

HCBS Final Rule Evidentiary Package

Centennial Villa Congregate Apartments



Setting information

Setting name: Centennial Villa Congregate Apartments	ID #: 20074
Street address: 600 Park Street E., Annandale, MN	Phone: 320-274-5031
56302	
Setting website, if applicable:	Date of site visit: 6/7/2018
Centennial Villa Congregate Apartments	
(http://www.annandalecarecenter.org)	

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	Annandale Care Center
Institution		

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

General summary

Centennial Villa Congregate Apartments is located in the town of Annandale, in Wright County, 60 miles northwest of Minneapolis, on Highway 55. Annandale had a population of 3,315 in 2016.

Centennial Villa Congregate Apartments is an independent living and customized living setting with 22 units. At the time of the provider attestation, the setting served 8 people supported by a home and community based waiver program, 7 utilizing the Elder Waiver and one the CADI waiver.

The customized living setting is located on a continuum of care campus that includes two other separately registered customized living settings: Centennial Villa Assisted Living and Centennial Villa Assisted Living Memory Care. These two settings will be reviewed in separate Evidentiary Packages. The continuum of care campus also includes the Annandale Care Center (a nursing facility), and the Annandale Health & Wellness Center (a fitness

center open to the general public). All aspects of the campus are owned and operated by Annandale Health & Community Services, a non-profit corporation.

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 Customized Living Component Service Definitions, 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:

CBSM page on Customized Living

(http://www.dhs.state.mn.us/main/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	
⊠Met □Unmet	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.	
□ Not applicable	Centennial Villa Congregate Apartments, the customized living setting, has separate administrative leaders from the nursing facility, including a housing manager and a nursing services manager. However, the customized living setting leaders report to an overall administrator at Annandale Health & Community Services. The setting is financially connected to Annandale Health & Community Services, but it manages decisions about financial matters at the setting level as well.	
⊠Met	To the extent any facility staff are assigned occasionally or on a limited	
□Unmet	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	
☐Not applicable	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.)	
	All staff that work in the customized living setting receive HCBS settings rule training and other relevant training and orientation for the setting. Individual staff occasionally work shifts in the Annandale Care Center and the customized living setting. Employees work a full shift in one environment or the other, and do not split shifts. Workers in each setting are treated like separate employees. The nursing facility and the HCBS setting have separate position descriptions and training protocols. Before a staff works in either setting they are fully trained.	
⊠Met	Participants in the setting in question do not have to rely primarily on	
□Unmet	transportation or other services provided by the facility setting, to the exclusion of other options; (Describe the proximity to avenues of	
□Not applicable	available public transportation or an explanation of how transportation is	
	provided where public transportation is limited.)	

	People living in this customized living setting have several options for transportation to support community engagement and inclusion, including: Trailblazer (County Transit), volunteer drivers through a local nonprofit, sharing rides with others who live in the setting, rides from family and friends, and use of their own cars.
⊠Met	The setting provides HCBS services in a space that is distinct from the
□Unmet	space that institutional services are provided.
□Not applicable	The customized living setting is very separate from the other facilities on the campus. It has its own signage, entrance, nearby parking spots, and its entrance is on a separate side of the campus then the other facilities. The customized living building is also very different in look and style from the adjacent nursing facility, easily distinguishing itself as a separate housing facility.

Community engagement opportunities and experiences

Community engagement is supported by the setting staff but also by family and friends from the wider community. People served in the setting provide input through interest assessment forms and direct communication with staff.

The setting supports regular outings in the community. Here are some examples:

- Public parks
- Restaurants
- Community events and festivals
- Public school events and sports competitions
- Scenic drives

People living in the setting also get out on their own, with their own cars, with family and friends, and with the support of county transit and volunteer drivers. These trips include:

- Visiting the public library
- Coffee dates and restaurant meals
- Family events
- Sports events
- Faith community activities
- General errands

The setting also supports a daily activity calendar that people can participate in as they like. People living in the setting learn about activities through a monthly calendar, bulletin board displays, and staff announcements and reminders. On-site, programmed activities include:

chapel services, a wellness and fitness center, which is also open to the general public, kitchen and baking activities, and games of various kinds.

People living in the setting also plan and participate in self-led activities including card playing, bible studies, and social get-togethers with other people living in the building or guests from the wider community.

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 a lease agreement as documentation through the provider attestation process. The administrator provided a move-in packet during the site visit that included a lease agreement.	
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. This setting also includes independent senior housing. Some people in the setting require very few services. The entrance to the setting was like a standard apartment building with a directory and system to alert people living in the setting that a guest is visiting.	

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	
People living in this setting do not share rooms unless they share a room with a spouse, partner, or other person of their choice.	
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	
The lease allows people in the setting to decorate and personalize their living units. Living units were observed during the site visit and were decorated as people 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	
The administrator confirmed during the setting site visit that people living in the setting can control their daily schedules, in terms of waking, going to bed, and coming and going and eating as they would like. A direct care staff described a person living in the setting who has a weekly volunteer commitment. The care needs and food options for this person were changed to accommodate the person's commitment.	
The setting allows people to have visitors at any time.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
The administrator confirmed that people living in the setting can have visitors at any time. She also explained that many people living in the setting leave to have overnight trips and visits with family and friends. Visitors were observed coming into the setting during the site visit. The setting likely has more visitors because of the fitness center on the campus that is open to the general public.	

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 administrator and direct care staff were not aware of any people in the setting that were employed at this time. However, they were aware of people who have weekly commitments, such as volunteering. The setting staff accommodate services and food offerings to accommodate the schedules of people living in the setting.	
The setting is physically accessible to the individual.	Compliant
□ Compliant documentation submitted with attestation	
The common spaces and living units were observed to be accessible. Living units and bathrooms were observed to have many accessibility features. The administrator confirmed that they work with people living in the setting if they need a modification to their living units, as needed.	
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 Community Engagement Section. The setting supports trips into the wider community for practical purposes like errands and medical appointments, but also for socialization and community engagement, including community events, faith community events, sports, and meals. The staff are aware of transportation providers in their area and work with people in the setting to arrange for rides, as needed. The setting also offers a varied activity calendar with activities tailored to the interests of people living in the setting.	
The administrator confirmed that people living in the setting are informed that they can choose any medical provider that they like.	

The setting supports the person's control of personal resources.	Compliant
□ Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
The setting has a compliant policy related to assisting people in the setting with their personal resources. People living in the setting are properly informed of this right.	
The setting ensures people's right to privacy.	Compliant
⊠Compliant documentation submitted with attestation	
⊠Observation made during on-site visit	
Staff working in the setting are trained to respect the privacy of people living in the setting. People's living units are respected as private spaces. Staff only gain access to the living units at the permission of the person living in the setting, or in cases of emergency. The setting conveys the following rights to people living in the setting in the "Resident Handbook":	
 Privacy when you have visitors. Privacy during personal cares Privacy for phone calls, texts, email or other personal communications Privacy of your personal information including financial, service, health and medical. 	
The setting ensures people's dignity and respect.	Compliant
□ Compliant documentation submitted with attestation	
⊠ Observation made during on-site visit	
During the site visit, staff were observed treating people living in the setting with respect. One person living in the setting commented in passing that the staff at the setting are "wonderful."	
The setting ensures people's freedom from coercion and restraint.	Compliant
⊠Compliant documentation submitted with attestation	
☐ Observation made during on-site visit	
Staff are trained on the Minnesota Home Care Bill of Rights and the Minnesota Vulnerable Adults Act. People are also given a copy of this document that informs them of their right to be free 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

People in the setting lead their own lives and plan their own daily schedules, coming and going as desired, and arranging their days as they would like. Customized living services accommodate the schedules of the people served in this setting.

Pictures of the HCBS setting



Common area for planned and person-led activity



Setting kitchen, with snacks available through the day



Setting bulletin board with on-site activity calendar and information for the wider community



Accessible shower in living unit

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.