

HCBS Final Rule Evidentiary Package

Maplewood Court



Setting information

Setting name: Maplewood Court	ID #209
Street address: 310 Seventh St. NE, Fulda, MN 56131	Phone: 507-425-2571
Setting website, if applicable: Maplewood Court	Date of site visit: 8/21/2018
(https://maplelawn.org/maplewood-court-assisted-living/)	

Waiver service type

Waiver service	Service type:
□ Alternative Care (AC) ⊠ Elderly Waiver (EW) □ Brain Injury (BI) □ Community Access for Dischility Inclusion (CADI)	Customized Living
 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		Name of Institution
Public or Private Institution	Name of Institution	Maple Lawn Nursing Home

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

General summary

Maplewood Court is located in Fulda, a rural city in Murray County, about 45 miles south of Marshall. The population was estimated at 1,318 in 2010. Maplewood Court is located in a residential neighborhood and bordered by farm fields. It takes approximately 3 minutes to drive to the main business district in town.

Maplewood Court is a customized living setting with 15 apartment units. At the time of the site visit, the setting served two people supported by a home and community-based waivers and 12 people supported by other funding sources.

The customized living setting is located on a campus that includes Maple Lawn Nursing Home, a skilled nursing facility that provides inpatient and outpatient nursing care and rehabilitation services. Maple Lawn Senior Care Inc., a nonprofit corporation, owns and operates the campus.

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 lives 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>, 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:

Community Based Services Manual customized living service requirements page

(http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectio nMethod=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.

Determination	Summary
	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.
⊠Met □Unmet □Not applicable	Maplewood Court and Maple Lawn Nursing Home share administrative oversight, but have separate budgets, day-to-day operations and staffing. Maplewood Court has a dedicated RN and a dedicated housing manager who serves as day-to-day operations manager. It has dedicated full-time home health aides who provide services to residents. Maplewood Court has a separate address and entrance apart from the nursing facility. Food is prepared in the nursing facility kitchen and served in a dedicated dining room. Maplewood Court has a dedicated activity program and activities and events for residents.
⊠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. Administration confirmed that all staff that work in the customized living setting are trained specifically for home and community-based support in a manner consistent with the HCBS settings regulations. Administration confirmed that nursing facility staff are not scheduled to work with people at the customized living setting on the same shift.
⊠ 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.

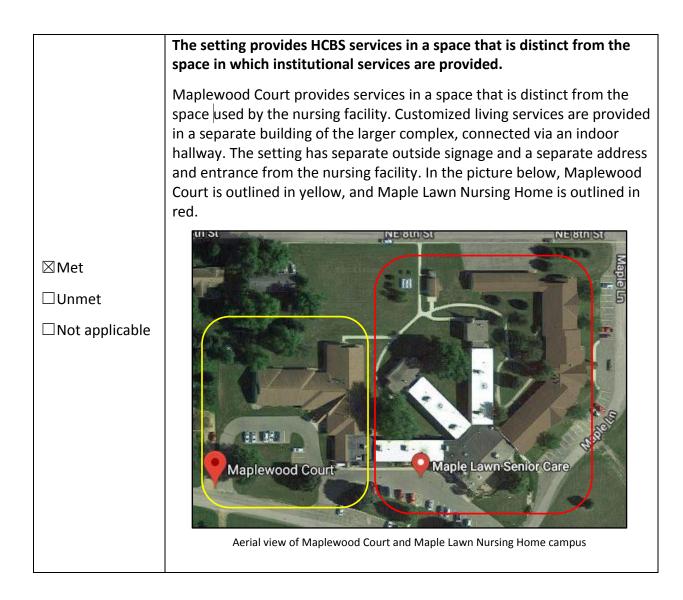
Maplewood Court is located in a rural area with limited public transportation. The campus has an accessible van that residents use for local transportation needs. Residents use Community Transit through United Community Action, a private nonprofit organization that provides regional transit service in Murray County and surrounding areas,

including Fulda. Some residents enrolled in managed care services may utilize BlueRide services to travel to medical appointments covered under waiver programs. Private regional transportation services, such as Peoples Express, are also used for routine or medical



Transportation service announcement posted on bulletin board

appointments in the surrounding area. People at the setting also use community volunteer drivers, family transports and their own vehicles. Transportation options are posted on bulletin boards and provided in the resident handbook.



Community engagement opportunities and experiences

Community engagement is supported by setting staff through on-site activities and also more informally by family and friends from the greater community. Administration staff reported that they survey residents to obtain their personal preferences, and that they support the residents' choice of activities and schedules. Activities are tailored with feedback from people who live at the setting through resident meetings, periodic surveys, discussions with people and by obtaining resident preferences during admission and at regular health assessments.

People are notified of community activities through a calendar of community events, flyers and staff reminders. These may include:

- Theater events
- Holiday activities
- Picnics and community events
- Golf cart rides
- Seasonal tours of area
- Senior Center activities

People living at the setting also have the option to go out on their own, with family and friends, and by using regional public and private transit and volunteer drivers. These trips include:



Community bulletin board with activity calendars and announcements

- Family events
- Sightseeing
- Church services and events
- General errands and shopping
- Meals in town

The setting provides an activity program for people to participate in at the setting, which also includes activities taking place in the nursing facility. People are informed of on-site activities through bulletin board announcements and staff announcements and reminders.

Examples of on-site activities include exercise and fitness programs, informational talks, live music performances, monthly birthday parties, crafts, board games, social hours such as coffee socials, holiday parties and faith activities.

People living at the setting have the option to choose not to participate at any time. Per staff and residents, they are offered alternative times or activities or are free to participate in activities of their choosing.

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 an HCBS-compliant lease agreement as documentation through the provider-attestation process.	
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. One resident stated that she doesn't lock the door unless she goes out for extended periods.	

The setting facilitates that a person, who shares a bedroom, is wit roommate of his or her choice.	h a Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff reported that people in the setting do not share rooms unless they share with a spouse, partner or other person of their choice.	
The setting provides people with the freedom to furnish and deco their bedroom and living unit within the lease or residency agreement.	rate Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The residency agreement allows people in the setting to decorate and personalize their living units. Living units were observed during the site visit and were decorated according to the residents' tastes and preferences, including family pictures and memorabilia, crafts and decorative items and religious iconography. We observed that many people put up personalized decorations in the entrance to their living units.	

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	
Staff and residents confirmed that people living at the setting have the freedom and support to control their own schedules, specifically waking up and going to bed, coming and going to and from the setting, and eating when they would like. Each living unit at the setting is equipped with a full kitchen. Residents reported that they store food in their pantry and refrigerator. One resident stated that she showers on her own when she chooses. Another resident said that she keeps food and snacks in her apartment to share with visitors. Full kitchen with stove, refrigerator and storage cupboards	
The setting allows people to have visitors at any time.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff confirmed that people living at the setting may have visitors at any time. During the site visit, visitors were observed coming and going to and from the setting. One resident stated that her family visits frequently "whenever she wants."	

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	
Staff stated that the setting does not currently have any residents who choose to work. Staff confirmed that they would accommodate residents who wish to work by coordinating transportation, helping the person get ready for work and providing a flexible service schedule. Staff reported that they would save meals or provide a packed lunch depending on the resident's needs.	

The setting is physically accessible to the individual. Compliant Compliant documentation submitted with attestation ⊠Observation made during on-site visit Common spaces and living units were observed to be accessible to people living at the setting. People who live at the setting indicated all living areas and common areas were accessible to them. Hallways are equipped with handrails. Staff indicated that they accommodate people living at the setting to provide additional accessibility accommodations to living units, e.g., grab bars in Accessibility accommodations in bathroom of living unit bathrooms and living areas.

Hallway with handrails

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 supports opportunities to access and engage in community life. Practical activities, such as errands and medical appointments are supported, as well as personal engagement, such as social and family outings, faith-based activities and meals in the community.	
The staff provide information and resources on transportation options to access the greater community. Staff assist people to arrange transportation as needed and many people arrange their own transportation.	
Activities are tailored with feedback from people who live at the setting, through resident meetings, discussions with people and by obtaining resident preferences during admission and at regular health assessments.	
Administration confirmed that people living in the setting are informed of their right to choose any medical provider through the admission process and the Minnesota Home Care Bill of Rights. Staff confirmed that there are no restrictions for people wishing to switch to a new provider.	
The setting supports the person's control of personal resources.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The setting does not provide money-management services. Staff and people living in the setting confirmed that residents have full control over their personal finances.	
The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff are trained to respect the privacy of people living at the setting through HCBS settings rule training and the Minnesota Home Care Bill of Rights. During the site visit, staff were observed knocking on people's living unit doors to obtain permission to enter.	

The setting ensures people's dignity and respect.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff are trained to ensure the dignity and respect of people living at the setting through HCBS settings rule training and the Minnesota Home Care Bill of Rights. During the site visit, staff were observed addressing people by their chosen names, and people living at the setting were dressed in clothing of their choosing.	
The setting ensures people's freedom from coercion and restraint.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Administration confirmed staff are trained on the Minnesota Home Care Bill of Rights and the Minnesota Vulnerable Adults Act.	
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	
People in the setting were observed to lead their own lives and plan their own daily schedules and arranging their days as they would like. Staff confirmed that customized living services accommodate the schedules of the people served in this setting.	

Pictures of the HCBS setting



Community area with TV and library



Resident mailboxes



Guest room available to residents and visitors

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.