the consumer. The family member interviewed stated the facility

does not prevent the consumer from coming and going.

The consumer's legal representative manages the consumers finances. The legal representative and other family members are happy with the facility as the consumer is getting good care, the family can visit when they want, the consumer is engaged in activities.

The interviewed family member states the consumer can get up when desired and eats breakfast when they want. The facility makes food on demand and food is available at any time. Decision maker knows there is an option to have a fridge in their room if they desire.

The family member stated that the consumer does not have to adhere to a set schedule of waking, eating, bathing etc. and that these activities are completed based on the consumers preference.

The living unit can be decorated as desired. The bedroom door has a lock. The consumer may have a TV, fridge, phone or computer if they choose.

The staff interacts in a dignified manner. The family member interviewed indicated knowledge of how to submit a grievance and that this can be done anonymously. The family members interviewed know who the case manager is and participates in care planning.

During Covid-19 restrictions there was more one on one activities, but now that the restrictions have relaxed some, more participation in group activities is occurring. Consumers are encouraged to voice activities that they like and staff/natural supports will work to help consumers attend activities outside of the facility.

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	Power of Attorney for consumer stated that the care planning process	
convenient to all involved.	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	Yes	
language		
Discusses individual preference for community	Life Enrichment:	
integration within and outside the setting.	Indicates previous careers and memberships. The Life Enrichment	
	Form indicates the activities the consumer enjoys as painting, puzzles,	
	crafts, reading, card making, music, parties, and Bingo. The consumer	
	dislikes loud noises and large crowds. Going for a drive is calming.	
	The care plan lists preferences in activities and a participation log is	
	utilized to indicate participation in activities.	
Includes strategies for solving disagreement	The care plan discusses strategies to assist the consumer in	
	addressing any disagreements by implementing activities that the	
	consumer enjoys. The facility 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 care plan indicates the type of services that are being provided are based on the consumers preference.
Provides method to request updates	A resident or responsible party may request a Care Plan meeting at any time.
Reflects what is important to the individual to	Goals are determined by the consumer and/or legal decision maker
ensure delivery of services in a manner	during the Person-Centered care plan meeting with the HCBS Case
reflecting personal preferences and ensuring health and welfare	Manager and setting staff.
Identifies the individual's strengths,	Care planning includes Strengths, needs, goals and task.
preferences, needs (clinical and support), and desired outcomes	
May include whether and what services are self-	Care planning includes risks.
directed and includes risks and plan to minimize them	
Includes individually identified goals and	Facility and the HCBS Care planning includes Identified goals and
preferences related to relationships, community	preferences related to values "What is important to client",
participation, employment, income and savings,	Community Integration and Social Support, Family, Decision Making,
healthcare and wellness, education and others	Financial, Education, Employment, Healthcare, Medications,
	Nutrition, Mental Health, Cognitive, Behavior, and Safety
Signed by all individuals and providers	HCBS care plan is signed by the HCBS Case Manager and the family
responsible for implementation and a copy	who is the POA.
provided to all chosen by the beneficiary	

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

November 21,2022

Reviewed by the following Committee members:

Nancy Nikolas Maier, Director of Aging Services
Karla Kalanek, Developmental Disabilities Program Administrator
Russ Korzeniewski, Health and Human Services Risk Manager/Disaster Preparedness Administrator
Erica Reiner, HCBS Program Administrator
Kathryn Good, HCBS Program Administrator

Recommendations to Meet Compliance:

Date of Compliance with above Recommendations: November 21, 2022 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

• Setting is in a building on the grounds of, or adjacent to, a public institution;

broader community of individuals not receiving Medicaid HCBS.

Setting has the effect of isolating individuals receiving Medicaid HCBS from the

institutional treatment;