

HCBS Final Rule Evidentiary Package

Thorne Crest Senior Living Community



Setting information

Setting name: Thorne Crest	ID # 30418
Street address: 1201 Garfield Avenue	Phone: 507-373-2311
Albert Lea, MN 56007	
Setting website, if applicable:	Date of site visit: 8/30/2018
Thorne Crest Senior Living	
(http://thornecrest.net/living-options/)	

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	Thorne Crest Health Care Center

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

General summary

Thorne Crest is located in a residential area in Albert Lea, MN. Albert Lea is a city in the southeastern part of the state. The last census in Albert Lea was done in 2010 and lists the population as 18,016. Thorne Crest Senior Living Community is a continuum of care campus. It offers independent living, customized living (assisted living), memory care, skilled nursing/long term care and rehabilitation therapy.

There are 31 customized living apartments, and nine units are used to provide memory care services. There currently are seven people who use 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.

Characteristics of a HCB3 setting and not an institutional setting.		
Determination	Summary	
☑Met ☐Unmet ☐Not applicable	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal. Thorne Crest has one administrator who supervises the campus. However, it has separate directors of nursing for the customized living and the nursing facility. The settings are operated separately.	
⊠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 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.) Thorne Crest currently does not have staff members who work regularly in both the nursing facility and the customized living. However, if that happened and the people were to do so, they would receive a separate training and would not be scheduled to work in both places at the same time.	
☑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.)	

The people who live at Thorne Crest have many different transportation options. The majority of the transportation is done via the two buses Thorne Crest owns with lifts or with the Thorne Crest van. Sometimes

medical appointments are done by a company called AMV. There is also a public transportation option called SMART transit, which is an on-demand ride service that stays within Albert Lea. Some people have also used taxis, and, occasionally, volunteer



drivers from a seniors' program transport people. People are given these options at intake and when they request rides. Some set up their own transportation, and others ask staff for assistance. One person said, "the drivers here are so nice!"

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

⊠Met

□Unmet

□Not applicable







The setting has separate entrances for the independent/customized living and the nursing facility. The living and activity spaces are separate. The two buildings are connected by a door.

Community engagement opportunities and experiences

Thorne Crest offers a variety of activities for people to participate in on a regular basis. Thorne Crest receives ideas and feedback from people during the monthly resident council meetings on activities they would like to see offered. The staff have had people fill out surveys, and, the wellness director meets with people annually about what activities they would like in relation to wellness. People are informed of their options via a newsletter they get every other day, and a television screens show options as well (see photo below). Thorne Crest has bulletin boards with information, and it also has a dedicated television channel people can view to see what activities are going on. Some examples of community activities that have been offered include:

• The local tractor parade

Trips to the new ice cream shop down the street

Pelican Breeze boat ride

- Shopping trips
- Trips to restaurants
- Trips to nearby communities
- Fishing
- Christmas light tours
- Plays
- "Wind down Wednesday" in town
- Twins games
- Coffee/café trips.

People often go out on their own or with family to take walks, go shopping, attend religious services, go to hair appointments, attend family gatherings or participate in holiday events.

The setting is right across from an elementary school, and people interviewed said they loved looking out the windows at the kids playing. The lounge area has a view of the playground. People also stated they liked to sit in the "sunroom" and garden area to visit.

Thorne Crest also hosts a car show that the entire community can attend.

Thorne Crest also offer activities within the community, such as bingo, crafts, religious services, dice and card games, Wii games and coffee time. In addition, the setting has a full-size saltwater pool and a hot tub on site, as well as a fitness center for strength training.



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. The people interviewed said they knew 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	
People were observed using keys to get into their apartments. During the interview, the administrator indicated that even the people in the memory care unit have locks on their doors. Most do not carry a key, but they can lock their doors for privacy while in their rooms or when they leave to protect their belongings. One person in the memory unit does prefer to keep her own key and uses it.	
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	
This site does not have people sharing bedrooms except for married couples who choose to do so.	
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

Observed each person had his/her own personal decorations outside his/her door to reflect his/her personality. In addition, while visiting with people in the apartments, personal items and décor were observed.



The setting provides people the freedom and support to control their daily schedules including access to food at any time.

- ⊠Compliant documentation submitted with attestation
- ⊠Observation made during on-site visit

People interviewed indicated they felt they had control over their schedules. They have several options for food outside of meals times. They can store and prepare food in their units, or they can ask a staff member at any time and receive a snack. They can also visit the independent living dining room and order food or grab popcorn from the machine in the lobby. They also have a little store where they can buy food.





The setting allows people to have visitors at any time.

- ⊠ Compliant documentation submitted with attestation
- ⊠Observation made during on-site visit

Visitors were observed coming and going from the setting. People interviewed stated they could have visitors at any time.

Compliant

Compliant

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	
Currently, there are no people who are employed, but staff said they would willingly accommodate anyone who needed support and flexibility to work.	
The setting is physically accessible to the individual.	Compliant
⊠Observation made during on-site visit	
No barriers to accessibility were observed, and people interviewed said they felt their environment was accessible. Bathrooms were accessible, and one of the common areas had a machine to magnify print for people with low vision.	
The setting provides people opportunities to access and engage in community life.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
There are many services available on site, including vision and hearing care, podiatry, blood draws and OT and PT offered through rehab care. People are given choices and brochures, and they are offered transportation if they choose to see community providers. The people interviewed both used their own doctors versus the on-site doctors.	
The setting supports the person's control of personal resources.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
None of the people interviewed had their money managed by the setting.	

The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff were observed knocking before entering people's apartments, and the people interviewed said staff always respect their privacy.	
The setting ensures people's dignity and respect.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
The setting provides people with the Home Care Bill of Rights which states, "The right to be treated with courtesy and respect, and to have the client's property treated with respect."	
The setting ensures people's freedom from coercion and restraint.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
The setting's policy enforces the Vulnerable Adult Act and Maltreatment of Minors 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	
When interviewed, people said they felt they had the freedom to choose what they did each day and on what timeline.	
One person said, "Of course I would rather be at home, but since I can't be, I couldn't be in a better place. They make it feel like home." The other person said he was happy and had "no complaints."	

Pictures of the HCBS setting

Fish tank in common area

Lounge area across from playground





Lobby The solarium

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.