

# **HCBS Final Rule Evidentiary Package**

Garden View at Hilltop



## **Setting information**

Setting name: Garden View at Hilltop	ID #: 31471
Street address: 410 Luella Street, Watkins, MN 55389	Phone: 320-764-2300
Setting website, if applicable:	Date of site visit: 6/4/2018
Garden View at Hilltop	
(http://www.hilltophealthcarecenter.com/garden-	
view-at-hilltop.html)	

## Waiver service type

Waiver service	Service type:
□Alternative Care (AC)	Customized Living
⊠Elderly Waiver (EW)	
□Brain Injury (BI)	
Community Access for Disability Inclusion (CADI)	
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 Hilltop Health Care Center

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

## **General summary**

Garden View at Hilltop is located in the town of Watkins, in a residential neighborhood not far from the town center. The town of Watkins is located in Meeker County, 25 miles south of Saint Cloud, and 70 miles northwest of Minneapolis on highway 55. Watkins had a population of 962 in 2010. Garden View at Hilltop is a 34-unit senior housing building that served 10 people on Elderly Waiver at the time of their attestation. The customized living setting is connected by a hallway to Hilltop Health Care Center (a nursing facility). Hilltop Health Care Center and Garden View at Hilltop, the customized living setting, are privately owned as of 2012. The care center had been previously owned by the City of Watkins, and later, the Paynesville Area Health Care System.

## **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, DHS-6790H (PDF)</u>. https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6790H-ENG

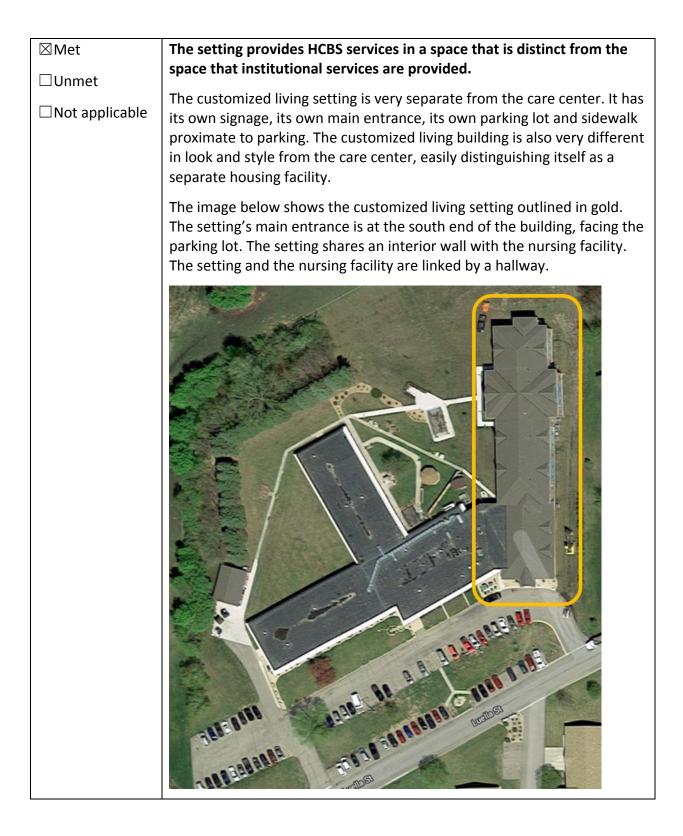
Minnesota's Community Based Services Manual (CBSM) provides the following requirements for <u>customized living services</u> (http://www.dhs.state.mn.us/main/id\_001787)

## 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
⊠Met □Unmet	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.
□Not applicable	Garden View at Hilltop, the customized living setting, is administered as a separate program with separate spaces and program offerings from the care center. The program is considered separately in terms of its finances. The customized living setting is owned by the same private partners as the care center, but the setting is managed as a separate program from the care center.
⊠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. Staff from the Hilltop Health Care Center fill-in shifts in the customized living program very occasionally. These fill-in staff receive HCBS training.
⊠Met	Participants in the setting in question do not have to rely primarily on
□Unmet □Not applicable	<b>transportation or other services provided by the facility setting, to the</b> <b>exclusion of other options;</b> (Describe the proximity to avenues of available public transportation or an explanation of how transportation is provided where public transportation is limited.)
	The customized living setting is not far from the center of the small town of Watkins. Some people served in the setting walk to community amenities from the setting. People served in the setting also have access to the following modes of transportation: their own vehicles, family and friends, the setting's van, and taxi "care" cab services.



## **Community engagement opportunities and experiences**

Community engagement is supported by staff that are focused on the customized living setting. People served in the setting provide input through interest assessment forms, bimonthly tenant meetings, and direct communication with staff. People in the setting learn about on-site activities and offerings in the wider community through a bulletin board display, a monthly and weekly event calendars, and through staff announcements and reminders.

The setting supports regular outings in the community. Below are examples of these types of outings:

- Grocery shopping and shopping for other household goods
- Restaurants
- Community events and festivals
- Scenic drives, to take in the seasons and holiday decorations
- Fishing trips.

People living in the setting also frequently go out on their own, with their own cars, with family and friends, and with the support of volunteer drivers. These trips include: general errands, coffee dates and restaurant meals, family events, and faith community activities.

The setting also supports a daily activity calendar that people can participate in as they like. On-site, programmed activities include: chapel services and Catholic Mass, arts and crafts offerings, movie nights, holiday parties, games of various kinds, and guest musicians. People living in the setting are also active planning and participating self-led activities including book clubs, card playing, bible study, and social get-togethers with other residents or guests from the wider community.

## **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 rental agreement as documentation through the provider attestation process and this was confirmed with people interviewed during the site visit.	
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. The administrator and the people interviewed who live in the setting stated that the building operates like a standard apartment building in terms of exterior entrances and unit doors.	
The setting facilitates that a person, <i>who shares a bedroom</i> , is with a roommate of their choice.	Compliant
⊠Compliant documentation submitted with attestation	
□Observation made during on-site visit	
This item is not applicable. People living in this setting do not share rooms unless they share a room with a spouse, partner, or other person of their choice.	

The setting provides people with the freedom to furnish and decorate their bedroom and living unit within the lease or residency agreement.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The rental agreement allows people in the setting to decorate and personalize their living units. Living units were observed during the site visit and were very home-like and personal, and decorated as the person desired.	
The setting provides people the freedom and support to control their	Compliant
daily schedules including access to food at any time.	
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
An interview with a married couple living in the setting confirmed that people in the setting can control their daily schedules, in terms of waking, going to bed, and coming and going and eating as they would like. A snack area is available in the dining area between meals, and people living in the setting have kitchens in their units.	
The setting allows people to have visitors at any time.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Interviews with people living in the setting confirmed that people can have visitors at any time. Visitors were observed coming into the setting during the site visit. All people living in the setting have a unit key and an exterior door key, and can come and go as they please.	
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	
The people interviewed no longer work, and do not desire to work, but confirmed that their services could be rearranged to support any commitments they may have. They also confirmed that they know of other residents who have used transportation services to get to their regular commitments.	

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 very accessible, with many universal design and handicap accessible features. Living unit bathrooms had grab bars and accessible showers. Also, the setting had wide hallways and wide doorways. The administrator also confirmed that they work with tenants if they need a modification to their living unit based on a physical limitation.	
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 customized living setting is very close to the center of town and has a courtyard area that is sometimes used by members of the wider community. The setting has a good daily activity schedule with both on-site and off-site activities. They also encourage people served in the setting to get out into the wider community, with their own cars, with the assistance of family and friends, or with the support of community transportation options.	
This site offers a number of on-site medical services, including physical, occupational, and speech therapy at the care center, an on-site mental health provider, and a visiting nurse practitioner. The administrator and people interviewed confirmed that people can choose any provider they like, and that support is provided for people to receive care beyond the setting.	
The setting supports the person's control of personal resources.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
Not applicable. This setting does not assist 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	
This setting operates primarily as a housing site, like a standard apartment building. As such, people come and go as they like and have private, locked living units. Staff working in the setting are trained to respect the privacy of people living in the setting. During the building tour, I observed a direct care staff knocking on a living unit door to serve a person in the setting. The staff waited to be invited in before entering the unit.	
The setting ensures people's dignity and respect.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
During the site visit, several respectful exchanges were observed between staff and people living in the setting.	
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, which address this right.	
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	
As stated above, people in the setting lead their own lives and their own daily schedules, coming and going as they please, arranging their days as they would like. In this setting, many people were observed in common areas doing their own activities, including: reading the newspaper, walking in the courtyard area, and having a coffee and food between meal times in the common dining hall. Customized living services accommodate the schedules of the people served in this setting.	

## **Pictures of the HCBS setting**



Accessible van owned and used by setting

Standard living unit kitchen, personally decorated

## **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> <u>transition plan page</u>
- 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 on-going compliance with all HCBS requirements.