

December 24, 2019

Maple View Fargo

The ND State Settings Review Committee met on November 25, 2019 and determined that Maple View in Fargo Adult Residential met all Settings Rule Compliance terms.

The Department will continue monitoring to ensure ongoing compliance.

Thank you for your cooperation and let us know if you have any questions.

I am attaching the Settings Summary which will be posted on the Department of Human Services website.

Shirley Fender, RN

**HCBS** Program Administrator

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HCBS Settings Requirements	Review of Facility
Facility is selected by the individual from among settings	The facility is open for tours prior to a decision to reside in
options including non-disability specific settings and an	the facility. There are other options for residential services in the area to choose from.
option for a private unit in a residential setting.	In the area to choose from.
	The facility is ADA accessible.
	Maple View Fargo has an Admission Agreement that does explain Arbitration.
	There are cameras located in all common areas-the great room, the two sunrooms and the hallways.
	<ul> <li>Supporting Documentation:</li> <li>Admission Agreement</li> <li>Maple View Fargo Marketing pages</li> <li>Maple View Fargo Resident and Family Manual</li> <li>Maple View Fargo Resident Rights</li> <li>Maple View Fargo has private units for all the consumers.</li> <li>Site Visit and Observation by state staff summary</li> <li>Survey with consumer and legal decision maker</li> </ul>
Provides opportunities to seek employment and work in	All consumers at Maple View Fargo are currently retired.
competitive integrated settings, engage in community life,	
and control personal resources.	Consumers can continue employment or volunteering
	based on their person-centered goals.
	The consumer, power of attorney, or family control finances, the consumer can keep money in their possession if they desire.  There is an option to open a resident account so they can
	obtain cash when needed.
	Engaging in community life is addressed below.
	Supporting Documentation:  Resident and Family Manual Survey with consumer and legal decision maker
Is integrated in and supports access to the greater community	Activity Calendars are posted to inform consumer and family of activities within the facility.
Community	Tarring or additional vision and radings
	The family/natural supports are encouraged to take the consumer out into the broader community. This was noted at the site visit.

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The facility will coordinate transportation if any resident would ask.

The consumer can utilize the internet or paper to determine activities outside of the facility.

A Resident and Family newsletter is published monthly and is available at the reception desk.

A "Life History Form" is filled out at Admission to determine the likes and dislikes of the consumer and to develop a "Care Card" or one-page sheet to assist staff in the individualized care of the consumer.

Monthly Activity Participation logs and outing information are kept for residents and reviewed at quarterly care conferences to determine community integration needs and restrictions.

The person-centered plan of care is individualized for each consumer.

Everyone accesses the building and units the same way.

The facility has security doors at all exits. Visitors are welcome at any time and allowed to enter by pressing the doorbell. There is no set visiting hours. Anyone may ring the front doorbell at any time. During the daylight hours the courtyard door can be unlocked for residents to have access to the courtyard when they want. There is a code on the outside door that the resident can used to get back into the building or they can ring the doorbell. After 10:00PM the main doors of the facility are locked, and access is given by ringing the doorbell by the door outside of the building.

The outside enclosed courtyard has walking paths and table and chairs. The courtyard is unlocked but is locked in the winter and bad weather to ensure the safety of the consumer. The consumer can request access to the courtyard in the winter or bad weather, by asking staff who will ensure that the consumer is dressed properly.

There is a check in and out procedure for security and fire safety reasons.

#### **Supporting Documentation:**

Resident and Family Manual

- Calendar of Events
- Resident Activity Participation Log
- Observation/Outing Information Log
- Life History Form
- Care Card
- Person Centered Plan of Care Worksheet
- Survey with consumer and legal decision maker
- Site Visit and Observation by state staff

# Optimizes individual initiative, autonomy, and independence in making life choices

There are no visiting hours and guests can stay overnight.

There is a voluntary check in and out process to ensure safety and accountability in an emergency or fire.

The Resident Rights states the resident has the right to choose who gives them care, how they are approached, choose all aspects of their care and right to determine schedule for waking, bathing, eating and activity participation. It also states that it is their right to be treated with dignity and respect. The interview with the consumer's legal decision maker indicated knowledge of these rights.

In the Resident and Family Manual it does state that food is available at any time in the kitchen during hours of operation of kitchen staff and after hours a variety of snack/food items are available for residents to pick from on a cart. The consumer also has access to a fridge or microwave in this area. If desired the consumer may have a fridge in their apartment unit.

There is assigned seating, no disposable plates and silverware. No protective coverings used unless preferred or requested by the resident. The resident may eat in private if they chose.

The laundry is locked but the consumer can request to use the laundry room if they would choose to do their own laundry.

#### **Supporting Documentation:**

- Resident Family Manual
- Admission Agreement
- Site Visit and Observation by state staff
- Survey with consumer and legal decision maker

Ensures an individual's rights of privacy, respect, and freedom from coercion and restraint

The consumers have private apartments with lockable doors and a private bathroom.

Consumers can furnish and decorate their unit as desired. Observation reflected consumer's own personal tastes in decorating their private living quarters.

Several areas were available to provide private visiting areas.

Resident and Family Manual states consumers always have access to facility phones. A cordless phone is also available and may be used in privacy, or they can use their own cell phones. And staff is available to assist residents in making calls when requested. Telephone services and cable TV are available free of charge in the common's areas of the building. Some residents have a TV in their room and there are cable hook ups in the rooms.

Wi-Fi is available and free of charge throughout the facility and the password is available at the main office.

Recommend business mail be re-directed to a responsible person. Mail is hand delivered to the resident.

Staff training includes Resident Rights and topics of dignity and respect. Staff training includes staff knocking on the resident's door before entering the room.

The resident handbook reflects care and medications are given in private. The door to the medication and unit office will remain closed and sign posted to note this door is to be closed.

### **Supporting Documentation:**

- Resident and Family Manual
- Resident Rights
- Admission Agreement
- Site Visit and Observation by state staff
- Staff Training Folder
- Survey with consumer and legal decision maker

# Facilitates individual choice regarding services and supports and who provides them

The Resident's Rights state residents have the right to choose person providing cares.

The facility provides the consumer information regarding

filing a grievance.

There is a chapel and fee for service salon, in the facility and a list of other churches and services are given to the consumer.

Consumer medical care is provided per own preference.

#### **Supporting Documentation:**

- Resident and Family Manual
- Resident Rights
- Admission Agreement
- Site Visit and Observation by state employees
- Staff Training Folder
- Survey with consumer and legal representative

Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS

All consumers are treated the same. In their Mission Statement is states "our specialized team is dedicated to serve by promoting positive teamwork with respect and compassions for all."

The consumer can access the broader community for services if desired.

#### **Supporting Documentation:**

- Resident and Family Manual
- Resident Rights
- Admission Agreement
- Site Visit and Observation by state staff
- Survey with consumer and legal representative

#### Person-centered service plan

Maple View Fargo has developed a care plan to include behaviors, restrictions, and methods that have been tried before. Clients goals, values, beliefs, and how the client would like to live are reviewed and goals established.

Community Integration and social supports are reviewed to determine options available for the client. Level of family support and involvement is reviewed. Care planning includes health care needs, nutrition needs, and mental health needs. Employment, volunteering options, behavior, cognitive, and safety are reviewed at the quarterly meetings.

The monthly participation logs are reviewed to ensure community integration and activities.

#### **Supporting Documentation:**

- Person Centered Care Plan Review by State staff
- Participation Log review
- · Care Card review
- Maple View Care Plan review
- HCBS Care Plan review

# Additional Requirement for HCBS Residential Settings—Any modifications to these must be supported by a specific assessed need and justified in the person-centered service plan.

The individual has a lease or other legally enforceable agreement providing similar protections

The consumer or legal decision maker signs an admission agreement when the decision has been made to move into the facility. The admission agreement discusses accommodations, access to your room, resident rights and responsibilities, termination of agreement, property of community, property of resident, incompetency, waiver of one breach not-a-waiver of any other, assignment, severability and arbitration. The agreement follows ND landlord tenant laws.

### **Supporting Documentation:**

Admission Agreement

The individual has privacy in their unit including lockable doors, choice or roommates and freedom to furnish or decorate unit

At the site visit it was observed the units are private with lockable doors.

Closets in the resident rooms have locks on them for security and privacy.

The consumer had pictures on the wall and unit was furnished according to the desire of the consumer or family. The consumer is encouraged to decorate their apartment to reflect personal taste, hobbies, and interest.

#### **Supporting Documentation:**

- Resident and Family Manual
- Admission Agreement
- Site Visit and Observation by state staff
- Survey with consumer and legal decision maker

The individual controls his/her own schedule including access to food at all times

Alternative menu items are available for residents who do not wish to eat what is being offered from the menu. Food is available at any time in the kitchen during hours of operation. After hours a variety of snack/food items are on a cart and the resident can chose from there. There are no assigned seats. Residents were observed to eat in any area of their choosing.

	The Resident and Family Manual states the resident has the right to choose who gives them care, how they are approached, choose all aspects of their care and right to determine schedule for waking, bathing, eating and activity participation.  An interview with a consumer's legal decision maker indicated knowledge of these rights.
	Supporting Documentation:
	Resident and Family Manual
	Site Visit and Observation by state staff
	Survey with consumer and legal decision maker
The individual can have visitors at any time	Overnight quests allowed and there are no designated visiting hours.
	Supporting Documentation:
	Resident and Family Manual
	Survey with consumer and legal decision maker
The setting is physically accessible	The setting is located with a business district on the east and residential on the west.
	The setting is ADA accessible.
	Supporting Documentation:
	Site Visit and Observation by state employees

HCBS Setting Requirements establish an outcome-oriented definition that focuses on the nature and quality of individuals experiences. The requirements maximize opportunities for individuals to have access to the benefits of community living and to receive services in the most integrated setting.

On March 27, 2019 state staff conducted a face to face interview with the consumers legal decision make/ Power of Attorney. The interview revealed the family had a choice when making the decision to move the consumer to Maple View Fargo.

The family helps to meet the consumers community integration needs. They accompany the consumer on weekly lunch outings, go to concerts, takes drives and go to coffee, and help their family member get to medical appointments. The consumer participates in activities inside the facility as chosen by the consumer. The family member interviewed stated the facility does not prevent the consumer from coming and going.

The consumer's legal representative manages the consumers finances. The legal representative and other family members are happy with the facility as the consumer is getting good care. The family can visit when they want, the consumer is engaged in activities.

The interviewed family member states the consumer can get up when desired and eats breakfast when they want. The facility has alternate food available for the resident to eat when they chose. The consumer chooses to not have a fridge or microwave in the apartment, but the family member interviewed knows this is an option.

The family member stated that the consumer does not have to adhere to a set schedule of waking, eating, bathing etc. and that these activities are completed based on the consumers preference. Does not feel like their loved one is rushed in activities.

The apartment can be decorated as desired. The bedroom door has a lock, but the family and consumer choose not to have a key. The consumer has a television but has chosen not to have a phone. The facility has a cordless phone that can be used in private by the consumer.

The consumer and family member interviewed feel this is a safe plan. The consumer gets along with the staff. The staff interacts in a dignified manner. The family member interviewed indicates knowledge of how to submit a grievance and that this can be done anonymously. The family member interviewed knows who the case manager is and participates in care planning.

#### **Monthly Activity Participation logs:**

Shows an increase in the consumer's participation with activities in the facility since first moving in and it also shows that the family member interviewed takes the consumer out of the facility weekly for activities.

process. It must be driven by the individual. Shou	Service Plan must be developed through an individualized planning all include people chosen by the beneficiary and/or beneficiary's dividuals that play a specific role in the beneficiary's life. Must be able sible.
Must be timely and occur at times/locations convenient to all involved.	Power of Attorney for consumer stated that the care planning process is held at a convenient time and location.  The POA knows that the consumer and family can invite anyone they choose.
Reflects cultural considerations/uses plain language	Yes
Discusses individual preference for community integration within and outside the setting.	Life History Form: Indicates previous careers and memberships. The Life History Form indicates the activities the consumer enjoys as shopping at Walmart, going to the pool hall, and going to Dairy Queen. The care plan lists preferences in activities and a participation log is utilized to indicate participation in activities.
Includes strategies for solving disagreement	The care plan discusses strategies to assist the consumer in addressing any disagreements by implementing activities that the consumer enjoys. The facility has set a goal to encourage the consumer to participate in activities.
Offers choices to the individual regarding services and supports the individual receives and from whom	The care plan indicates the type of services that are being provided are based on the consumers preference.

Provides method to request updates	Resident and Family Manual states "A resident or responsible party may request a Care Plan meeting at any time."
Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare	Goal are determined by the consumer and/or legal decision maker during the Person-Centered care plan meeting with the HCBS Case Manager and setting staff.
Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes	Care planning includes Strengths, needs, goals and task.
May include whether and what services are self- directed and includes risks and plan to minimize them	Care planning includes risks.
Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education and others	Facility and the HCBS Care planning includes Identified goals and preferences related to values "What is important to client", Community Integration and Social Support, Family, Decision Making, Financial, Education, Employment, Healthcare, Medications, Nutrition, Mental Health, Cognitive, Behavior, and Safety
Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary	HCBS care plan is signed by the HCBS Case Manager and the family who is the POA.

## Date of Review of Evidence Package by the HCBS Settings Committee:

November 25, 2019

### **Reviewed by the following Committee members:**

Nancy Nikolas Maier, Director of Aging Services Karla Backman, State Long Term Care Ombudsman Administrator Karla Kalanek, Developmental Disabilities Program Administrator Heidi Zander, Development Disabilities Program Administrator Deb Vesey/Shirley Fender, HCBS Program Administrator

Date of Compliance:

December 16, 2019

**Committee Decision:** 

X Setting Fully Complies