

HCBS Final Rule Evidentiary Package

Aicota Assisted Living



Setting information

Setting name: Aicota Assisted Living	ID #: 30585
Street address: 840 2nd Street NW, Aitkin, MN 56431	Phone: 218-927-2182
Setting website:	Date of site visit: 8/7/2018
Aicota Assisted Living	
(https://www.aicota.com/assistedLiving.php)	

Waiver service type

Waiver service	Service type:
□ Alternative Care (AC) □ Elderly Waiver (EW) □ Brain Injury (BI) □ Community Access for Disability Inclusion (CADI)	Customized Living
☐ Community Alternative Care (CAC) ☐ Developmental Disabilities (DD)	

Reason for heightened scrutiny

Prong type	Category	Type of setting
Prong 1 Located in a Public or Private Institution	Name of Institution	Name of Institution Aicota Health Care Center

Note: The term people/person (resident for residential settings) refers to people receiving Medicaid HCBS waiver service

General summary

Aicota Assisted Living is located in the city of Aitkin, in Aitkin County, about 130 miles north of Minneapolis. Aitkin had a population of 2,165 in 2010.

At the time of the provider attestation, Aicota Assisted Living provided customized living services to 32 individuals. At that same time, the setting served 12 people supported by a home and community based waiver program.

The customized living setting is a part of the Aicota Health Care Center, a continuum of care campus, which also includes a short- and long-stay skilled nursing facility, hospice care, respite care, and therapy services. The campus is owned and operated by Aicota Health Care Center.

Customized living provider standards/qualifications

Licensure requirements and other state regulations for customized living services clearly distinguish these services/settings from institutional licensure or regulations.

Customized living services are provided in housing with services establishments with the service provider directly licensed as a comprehensive home care provider by the Minnesota Department of Health. Customized Living services provide an individualized package of regularly scheduled health-related and supportive services provided to a person who resides in a qualified, registered housing with services establishment.

Customized living service definitions that support the setting requirements

Customized living (CL) and 24-hour CL services include component services designed to meet the person's assessed needs and goals. Individualized CL services may include supervision, home care aide tasks (e.g., assistance with activities of daily living), home health aide task (e.g., delegated nursing tasks), home management tasks, meal preparation and service, socialization, assisting enrollees with arranging meetings and appointments, assisting with money management, assisting participants with scheduling medical and social services, and arranging for or providing transportation. If socialization is provided, it must be part of the service plan, related to established goals and outcomes and not diversional or recreational in nature.

For more details about the component services, including what is covered and distinctions between each see <u>Customized Living Component Service Definitions</u>, <u>DHS-6790H (PDF)</u>.

(https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6790H-ENG)

Minnesota's Community Based Services Manual (CBSM) provides the following requirements for customized living services:

CBSM page on Customized Living

(http://www.dhs.state.mn.us/main/id_001787#)

Prong 1 and Prong 2 settings

Meaningful distinction between the facility and HCBS setting

States must submit strong evidence that the setting presumed institutional has the characteristics of a HCBS setting and not an institutional setting.

Determination

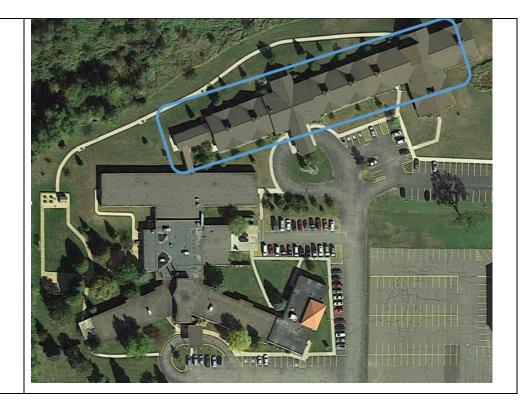
Summary

Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.

Not applicable

Aicota Assisted Living, the customized living setting, has separate management staff who oversee housing and nursing services in the setting. These staff report to the administrator of the care campus. The setting is financially connected to the entire campus, but it manages decisions about financial matters at the setting level as well.

⊠Met	To the extent any facility staff are assigned occasionally or on a limited
□Unmet	basis to support or back up the HCBS staff, the facility staff are cross-
□ Not applicable	trained to meet the same qualifications as the HCBS staff; (staff training materials that speak of the need to support individuals' chosen activities), (person centered planning) (the staff is trained specifically for home and community-based support in a manner consistent with the HCB settings regulations.)
	All staff that work in the customized living setting receive HCBS settings rule training and other relevant training and orientation for the setting. Nursing facility staff occasionally work a shift in the customized living setting, but everyone who works in the setting is fully trained on HCBS requirements.
⊠Met	Participants in the setting in question do not have to rely primarily on
□Unmet	transportation or other services provided by the facility setting, to the exclusion of other options; (Describe the proximity to avenues of available
□Not applicable	public transportation or an explanation of how transportation is provided where public transportation is limited.)
	People living in this customized living setting have several options for transportation to support community engagement and inclusion, including: a setting van; Arrowhead Dial-a-Ride, the county public transit provider; rides provided by health plans; rides from family and friends; and peoples' own vehicles.
⊠Met	The setting provides HCBS services in a space that is distinct from the
□Unmet	space that institutional services are provided.
□ Not applicable	The customized living setting is separate from the nursing facility. The nursing facility has a very different style of construction, has its own signage, entrance, and parking lot. People served in the setting and visitors come and go from a separate entrance than the nursing facility. The setting is connected to the nursing facility by way a long hallway. In the image below, the setting is circled in blue. The rest of the care campus is shown below the setting.



Community engagement opportunities and experiences

Community engagement is overseen by the setting's staff. People served in the setting provide input through interest assessment forms, tenant "town meetings," a suggestion box, and direct communication with staff. People learn about activities offered in the setting through an activity calendar, a daily activity board, and through mealtime announcements.

The setting supports regular outings in the community with the support of their van and the family and friends of people served in the setting. Outings include the following:

- Trips to area stores
- Restaurants
- Community events and festivals; fishing trips and boat rides
- Worship services, funerals, and other faith community events

The setting also offers several events each year that draw larger numbers of people from the wider community, including weekly yoga classes, health and wellness classes, support groups, community picnics, and book groups.

On-site, programmed activities include: exercise sessions, music and art making, social gatherings, cooking and baking, and various games.

People living in the setting also plan and participate in self-led activities. Also, the setting features a number of outdoor walking areas.

HCBS characteristics

This section is a summary of the individual HCBS characteristics required in the HCBS rule. The findings for each characteristic are identified through the setting attestation documentation, on-site observation or both.

HCBS Rule requirement	Compliance status
Each person at the setting has a written lease or residency agreement in place providing protections to address eviction processes and appeals.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The setting provided a lease agreement as documentation through the provider attestation process. A person living in the setting who was interviewed confirmed that she signed a lease agreement in choosing to live in the setting.	
Each person at the setting has privacy in his/her sleeping or living unit including a lockable door.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Locks were observed on all unit doors in the setting. A person living in the setting who was interviewed confirmed that she has a lock on her unit door and that her privacy is respected in the setting.	
The setting facilitates that a person, who shares a bedroom, is with a roommate of their choice.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
People living in this setting do not share rooms unless they share a room with a spouse, partner, or other person of their choice. A person living in the setting does not share her unit with anyone.	
The setting provides people with the freedom to furnish and decorate	Compliant
their bedroom and living unit within the lease or residency agreement.	
☐ Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	

The lease allows people in the setting to decorate and personalize their living units. Living units were observed during the site visit and were decorated as people desired.	
The setting provides people the freedom and support to control their daily schedules including access to food at any time.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
A person living in the setting has found the staff very flexible in adjusting services to accommodate her preferences. She also said that the staff have been very good about helping her coordinate appointments and transportation to and from off-site medical appointments, according to her preferences. The person interviewed had a full kitchen in her unit and she regularly prepares herself snacks. She also prepares her own meals occasionally.	
The setting allows people to have visitors at any time.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
A person living in the setting who was interviewed confirmed that visitors can come and go as they like, and that there are not any restrictions on visiting the setting.	
The setting provides opportunities for people to seek employment and work in competitive integrated settings.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
A person living in the setting who was interviewed no longer works. However, she said that the staff have been very willing to adjust the service schedule to accommodate her plans, as needed.	
The setting is physically accessible to the individual.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The common spaces and living units were observed to be accessible. Living units and bathrooms were observed to have accessibility features, including grab bars and benches in the showers and grab bars surrounding toilets. The setting supports a reasonable accommodations process, as needed.	

The setting provides people opportunities to access and engage in community life.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The setting offers a varied activity calendar of on-site and off-site offerings. A person living in the setting who was interviewed receives rides into the community from her adult children and friends. She said that she gets into the wider community as often as she likes.	
A person interviewed said she had received physical therapy and visiting doctor services in the setting. She said that the on-site services were good and very convenient went she was in worse health, but now she uses providers in the wider community.	
The setting supports the person's control of personal resources.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
This setting does not help people with their personal finances.	
The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The setting has a compliant policy with respect to peoples' privacy. A person living in the setting who was interviewed said that her privacy was always respected by staff. When the manager led me to the person's living unit, he knocked before entering the unit and asked the person if it was still a good time for the interview.	
The setting ensures people's dignity and respect.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
During the site visit, staff were observed treating people living in the setting with respect, and addressing people in the setting by name. A person living in the setting who was interviewed confirmed that she was treated with dignity and respect. I observed the housing manager answer two people's questions during the visit. He was very kind and respectful in addressing the questions.	

The setting ensures people's freedom from coercion and restraint.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
Staff are trained on the Minnesota Home Care Bill of Rights and the Minnesota Vulnerable Adults Act. A copy of the Home Care Bill of Rights is also given to people to inform them of their right to be free from coercion and restraint.	
The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
A person living in the setting who was interviewed confirmed that she felt she could make all of her own choices about her daily activities. She feels that the setting is her home.	

Pictures of the HCBS setting



Common space lounge area



Dining area with food and drink available throughout the day



Bulletin board advertising on- and off-site activities



Living unit bathroom accessibility features

Public comment summary

The Minnesota Department of Human Services (DHS) did not receive public comments for this setting.

DHS sought public comment from April 30, 2019, to June 9, 2019, before submitting settings to the Centers Medicare & Medicaid Services (CMS) for heightened scrutiny.

We sought public comments using the following methods:

- Evidentiary packages posted online on the <u>Home and Community Based Services Rule</u> transition plan page
- Evidentiary packages specific to each setting posted in a common area of the setting
- Notice of public comment period via May 10, 2019, eList announcement
- Notification to lead agencies via regional resource specialists
- Notification to providers via email
- Notification to managed care organizations and Area Agencies on Aging (AA) via email
- Notification to long-term care ombudsman office via email
- Disability Hub MN virtual insight panel.

Minnesota's recommendation

Date of recommendation: 7/1/2019

Minnesota supports that this setting overcomes the institutional presumption and meets the requirements of a home and community-based setting. Provider is required to maintain ongoing compliance with all HCBS requirements.