

Name of Setting: Maple View Memory Care, Minot 2805 Elk Drive Minot, ND 58701

Total# served: 10

Justification that Setting is In Fact-Community-Based

Maple View Memory Care, Minot is a licensed basic care facility that specializes in providing care to individuals with memory loss who require protective oversight because of behavior, elopement, or wandering issues. The setting is a secure facility that is accessible, and located in a residential area with access to provider owned or public transportation. There are no physical barriers surrounding the property.

North Dakota landlord tenant law governs basic care facilities and all residents must sign a lease or legally enforceable agreement. Residents have full access to all living areas and community rooms in the building. The facility provides community outings for consumers. They have freedom to come and go from their home, but some may need to be accompanied by family, friends, or staff due to their inability to independently navigate the broader community. Everyone exits using a keypad next to the door and guests are escorted by staff. Recipients can participate in community activities of their choice and utilize the community for medical care, entertainment, religious activities, beautician services, shopping, and other services to the extent desired. Guests can visit anytime according to a recipient's preference.

The individual's living area reflects their heritage, interests, and personality. They are treated with dignity and respect. Residents can request a door that locks with only appropriate staff having keys. The setting has both single and double rooms. There are separate bedrooms in the double rooms to assure privacy. Staff indicated during the site visit that the recipients have a choice in who provides care to them, and choice in daily activities. The recipient always has access to food. The setting is chosen by the recipient/guardian but options to choose a roommate are limited to the other individuals currently living in the setting where they have chosen to live. The recipient's family members manage personal resources.

The residents are not restricted from accessing the community though most need protective oversight from family, friends or staff to safely attend community events.

Survey results specific to this setting also showed that recipients and/or their guardians did not feel the setting isolates. They indicated the recipients can access the broader community but would need to be accompanied by family or staff due to the need for protective oversight. When asked about choice in their services and supports all the responders stated that staff assists with the cares and that recipients do not have to adhere to a set schedule. They also indicated in the survey that recipients chose the facility, have access to food at any time, family or the DPOA manage person resources, participate in care plan meetings, and that the consumer is treated with dignity. The majority felt guests are welcome at any time and that overnight stays are allowed.

Through the remediation efforts described in the state transition plan, the State believes that this setting can become integrated and support full access to the greater community to the extent desired by each recipient/guardian.

HCBS Settings Requirements	Review of Facility
<p>Facility is selected by the individual from among settings options including non-disability specific settings and an option for a private unit in a residential setting.</p>	<p>The facility is open for tours prior to a decision to reside in the facility. There are other options for residential services in the area to choose from.</p> <p>The facility is ADA accessible.</p> <p>Maple View Minot does not have a legally enforceable agreement following ND landlord tenant laws. It has an Admission Agreement that does explain Arbitration.</p> <p>There are camera's in the facility located in the Great Room and in hallway intersections of the building.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Admission Agreement • Maple View Minot Marketing Folder {Green Folder with MC) • Maple View Minot Resident and Family Manual • Maple View Minot Resident Rights • In the Resident and Family manual it states that residents in semi private rooms that are not happy with their roommate may submit a request for another roommate. The bedroom and bathroom doors lock. • Site Visit and Observation by state staff summary • Survey with legal decision-maker
<p>Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.</p>	<p>All consumers at Maple View Minot are currently retired. The ages of the residents are 59 to 62.</p> <p>Consumers can continue employment or volunteering based on their person-centered goals.</p> <p>The consumer, power of attorney, or family control finances, the consumer can keep money in their possession if they desire.</p> <p>There is an option to open a resident account so they can obtain cash when needed.</p> <p>Engaging in community life is addressed below.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Survey with legal decision maker • Resident and Family Manual • Maple View Minot Admission Agreement

Is integrated in and supports access to the greater community

Activity Calendars are posted to inform consumer and family of activities within the facility.

The family/natural supports are encouraged to take the consumer out into the broader community. 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.

Weekly activity schedules are posted in each resident's room near the door.

Public Transportation is available.
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 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 resident to have access to the courtyard when they want. There is a code on the outside door that the resident can use 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.

There is a clip board for checking in and out for security and fire reasons.

Supporting Documentation:

- Resident and Family Manual
- Calendar of Events
- Life History Form
- Resident Activity Participation Log
- Wellness Activities Sheet
- Observation/Outing Information Log

	<ul style="list-style-type: none"> • Care Card • Person Centered Plan of Care Worksheet • Survey legal decision maker • Site Visit and Observation by state staff
<p>Optimizes individual initiative, autonomy, and independence in making life choices</p>	<p>There are no visiting hours and guests can stay overnight if not in a companion room. There is a voluntary check in and out process to ensure safety and accountability in an emergency or fire.</p> <p>The Resident Rights states the resident has the right to choose who gives them care, 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.</p> <p>The interview with the consumer's legal decision maker indicated knowledge of these rights.</p> <p>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.</p> <p>If desired the consumer may have a fridge in their apartment unit. Microwaves are not allowed in resident rooms due to safety concerns, however there is a microwave available in the facility for use at any time with staff assistance.</p> <p>There is no 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.</p> <p>The laundry is locked but the consumer can request to use the laundry room if they would choose to do their own laundry.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Admission Agreement • Site Visit and Observation by state staff • Survey with legal decision maker

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

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

The Resident and Family Manual states if a resident living in a semi private room that is not happy with their roommate may submit a request for a different roommate.

Several areas were available to provide private visiting areas.

Resident and Family Manual states residents always have access to facility phones. A cordless phone is also available and may be used in privacy. And staff is available to assist residents in making calls when requested.

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.

Telephone services and cable TV is not furnished in the resident's room. Telephone services and cable TV are available free of charge in the commons areas of the building. Residents always have access to community telephone and cable TV.

Staff training includes Resident Rights and topics of dignity and respect.

The Resident's Rights reflect 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.

Training to staff regarding knocking on the door before entering the room.

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

<p>Facilitates individual choice regarding services and supports and who provides them</p>	<p>The Resident's Rights state resident has the right to choose person providing cares.</p> <p>The facility provides the consumer information regarding filing a grievance.</p> <p>Church services are offered within the facility via electronic means. There are beauty/barber salon services available within the building are on a fee for service basis.</p> <p>Consumer medical care is provided per own preference.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Resident Rights • Admission Agreement • Site Visit and Observation by state employees • Staff Training Folder • Survey with consumer and legal representative
<p>Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS</p>	<p>All consumers are treated the same. In their Mission Statement it states, "our specialized team is dedicated to serve by promoting positive teamwork with respect and compassion for all". Consumers can eat in place of their choosing.</p> <p>The consumer can access the broader community for services if desired.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Resident Rights • Admission Agreement • Site Visit and Observation by state staff • Survey with consumer and legal representative

<p>Person-centered service plan</p>	<p>Maple View Minot 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.</p> <p>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. Behavior, cognitive, and safety are reviewed at the quarterly meetings.</p> <p>The monthly participation logs are reviewed to ensure community integration and activities</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Person Centered Care Plan Review by State staff • Participation Log review • Care Card review • Maple View Minot Care Plan review • HCBS Care Plan review
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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.

<p>The individual has a lease or other legally enforceable agreement providing similar protection</p>	<p>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 and services, fees, admissions, change of 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.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Admission Agreement
<p>The individual has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate unit</p>	<p>Private and semi-private rooms have locks on the doors. All residents are given a key to their room. The bathroom in the semi-private rooms has locks on them to maintain privacy.</p> <p>Closets in the resident rooms have locks on them for security and privacy.</p> <p>Residents in semi-private rooms that are not happy with their roommate may submit a request for a different roommate.</p> <p>The consumer had pictures on the wall and unit was furnished according to the desire of the consumer or</p>

	<p>family. The consumer is encouraged to decorate their apartment to reflect personal taste, hobbies, and interest.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Admission Agreement • Site Visit and Observation by state staff • Survey with consumer and legal decision maker
<p>The individual controls his/her own schedule including access to food always</p>	<p>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 snack/food item cart is available for residents to pick from. There are no assigned seats.</p> <p>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.</p> <p>The interview with the consumer's son/ legal decision maker indicated knowledge of these rights.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Site Visit and Observation by state staff • Survey with consumer and legal decision maker
<p>The individual can have visitors at any time</p>	<p>Overnight quests are allowed and there are no designated visiting hours.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident and Family Manual • Survey with consumer and legal decision maker
<p>The setting is physically accessible</p>	<p>The setting is in a business district area in Minot. The setting is ADA accessible.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • 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 June 11, 2019, state staff conducted a phone interview with the consumers legal decision maker Power of Attorney. The interview revealed the family had a choice when making the decision to move

the consumer to Maple View Minot.

The family helps to meet the consumers community integration needs. They accompany the consumer on lunch outings, takes drives and go to coffee with family. They 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 and the biggest reason for lack of community integration is the consumer restricts self. More outings are attended in better weather.

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 family member interviewed stated that her mother and her roommate get along and she knows the process of how to change roommates if needed.

The interviewed family member states the consumer can get up when desired and eats when they want. The facility has alternative food available for the resident to eat when they chose. The consumer chooses to not have a fridge in the apartment, but the family member interviewed knows this is an option. The interviewed family member feels that her mother is safe in the facility but also has her privacy.

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 scheduled mostly from the resident's wishes but also a little part is due to the staff schedule. Does not feel like her mother 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 family member interviewed feel this is a safe plan. The family member states the consumer is as happy as can be. The consumer gets along with the staff. The staff interacts in a dignified manner. The family member was impressed with the staff. The family member interviewed indicates knowledge of how to submit a grievance and that this can be done anonymously. When asked who the consumer's case manager is, the family member stated that she couldn't remember her name but has participated in all care planning but one. There is always a family member present.

Monthly Activity Participation Logs:

Shows consumer's participation with activities in the facility and it also shows that family members take the consumer out of the facility two times a month, but it was March and was cold.

HCBS Settings requirement: *The "Person-Centered Service Plan must be developed through an individualized planning process. It must be driven by the individual. Should include people chosen by the beneficiary and/or beneficiary's representative, which may include a variety of individuals that play a specific role in the beneficiary's life. Must be able to direct the process to the maximum extent possible.*

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.	<p>Life History Form: Indicates previous careers and memberships. The Life History Form indicates the activities the consumer enjoys. Consumer likes to be in a group. Consumer enjoys physical games and activities versus sedentary activities, she goes on outings with family and with facility staff.</p> <p>The care plan lists preferences in activities and a participation log is utilized to indicate participation in activities.</p>
Includes strategies for solving disagreement	The care plan discusses strategies to assist the consumer in addressing any disagreements by redirecting in a calm manner when the consumer shows signs of distress or frustration. Consumer is to avoid residents that are loud, making repetitive noises or constantly calling out and approach the consumer in a calm, low. Soft tone voice, a smile and be firm and kind.
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	None found
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:

Date: April 4, 2019

Reviewed by the following Committee members:

Nancy Nikolas Maier, Director of Aging Services

Karla Kalanek, Developmental Disabilities Program Administrator
Heidi Zander, Developmental Disabilities Program Administrator
Karla Backman, State Long Term Care Ombudsman
Katherine Barchenger, State Autism Coordinator
Russ Korzeniewski, Risk Management Program Administrator
Deb Vesey/Shirley Fender, HCBS Program Administrator

Date of Compliance: December 10, 2019

Committee Decision:

Setting Fully Complies, with the understanding that the residents not being allowed to store tobacco products in their rooms is a restriction. If you admit a resident who uses tobacco products it will need to be addressed in their individual care plans.