

HCBS Final Rule Evidentiary Package

The Gardens at St. Gertrude's



Setting information

ID # 30475
Phone: 952-233-4200
Date of site visit: 5/10/2018

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	St. Francis Regional Medical
Institution		Center

General summary

The Gardens at St. Gertrude's is located in a residential area in Shakopee, MN. Shakopee is a southwest suburb of the Twin Cities and is located in Scott County. As of the 2010 census, Shakopee had a population of 37,076. The Gardens at St .Gertrude's is affiliated with the non-profit Benedictine Health System. The Benedictine Health System is sponsored by the Benedictine Sisters of St. Scholastica Monastery, one of the largest Catholic senior care organizations in the United States. They have 40 senior communities in Minnesota and neighboring states.

The customized living setting is located on a continuum of services senior campus. In addition to customized living, the campus offers short- and long-term rehabilitation services, a special care unit for rehabilitation for those with cognitive support needs, long-term care, end-of-life care, therapy outpatient services and home therapy.

The Gardens at St. Gertrude's was serving 38 people at the time of the on-site visit, with 20 people using private payment and 18 people using 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>, <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:

<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	
	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.	
⊠Met □Unmet □Not applicable	St. Gertrude's, as a campus, has one administrator. It has a housing director/administrator who oversees just the customized living setting. A wellness director oversees all of the wellness coordinators. There are two wellness coordinators for the nursing facility and two separate wellness coordinators for the customized living side. The customized living setting also has its own registered nurses, separate from the nursing facility nurses.	
⊠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.) Per the attestation and interviews with staff, staff from the nursing facility do not provide coverage for services in the customized living setting.	
⊠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 who live at this setting use many different means of transportation. These include Metro Mobility, the public bus system, community volunteer drivers, family and Smartlink. Smartlink, a local public transit option, transports people within the Shakopee area. People are told about these options when they move in and whenever they	



Community engagement opportunities and experiences

This settings offers many opportunities for people to stay engaged in their community and have interesting and meaningful experiences. When people move in, they are asked about their interests and activities of interest. Activity options also are discussed at the monthly resident councils meetings to get input. People are given monthly calendars so they are aware of the activities offered. In addition, they are posted around the building. Staff also remind people of upcoming activities. People living in the customized living have the option to attend activities with the nursing facility if they wish and vice versa. Activity calendars are posted at both sites.

Some examples of community experiences include:

- Shopping at various businesses
- Walking group
- Fishing
- Senior luncheons
- Visits to the local VFW
- Musicals
- Farmers markets
- Senior Center visits
- Mill City Museum
- Twins games
- State Fair.

Some people are still driving and independently accessing their community, shopping, visiting friends and going to their own appointments. People often go on walks, since there is shopping very close to the setting.

Family members take people to family functions, out to eat, shopping and movies and other entertainment.

On-site activities include religious services, crafts, bingo, exercise, various games and music.

The people are involved in giving back to the community by doing service projects such as Operation Christmas Child. In addition, several groups of students, including kindergarteners and 9th graders, come to the site, which the people enjoy immensely.

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	
Setting submitted compliant documentation with attestation and people interviewed said they were aware that they had a 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	
Locks were observed on the doors. In addition, when asked if they felt staff respected their privacy, people said they felt they had privacy.	
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	
Setting submitted compliant documentation. People interviewed did not have roommates.	
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	

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People were interviewed in their apartments. The apartmer furnished with personal belongings. Each apartment seeme	
the person, as far as decorations and furnishings.	
	Compliant
The setting provides people the freedom and	Compliant
support to control their daily schedules including access to food at any time.	
Exercise 1 and	
Compliant documentation submitted with	
attestation	
⊠Observation made during on-site visit	
When asked, people said they chose when they	
went to bed and woke up. They also felt they were able to c	choose what
things they wanted to do and also that they could decline an	ny activities
they were not interested in. In addition to ordering their reg	-
from a menu, people said they were able to access food at a	-
and had kitchens to store and prepare food in their apartme	
addition, there is snack cart. Snacks (e.g., soup) are available	-
Coborn grocery store delivers groceries to the setting for th prefer that.	
The setting allows people to have visitors at any time.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
People reported they could have visitors at any time. Family	y members
People reported they could have visitors at any time. Family were observed visiting.	y members
were observed visiting.	
were observed visiting. The setting provides opportunities for people to seek emp	
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No barriers to accessibility were observed. Apartments were accessible, including roll-in showers and grab bars in the bathrooms.	Compliant
community life.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Services (e.g., home care and hospice) are available at the setting. However, many people use the Park Nicollet or Allina providers housed in adjacent buildings. People are informed of their choices when they move in and also when a request is made for a new service. One person interviewed said it was "Great to have everything so close by. Especially in the winter when I am afraid of falling." The hospital and clinic can be accessed without going outside through connecting hallways.	
The setting supports the person's control of personal resources.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
People interviewed did not receive money management through the setting. They either managed their own money or had family members or someone with power of attorney manage it.	
The setting ensures people's right to privacy.	Compliant
Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff are trained on the preservation of privacy. Staff were observed knocking before entering someone's apartment.	
The setting ensures people's dignity and respect.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	

Respectful interactions were observed between people and staff. This included calling people by their preferred names and stopping to listen carefully to a person who was having a hard time getting their message out.	
 The setting ensures people's freedom from coercion and restraint. ☑ Compliant documentation submitted with attestation ☑ Observation made during on-site visit 	Compliant
Fully compliant documents were submitted to show proper training is given to staff on the Vulnerable Adults Act, as well as the Bill of Rights. Per policy, no restraints are used and coercion is prohibited.	
 The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact. Compliant documentation submitted with attestation 	Compliant
☑ Observation made during on-site visit While interviewing people, each question that was asked about choices was answered in a way that indicated they felt they had control of their schedules, friends and interests.	

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 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.