

Summary of Edgewood Minot CMS Home and Community Based Services (HCBS) Settings Rule Site Visit:

On June 20, 2022, an on-site visit was made by Kathryn Good BSN, RN, Nurse Administrator and Erica Reiner MSN, RN, Nurse Administrator.

Edgewood Minot is a licensed basic care facility including the optional service of Alzheimer’s, Dementia or Special Memory care. The settings are in secured facilities that are accessible and located in residential areas of Minot. A google map, organization chart, Basic Care License, Medication error reporting and Elopement Risk Prevention/Missing Resident policy, and Resident Complaint/Grievance Resolution Policy is included in the Evidence Package. Edgewood Minot utilizes a Medication Administration Training done by RN. The unlicensed team members are required to successfully demonstrate verbal understanding and return demonstration of medication administration skills to a registered nurse (RN) in advance of receiving authorization to perform medication administration tasks.

Edgewood Minot north has 21 memory care residents presently with a max capacity of 22. Edgewood Minot south has 28 memory care residents presently with a max capacity of 28. Currently, Edgewood Minot north has 10 Medicaid consumers with 1 pending Medicaid. Edgewood Minot south has 5 Medicaid consumers and 2 pending Medicaid. Edgewood Minot has a signed lease agreement. “In cases of transfer or discharge, you must receive a 30-day written notice.

June 20, 2022, a site visit was held with Edgewood Minot to provide education regarding the Home and Community Based Services Settings requirements published in the Federal Register on January 16, 2014. An assessment tool was developed by the state that was based on the settings criteria and the exploratory questions provided by CMS. State staff utilized HCBS Settings Final Rule Handout to educate Edgewood Minot staff via Microsoft Teams Meeting on June 6, 2022.

The assessment tool was completed, and the State then provided a written summary of suggestions and areas that needed change to come into compliance. The State provided further technical assistance upon request and the provider submitted an evidence package to the State to prove compliance with setting requirements.

June 20, 2022, the state made an onsite visit to tour the facility, review policies and procedures, observe client care, and staff interactions. State staff conducted a care plan review due. A survey was conducted by phone with the Medicaid consumer’s legal decision maker to assess the consumers experience living in the setting.

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>	<ul style="list-style-type: none"> • 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. • Edgewood Minot’s facilities are located within residential homes. • The facility is ADA accessible. • Edgewood Minot has a service and rental agreement

	<p>with a 30-day notice.</p> <ul style="list-style-type: none"> • There are cameras outside the facility entrance. North location has cameras throughout the common area, signs posted throughout facility to notify of surveillance. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Rental Agreement • Admission Packet • Site Visit and Observation by state staff summary
<p>Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.</p>	<ul style="list-style-type: none"> • All consumers at Edgewood Minot are currently retired. • Clients will be supported in their choice of work. If you are employed or choose to volunteer, you have a right to have a work or volunteer schedule of your choice. • The consumer, power of attorney, or family control finances. • The consumer can keep money in their possession if they desire or in an envelope that the facility monitors. • Engaging in community life is addressed below. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Survey with legal decision maker
<p>Is integrated in and supports access to the greater community</p>	<ul style="list-style-type: none"> • Activity Calendars are posted within the neighborhood and online 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. • Public Transportation is available. • An intake form is filled out at Admission to determine the likes and dislikes of the consumer. • Encouraged facility to keep Monthly Activity Participation logs and outing information 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 codes to exit facility posted in roman numerals. Sign in and out is not required but is recommended for safety reasons, but there is no penalty if not done. • The memory care unit is secured with egress access

	<p>and alarm system, as well as a secured outdoor area.</p> <ul style="list-style-type: none"> • Key Fob system for access to memory care unit. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Calendar of Events • Intake Form • Resident Activity Participation Log • Observation/Outing Information Log • Care Plan • Survey legal decision maker • Site Visit and Observation by state staff
<p>Optimizes individual initiative, autonomy, and independence in making life choices</p>	<ul style="list-style-type: none"> • Guests can stay overnight. There is a check in and out process to ensure safety and accountability in an emergency or fire. • The Resident Handbook states the resident has the right to determine how you spend your time, who you want to spend time with and which activities you want to participate in. It also states that you can make choices about how you want to live your life that are significant to you. This includes deciding how you want to spend your time, what you would like your daily schedule and routine to be and what your health care wishes are. • The consumer can have a fridge and food in their room. • One entrée is served at mealtime, but alternate food is available upon request. Snacks are available on the counter as well as beverages. • There is no assigned seating, disposable cutlery and dishes are not used. No protective coverings used unless care planned and provided by resident/family. • The laundry is locked. Laundry is done by staff weekly. If resident requests to do their laundry and the staff will assist them. • Staff carry cell phone that resident may use, or family can call resident on. Residents may have cell phones. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Site Visit and Observation by state staff
<p>Ensures an individual’s rights of privacy, respect, and freedom from coercion and restraint</p>	<ul style="list-style-type: none"> • All residents in memory care unit have private rooms which are lockable, and the resident has a key unless they choose not to, or family chooses not to. Staff will knock on the door before entering and ask for approval to enter. • Consumers can furnish and decorate their unit as desired. Observation reflected consumer’s own personal tastes in decorating their private living

	<p>quarters. Memory box outside each resident’s room.</p> <ul style="list-style-type: none"> • Several areas were available to provide private visiting areas. • Staff training includes Resident Rights and topics of dignity and respect. • Medications given in private areas unless resident asks for in common area. • Education provided to ensure med carts are always locked when staff is not present at cart. • Training to staff regarding knocking on the door and waiting for a response before entering the room. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • “Resident Complaint/Grievance” policy is included in the Admission Packet. • Resident Rights is included in the Admission Packet. • Site Visit and Observation by state staff • Staff Training worksheet
<p>Facilitates individual choice regarding services and supports and who provides them</p>	<ul style="list-style-type: none"> • The consumer has a choice in who cares for them. If resident refuses care from provider, staff are trained to ask to switch consumers with another staff member • The facility provides the consumer information regarding filing a grievance. • There is a chapel and services; residents can choose their own church also • Beautician onsite and hours posted; may use their own beautician if preferred • Consumers medical care is provided per own preference • Option for medical treatment, PT, and OT to be given at facility. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Resident Rights Booklet • Resident Complaint/Grievance policy is included in the Admission Packet • Site Visit and Observation by state employees • Staff Training List
<p>Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS</p>	<ul style="list-style-type: none"> • All consumers are treated the same. Consumers can eat in place of their choosing. • The consumer can access the broader community for services if desired. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Resident Rights

	<ul style="list-style-type: none"> • Site Visit and Observation by state staff
Person-centered service plan	<ul style="list-style-type: none"> • Upon first Medicaid consumer, Case Manager will complete a PCP at the same time Edgewood Minot is doing their care plan meeting. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Edgewood Minot 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	<ul style="list-style-type: none"> • The consumer or legal decision maker signs a lease agreement when the decision has been made to move into the facility. The lease follows ND landlord tenant laws. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Lease Agreement
--	--

The individual has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate unit	<ul style="list-style-type: none"> • The units for the residents are single occupancy with lockable door • double occupancy with curtain between, door to room locks • Shower in each hallway • The bedrooms are equipped with lockable doors. • 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. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Lease Agreement • Site Visit and Observation by state staff
---	--

The individual controls his/her own schedule always including access to food	<ul style="list-style-type: none"> • If a menu is not acceptable resident may ask for another option • There are no assigned seats. • Snacks are available throughout the day. • Individual controls when they shower, wake and rest <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook • Site Visit and Observation by state staff
---	---

The individual can have visitors at any time	<ul style="list-style-type: none"> • Overnight guests allowed and there are no designated visiting hours. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Resident Handbook
---	--

The setting is physically accessible	<ul style="list-style-type: none"> • Both settings are in a residential area in Minot. • The setting is ADA accessible. <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.

7 POAs called, 5 answered all questions

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.	POA voiced they are at meetings, and they are scheduled when it is convenient for them.
Reflects cultural considerations/uses plain language	Use English or have interpreter
Discusses individual preference for community integration within and outside the setting.	Individuals can make their own decisions
Includes strategies for solving disagreement	Discussed with all members of the team
Offers choices to the individual regarding services and supports the individual receives and from whom	Individual has choices
Provides method to request updates	Able to call at any time using cell phone the nurse/med aide carry
Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare	The plans reflect personal preferences
Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes	Evidence provided in plans
May include whether and what services are self-directed and includes risks and plan to minimize them	Evidence provided in plans
Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education and others	Evidence provided in plans
Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary	Evidence provided in plans

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

Date: 06/28/2022

Reviewed by the following Committee members:

Nancy Nikolas Maier, Director of Aging Services

- ✓ Karla Kalanek, Developmental Disabilities Program Administrator
- ✓ Kathryn Good, HCBS Nurse Administrator

- ✓ Erica Reiner, HCBS Nurse Administrator
- ✓ Russ Korzeniewski, Risk Management Program Administrator
- ✓ Heidi Zander, HCBS Developmental Disabilities Program Administrator

The committee gave recommendations. Remediation as follows provided by the facility:

1. More options for food in our MC I and MC II
 - a. Fresh fruit (in season)
 - b. Another random food of choice that had good shelf life and has some nutrition value
2. Privacy Curtain length added to provide adequate privacy in the double Medicaid apartments
3. All shared room bathroom doors have locks
4. All staff instructed to no longer lock doors in dining room. Managers will QA to make sure is not being locked and will remove locks all together if necessary to ensure never locked.
5. Staff are setting up meal settings as they serve residents the meal
6. Curtains put in place in Med room to hide confidential information of residents

Date of Compliance with above Recommendations: 08/01/2022

Committee Decision:

- Setting Fully Complies**
- Setting with additional changes will fully comply**
- Does not/cannot meet HCB Settings Requirements**
- Evidence package must be submitted to CMS for heightened scrutiny because the facility is presumed to have institutional qualities based on one or more of the following:**
 - **Setting is in a publicly or privately-operated facility that provides inpatient institutional treatment.**
 - **Setting is in a building on the grounds of, or adjacent to, a public institution.**
 - **Setting has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.**