

HCBS Final Rule Evidentiary Package

The Residence at Cerenity Marian



Setting information

Setting name: The Residence at Cerenity Marian	ID # 21947
Street address: 225 Frank St.	Phone: 651-793-2100
St. Paul 55106	
Setting website, if applicable:	Date of site visit: 9/21/2018
The Residence at Cerenity Marian	
(https://www.cerenityseniorcare.org/marian-of-st-	
paul-senior-living)	

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	Name of Institution	The Residence at Cerenity
Institution		Marian

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

General summary

The Residence at Cerenity Marian is a customized living residential setting located in St. Paul, Minnesota. The Residence at Cerenity Marian is on a continuum of care campus within a residential area in close proximity to churches, restaurants, healthcare, parks and shopping. As of 2017, the United States Census Bureau estimated St. Paul has a population of 306,621.

The Residence at Cerenity Marian is part of a non-profit organization called Cerenity Senior Care. The Residence at Cerenity Marian is part of a campus that offers different levels of care. Specifically, the Residence at Cerenity Marian is a customized living and independent living residential setting. On the same campus, the Care Center at Cerenity Marian, which is the nursing facility, offers:

- Hospice
- 24-hour skilled nursing care
- Transitional care
- Rehabilitation
- Memory care

- Enhanced assisted living
- Special care unit specializing in supports related to dementia.

At the time of the on-site visit, the Residence at Cerenity Marian customized living reported having 126 total units. Seventeen people currently are using customized living services funded by the Elderly Waiver.

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>, DHS-6790H (PDF) (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:

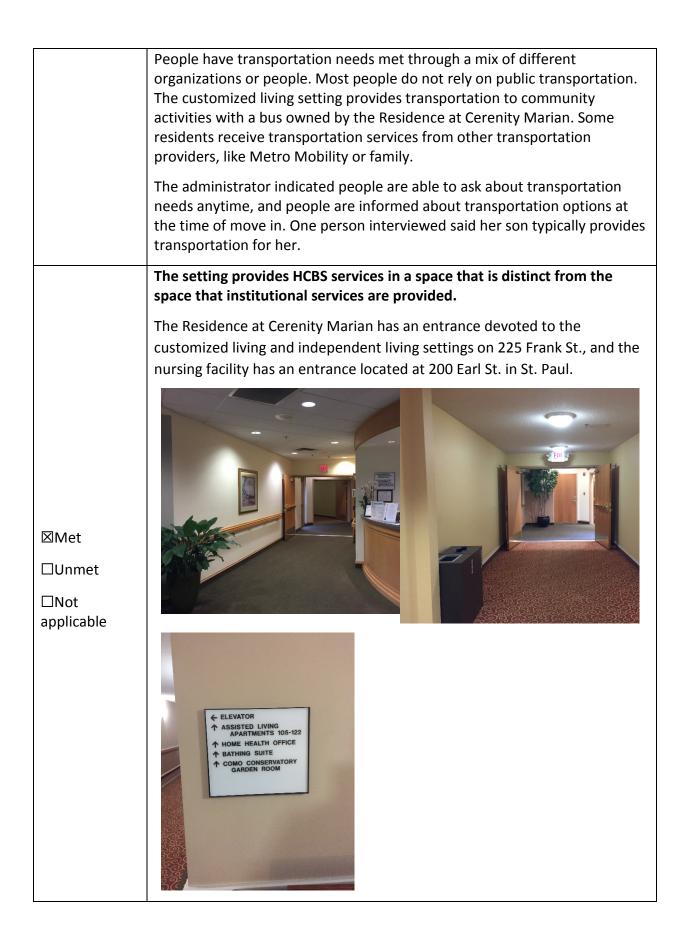
<u>CBSM page for customized living services</u> (http://www.dhs.state.mn.us/id_001787#)

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.

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	The Residence at Cerenity Marian is located on the same campus as The Care Center and Transitional Care building.
applicable	Administratively, there is separation between the nursing facility and the HCBS customized living setting. The settings have separate policies, directors, nursing, activities and resident assistant staff.
⊠Met □Unmet □Not applicable	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 cross- 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.) The Residence at Cerenity Marian assisted living apartments are in a separate wing from care center. During the on-site interview, both the administrator and home health aide staff indicated direct care staff from the nursing facility do not offer back up staffing in the customized living setting. As submitted and indicated by the administrator, all staff are trained on HCBS qualities via a mandatory educational module titled, "HCBS Settings Rule – Residential Provider – v1.0. "
⊠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.)



Community engagement opportunities and experiences

At the customized living setting, people are given opportunities to engage in the greater community one to two times week. People are informed of activities (both on-site and off-site) via a monthly calendar delivered to each person's residence. People also learn about activities via announcements from staff. Some of the community activities include:

- Visits to apple orchards
- Pontoon boat fishing
- Weekly shopping at local grocery or departments stores
- Outings to local restaurants.

People are given the choice to participate in desired activities and with any group of residents. People choose activities via a sign-up book. People also give input on activities through "tenant council" meetings.

People living in the setting also leave the setting on their own with family and friends, and with the support of community transportation options. These trips include:

- Coffee dates and restaurant meals
- Family events
- Faith community activities.

As reported by a monthly calendar, on-site, programmed activities include:

- Worship services
- Bookmobile
- Card games
- Bingo
- Knitting club
- Book club.

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 an HCBS-compliant lease agreement as documentation through the provider attestation process. During the on-site interview, both interviewees indicated they have a signed lease.	
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	
It was observed that each customized living resident has his/her own lockable unit.	
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	
During the on-site visit, one person lived in a single occupancy room and the other person lived in a room with her spouse. The customized living setting does not have shared bedrooms unless shared with a spouse.	
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	
At the time of the on-site interview, both residents' apartments were decorated and furnished to their preferences. All new hires are required to attest they have read and understand people have the "right to furnish and decorate their bedrooms and living units as 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	
People each have their own kitchenettes in their apartments and have access to food in a cafeteria located in the customized living setting. All new hires are required to attest they have read and understand people have the "right to freedom to control their schedule, including food at any time."	
The setting allows people to have visitors at any time.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Observed during the onsite visit was a sign-in sheet for visitors to the customized living. Both people interviewed confirmed they can have visitors at any time.	
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	
At time of move-in, each resident is asked via questionnaire about work and volunteer opportunities. At the time of the on-site interview, there were no people working.	
The setting is physically accessible to the individual.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Observed during the on-site visit was a physical accessible building. The two people interviewed acknowledged the accessibility of the setting.	

The common spaces and living units were observed to be accessible. Living units and bathrooms were observed to have many accessibility features.	
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. Both residents interviewed reported they have opportunities for community engagement.	
The setting supports trips into the wider community for practical purposes (e.g., errands and medical appointments) but also for socialization and community engagement. The administrator reported people are made aware of medical providers at the "get to know you" initial conference and reminded at monthly care conferences.	
The setting supports the person's control of personal resources.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Each resident interviewed indicated they have control over their personal resources. All new hires are required to attest they have read and understand people have the "right to control their personal funds and how to authorize the provider to assist in the management of personal funds."	
The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The setting has HCBS-compliant training practices for staff to inform staff of the privacy rights of the people they serve. The interviewees reported they are ensured privacy at the customized living. Also observed was respectful interaction with people living in the setting.	
The setting ensures people's dignity and respect.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	

Staff are trained to treat people with dignity and respect. Staff are	
trained on the Minnesota Home Care Bill of Rights, and the people also	
are given this document to inform them of this right. Observed was	
respectful interaction with 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	
The right to dignity and respect is addressed in the staff-training	
checklist and stated in the Minnesota Home Care Bill of Rights given to	
each person.	
The setting optimizes individual initiative, autonomy and	Compliant
independence in making life choices, including daily schedule and	
with whom to interact.	
with whom to interact.	
Compliant documentation submitted with attestation	
 ☑ Compliant documentation submitted with attestation ☑ Observation made during on-site visit 	
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 Compliant documentation submitted with attestation Observation made during on-site visit Both people interviewed reported they are able to exercise their individual initiatives, autonomy and independence. When asked about making individual choices, one woman confirmed she has the freedom 	

Pictures of the HCBS setting



The exercise room for customized living residents



The bus used by the setting for community outings

Public comment summary

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

DHS sought public comment for 30 days (Feb. 6-March 7, 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 Feb. 6, 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: 4/1/2019

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.