

# **HCBS Final Rule Evidentiary Package**

# **Gil-Mor Haven**



# **Setting information**

Setting name: Gil-Mor Haven	ID # 30741
Street address: 90 Third St., Morgan, MN 56266	Phone: 507-249-3143
Setting website, if applicable:	Date of site visit: 5/9/2018
Gil-Mor Haven	
https://gilmormanor.avenet.net/	

## 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	Gil-Mor Manor – Nursing Facility

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

#### **General summary**

Gil-Mor Haven is a 16-unit independent living senior housing-with-services apartment complex attached to Gil-Mor Manor Nursing Home and Kraus Community Medical Clinic. It is located in a rural community in southwest Minnesota (estimated population as of 2010 is 896). The setting reported on its attestation that it serves 18 people across multiple payment sources, including HCBS waiver funding and private pay. Gil-Mor Haven provides customized living services to people who are 55 or older. Services include hands-on care, health-related assistances (e.g., delegated nursing tasks, assistance with medication), socialization activities and home management tasks. Additional supports include:

- Wireless nurse call system for 24-hour emergency assistance
- Paid utilities, including electric, gas, water, sewer and air conditioning.
- Weekly light housekeeping included in rent
- Parking for tenants
- Noon meal included in rent
- Large dining room

## **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 <u>customized living services</u>:

(http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\_DYNAMIC\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=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	
	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.	
<ul><li>☑ Met</li><li>☐ Unmet</li><li>☐ Not applicable</li></ul>	Gil-Mor Haven is physically separated from the nursing home (Gil-Mor Manor) through an adjoining hallway. Staff are hired to work directly in the customized living setting or the institutional setting. Administrative director oversee both settings, however, direct care staff and nursing staff receive specific and separate HCBS training for working in Gil-Mor Haven. Each setting has separate staff training and orientation policies and procedures.	
<ul><li>☑Met</li><li>☐Unmet</li><li>☐Not applicable</li></ul>	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.)  According to administration and staff interviews, staff at Gil-Mor Haven are not scheduled to work with people at the nursing home and the customized living setting on the same shift. Staff may be scheduled on different shifts to work at the institutional setting; in emergencies, staff from the institutional setting may support a person in the customized living setting (e.g., health emergency). Staff training documents provided are compliant with HCBS requirement training.	
<ul><li>✓ Met</li><li>☐ Unmet</li><li>☐ Not applicable</li></ul>	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.)	

	Gil-Mor Haven is in the process of securing a vehicle for the setting; currently awaiting Minnesota Department of Transportation to process application. Gil-Mor Haven staff will support people who receive services, as needed, to coordinate and arrange outside transportation. People are able to access the community with the support of local transportation options and family members. The setting is located near a local church and public swimming pool within a residential neighborhood.
⊠Met □Unmet □Not applicable	The setting provides HCBS services in a space that is distinct from the space that institutional services are provided.  Gil-Mor Haven is physically separated from the nursing home (Gil-Mor Manor) through an adjoining hallway. Gil-Mor Haven has a dedicated community center space where people may have meals, socialize, celebrate special events and holidays, and other coordinated activities requested by people who receive services. There is also a large community room and dining hall of the institutional setting where a person may choose to attend church services and bible studies.  Meals are available in the HCBS setting's community room or a person's own independent apartment. Lunch is delivered to the person's independent apartment.

# **Community engagement opportunities and experiences**

Gil-Mor Haven is located in small, rural community in southwest Minnesota within city limits. The setting sits at the edge of town across the street from residential homes, near a local church and community facilities (i.e. public pool and school).

We observed people who receive services coming and going within the setting along with their family members. People who receive services are encouraged to sign in and out in when leaving Gil-Mor in case of an emergency; however, there are no restrictions on when they can leave the setting. Visitors are welcomed any time of day or night. Each person who receives services has a key able to lock and unlock his or her private apartment and the outside doors.

People who live at Gil-Mor Haven recently expressed interest in the following community activities during the summer of 2018:

- Church (off site)
- Local high school sporting events
- Community pool
- Restaurants and shopping
- Farmfest
- Ramsey Park
- Garden party at Donna Plotz's
- Trip to see a local farmer's antique tractor collection
- Tour of surrounding towns after the recent storm
- Dairy Queen
- Participation in Morgan's City and Country Days events and parade

Onsite community activities are planned, typically for groups. A monthly activities calendar is shared with each person who receives services at the beginning of the month. The activity department creates an activity calendar monthly in partnership with people who receive services to incorporate activities in which people would like to participate. Each person is given his or her own copy of the activity calendar. A copy is also posted on the community events board located in the gathering room. Weekly schedules are posted in the customized living's community room. Local community agencies and groups post fliers on the community board about upcoming events and activities.

People who receive services have a monthly "Tenants and Resident Council" meeting to provide a venue to share recommendations with management about activities, recommendations for community changes and sharing information / training on rights.

Gil-Mor Haven supports people who receive services so they may attend other off-site community activities, including coordinating transportation and flexible service delivery to accommodate the person's schedule.

On-site activities mentioned by staff and people who receive services include:

Bible study organized by people who receive services, cards, bingo, puzzles, walks in and outside of building, women's coffee club (organized by people who receive services), chapel, flexible schedule for those who work / would want to work, former nursing home volunteer now lives in customized living and still volunteers to do puzzles (in room), watching sports.

Gil-Mor Haven is physically connected to the local community clinic and nursing home while also having its own entrance. In interviews with people who receive services, one received specialized medical services from a local clinic in a nearby town and maintenance appointments at the attached clinic for the convenience. Specialized services from the nursing home and clinic are available if a person chooses.

#### **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	
Each person has his or her own lease as required by Minn. Stat. 144D for people who receive customized living services.	
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	

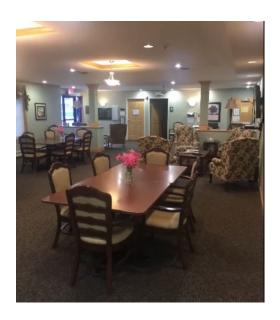
Each person has his or her own key that unlocks both the apartment unit and main outside doors. Outside doors lock at 9 p.m. Witnessed a resident use his or her own key to access the locked unit.	
The setting facilitates that a person, who shares a bedroom, is with a roommate of his or her choice.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
Rooms are only shared if a person chooses.	
The setting provides people with the freedom to furnish and decorate their bedrooms and living units within the lease or residency agreement.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
People are able to freely decorate own living quarters. Saw personal decorations, preferences and choices in how people chose to their décor.	
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	
Three meals and multiple snacks are provided each day. Each customized living apartment unit has a kitchenette, including a refrigerator to store food for later. Breakfast and dinner are served in the nursing home; people may choose to eat in the nursing home or bring their food to the customized living setting to eat in the community room. Lunch is delivered to the person's apartment, which may also be eaten in the customized living's community room. Meals are in an a la carte menu format (made to order).	
The setting allows people to have visitors at any time.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Visitors freely come and go at any time. To accommodate the many friends and family of people who receive services who may have travel	

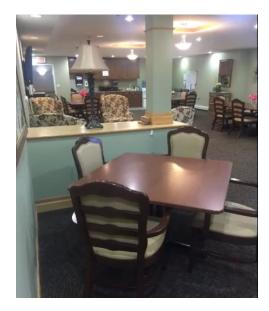
great distances to visit, Gil-Mor Haven has a visitors' room available, including overnight stays, if desired. Visitors may also stay in the person's unit.	
The setting provides opportunities for people to seek employment and work in competitive integrated settings.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The provider offers a flexible schedule of activities, meals and care to accommodate a person's employment, volunteer or civic engagements. A couple of people in the customized living setting volunteer in the community.	
The setting is physically accessible to the individual.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
People are able to access all areas of the setting, including community space and meal areas and may request reasonable accommodations to make modifications to their living units.	
The setting provides people opportunities to access and engage in community life.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Submitted and reviewed policy that indicates people's preferences, interests and strengths are incorporated when developing the monthly calendar and that each person may choose which activities in which to participate or choose not to participate.	
The setting supports the person's control of personal resources.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
The provider complies with Minn. Stat. 144A.479 subd. 5, which outlines the requirements for managing a person's finances.	
The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	

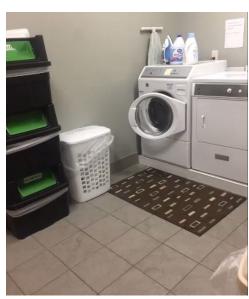
⊠Observation made during on-site visit	
Direct care staff and people who receive services are oriented to dignity, respect and privacy policies and procedures. These policies include the person's right to be treated with dignity and respect, health and personal privacy and freedom from coercion and restraint.	
The setting ensures people's dignity and respect.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Direct care staff and people who receive services are oriented to dignity, respect and privacy policies and procedures. These policies include the person's right to be treated with dignity and respect, health and personal privacy and freedom from coercion and restraint.	
Witnessed staff interacting with people who receive services with dignity and respect, using a person's preferred name and responding to requested preferences.	
The setting ensures people's freedom from coercion and restraint.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Direct care staff and people who receive services are oriented to dignity, respect and privacy policies and procedures. These policies include the person's right to be treated with dignity and respect, health and personal privacy and freedom 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	
Submitted and reviewed policy indicates people who receive services may choose activities based on their preferences, interests and have choice of service providers to meet their assessed needs. People are able to receive services flexibly to accommodate their preferred life and schedule including when they receive services, with whom they interact, and access to the community. During the on-site assessment we observed people coming and going freely, without barriers.	

The setting develops an activities calendar that incorporate the preferences and interests of people who receive services on a regular and ad hoc basis. The activities uses the customized living setting community-based spaces not shared with the nursing home.

# **Pictures of the HCBS setting**







## **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 <u>Feb. 6, 2019, eList announcement</u>
- 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.