

# **HCBS Final Rule Evidentiary Package**

# **Meadows on Fairview Assisted Living**



## **Setting information**

D # 30338
hone: 651-982-6228
ate of site visit: 9/18/2018
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## Waiver service type

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

## Reason for heightened scrutiny

Prong type	Category	Type of setting
Prong 1 Located in a		Name of Institution
Public or Private Institution	Name of Institution	Meadows on Fairview Transitional Care Unit

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

#### **General summary**

Meadows on Fairview Assisted Living is located in the city of Wyoming in Chisago County, about 35 miles north of Minneapolis. Wyoming had a population of 4,379 in 2010.

At the time of the provider attestation, Meadows on Fairview Assisted Living provided customized living services to 45 people. At that same time, the setting served four people supported by a home and community-based waiver program.

The customized living setting is a part of a continuum of care campus, which includes a short-stay skilled nursing facility, therapy services and independent living. The campus is owned and operated by Ebenezer, the long-term care services arm of Fairview Health, which is a nonprofit health 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 tasks (e.g., delegated nursing tasks), home management tasks, meal preparation and service, socialization, assisting people with arranging meetings and appointments, assisting with money management, assisting people 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 for customized living services (http://www.dhs.state.mn.us/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.

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Determination	Summary	
⊠Met	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.	
□Unmet □Not applicable	Meadows on Fairview 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 □Unmet	To the extent any facility staff are assigned occasionally or on a limited basis to support or back up the HCBS staff, the facility staff are crosstrained 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.)	
□Not applicable	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 setting. In fact, customized living staff more often pick up nursing facility shifts than the other way around. Nursing facility staff working in the customized living setting are fully trained on HCBS requirements.	
⊠Met □Unmet □Not applicable	Participants in the setting in question do not have to rely primarily on transportation or other services provided by the facility setting, to the exclusion of other options; (Describe the proximity to avenues of available 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:	
	The setting's van	

- Heartland (the county's public transit provider)
- Rides provided by health system or insurance plans
- Rides from family and friends
- People's own vehicles.

The setting provides HCBS services in a space that is distinct from the space that institutional services are provided.

The customized living setting is separate from the nursing facility. The customized living setting has its own signage and parking lot. In fact, the setting feels like the primary building on campus. 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 a hallway.

In the image below, the setting is outlined in gold. The short-stay skilled nursing facility and therapy services are located in the building to the right of the setting. The building further to the right is an independent living building.

⊠Met

□Unmet

□Not applicable



## 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, resident meetings and direct communication with staff. People learn about activities offered in the setting through an activity calendar, a bulletin board and reminders from staff.

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

- Errands to area stores at least once a week
- Restaurants and casinos
- Community events and festivals
- Fishing trips and boat rides
- Public library.

The setting also offers several events each year that draw larger numbers of people from the wider community, including:

- Meetings held by community organizations
- Continuing education events for area professionals
- Holiday celebrations.

On-site, programmed activities include:

- Exercise sessions
- Music and art-making
- Gardening
- Themed parties and social gatherings
- Cooking and baking
- Various games.

People living in the setting also plan and participate in self-led activities.

### **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 (Please select)
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 she signed a lease agreement when 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 she has a lock on her unit door and 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 chooses to share her living unit with another person to which she is not related to reduce the cost of the unit. She said the staff were very helpful matching her with a compatible roommate. The staff let her know she and her roommate could ask for a change at any time, as needed. The person said that she has really	

enjoyed having a roommate, and that she and her roommate are very compatible.	
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 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 said staff were very willing to accommodate her preferences. She said when she has been sick or low-energy, staff have offered to come a bit later in the day to complete a service. The person interviewed said she stores and prepares food in her living unit at times, but the common dining area in the setting is open most hours of the day and snacks are always available.	
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 visitors can come and go as they like, and there are not any restrictions on visiting the setting.	
The setting provides opportunities for people to seek employment	Compliant
and work in competitive integrated settings.	
⊠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 the staff have been very willing to adjust the service	

schedule to accommodate her plans, as needed. A manager in the setting and a direct care staff who was interviewed both said they were not aware of any people in the setting who were working. The setting predominantly serves older adults. However, both staff affirmed they would accommodate people's scheduling preferences of services, meals or other supportive services.	
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. The setting supports a reasonable accommodations process, as needed. A person living in the setting who was interviewed uses a walker and said she finds it very easy to move around her unit, her bathroom area and the building.	
The setting provides people opportunities to access and engage in community life.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
See the community engagement section. The setting offers a varied activity calendar of on-site and off-site offerings. A person living in the setting said she gets into the wider community as often as she likes. She has had help with rides from friends and the setting's van. She has enjoyed group trips with others who live in the setting, as well as trips on her own.	
A person interviewed said she was aware of some of the medical services available on-site in the setting, but she chooses to use 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	
The setting has a compliant policy related to assisting people in the setting with their personal resources. People living in the setting are	

properly informed of this right. A person interviewed in the setting said she manages all of her own personal resources.	
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 people's privacy. A person living in the setting who was interviewed said her privacy was always respected by staff.	
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. A person living in the setting who was interviewed confirmed she was treated with dignity and respect. She especially enjoys the large common spaces in the setting beyond her living unit. She said she felt very comfortable using those space throughout the day and at times when she entertains guests. She said she feels like the building is very welcoming and a pleasure to be in.	
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 she felt she could make all of her own choices about her daily activities.	

## **Pictures of the HCBS setting**



Patio space at the setting



Dining area with food and drink available throughout the day



Bulletin board advertising on- and off-site activities



The setting's accessible van

## **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.