New York State Medicaid Home and Community-Based Services

**Heightened Scrutiny Evidence Packet**

**Setting Information**

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| **Provider Name**  St. Vincent de Paul Assisted Living Program | | |
| **Location of Setting**  900 Interval Avenue Bronx, NY 10459  **Note: for Prong 3 settings only include the name of the city and not the full address.** | **Type of Setting**  Adult Home/Assisted Living Program | **Medicaid Home and Community-Based Services Being Provided at the Setting**  Personal care and other HCBS are provided as needed. |

**Heightened Scrutiny Prong**

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| **Prong 1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment.**  **Prong 2: Setting is in a building on the grounds of, or adjacent to, a public institution.**  **Prong 3: Setting has the effect of isolating individuals from the broader community.** |

**Qualification for Prong**

Describe briefly in the box below how the setting meets the prong indicated (what facility is it in or located on the grounds of, or adjacent to, etc.?)

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| St. Vincent de Paul Assisted Living Program is co-located with St. Vincent de Paul Residence, a skilled nursing facility. |

**Provider Compliance Summary**

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| **Requirements for All HCBS Settings** | | |
| **Compliant?** | **Federal Requirement** | **Summary** |
| *42 CFR 441.301(c)(4)(i)*  Yes  Partial  No | Settings are integrated and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS. | St. Vincent de Paul Adult Living Program (ALP) is located in a residential area proximal to a park and commercial businesses. Residents have access to the greater community. Residents can seek employment or volunteer opportunities if they choose. Residents have the opportunity, as they are interested and able, to participate in outings or run errands with their housemates, family, friends, or even independently.  Individuals may access the community through events planned by facility staff with input from the residents, or independent of the facility. Residents can come and go as they choose and are able. Residents have the opportunity and control of their resources needed for outings. Residents have control of their personal resources unless they have a designated payee/ authorized by the facility to manage their finances. Residents can choose their medical providers. There is a subway station within walking distance of the facility. St. Vincent de Paul ALP provides assistance with the coordination of transportation for residents’ clinical appointments. |
| *42 CFR 441.301(c)(4)(ii)*  Yes  Partial  No | Settings are selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual’s needs, preferences, and for residential settings, resources available for room and board. | Settings are selected by each resident. This is a voluntary participation, non-disability specific setting. Individuals receiving services are medically eligible for placement in a nursing home but based on an individuals’ score on a uniform assessment tool (i.e., UAS-NY), it has been determined the individuals’ specific needs can be met in the St. Vincent de Paul ALP with home care services, case management, and other supports. Residents have the option of a private bedroom if available. The facility currently has one private room. Residents are informed of their room options at pre-admission. Facility staff have deployed person-centered policies to ensure application of person-centered characteristics within the person-centered service plan. |
| *42 CFR 441.301(c)(4)(iii)*  Yes  Partial  No | Settings ensure an individual’s rights of privacy, dignity, respect, and freedom from coercion and restraint. | St. Vincent de Paul ALP ensures that each residents’ rights are protected. It is each resident’s right to confidential treatment of personal and health records, to have privacy in caring for personal needs, and to receive courteous, fair and respectful care and treatment at all times, and to be free from coercion and restraint. Privacy is available in residents’ private room, as applicable, or in any of the sitting areas identified throughout. Each resident has the option to procure in-room telephone, their needs and preferences are respected. Each resident is provided lockable storage in his or her room. Residents are provided a copy of their rights upon admission. Residents are orientated to the Grievance Form and its location and are free to express complaints without fear of reprisal. The facility does not use restraints. |
| *42 CFR 441.301(c)(4)(iv)*  Yes  Partial  No | Settings optimize, but do not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. | Each resident controls his or her own schedule and activities. Based on observation, St. Vincent de Paul ALP offers an indoor gathering space, a large group activity space, a small group activity space, a private space area for calming activities, and an area for stimulating activities. St. Vincent de Paul ALP develops an activity schedule with tasks and activities appropriate to individual attributes. Residents may participate in facility-scheduled activities and events or use their time as they choose. Participation in activities is encouraged, but not required. Residents can come and go as they choose. Residents are able to make personal decisions regarding all aspects of their lives (i.e., daily schedule, who they spend time with, where they go, what they eat, etc.) and staff are supportive of their decisions. |
| *42 CFR 441.301(c)(4)(v)*  Yes  Partial  No | Settings facilitate individual choice regarding services and supports, and who provides them. | St. Vincent de Paul ALP may only care for a person who voluntarily chooses to participate in the program after having been provided with sufficient information to make an informed choice. Upon interview, it was confirmed that residents are able to choose who provides the services they voluntarily receive. The facility ensures individuals are supported in developing care plans that support his/her needs and preferences**.** |
| **Additional Requirements for Provider-Owned or Controlled Settings** | | |
| **Compliant?** | **Federal Requirement** | **Summary** |
| ***Standards for Provider-Owned and Controlled Residential and Non-Residential Settings*** | | |
| *42 CFR 441.301(c)(4)(vi)(C)*  Yes  Partial  No | Individuals have the freedom and support to control their schedules and activities; and have access to food any time. | Residents have the freedom and support to control their schedules. Residents have the freedom and support to control their schedules and activities. Residents are able to eat meals when they wish, and in the resident’s preferred location. Per staff, dining room seating is open without assigned seating. Residents have access to food throughout the day and may also choose to keep food in their rooms. Residents may choose when to participate in activities and when to eat their meals. The facility has scheduled activities that residents may choose to participate in or not. Residents are able to determine how they spend their time (participate in planned activities or not). Residents have the freedom and support to control their daily schedules. |
| *42 CFR 441.301(c)(4)(vi)(D)*  Yes  Partial  No | Individuals are able to have visitors of their choosing at any time. | St. Vincent de Paul ALP welcomes visitors at any time. Visitors are asked to sign in and sign out. There are several private spaces where residents can meet visitors. Residents are able to have visitors at any time of their choosing and can decide who they would like to visit with. |
| *42 CFR 441.301(c)(4)(vi)(E)*  Yes  Partial  No | The setting is physically accessible to the individual.  (Not modifiable) | As observed, the facility is physically accessible; individuals have access to all common areas. The facility is free of inhibiting barriers. Assistive devices are available for those in need. Residents may come and go as they choose. Entry or egress is not inhibited from the facility. |
| *42 CFR 441.301(c)(4)(vi)(F)*  Yes  Partial  No | Any modifications of the additional conditions under 441.301(c)(4)(vi)(A) through (D) for provider-owned and controlled settings must be supported by a specific assessed need and justified in the person-centered service plan. | Care plan changes are assessed, discussed, and documented accordingly. Remediation is in progress to procure an independent assessor/case management agency to determine the individual’s need for HCBS and develop a person-centered service plan. This is to ensure conflict-free case management. We expect remediation of this to be completed by July 1, 2024. |
| ***Standards for Provider-Owned and Controlled Residential Settings Only*** | | |
| *42 CFR 441.301(c)(4)(vi)(A)*  Yes  Partial  No  Not Applicable | The unit or dwelling is a specific physical place that is owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has the same responsibilities and protections from eviction as all tenants under landlord/tenant law of the State, county, city or other designated entity. In settings  where tenant laws do not apply, a lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction’s landlord/tenant law. | Upon admission, each resident is provided with, and signs, a written admission agreement. The admission agreement includes required elements to protect the resident’s rights and specifies the services the resident can expect of St. Vincent de Paul ALP, as well as specifies conditions under which the admission agreement may be terminated, including right to pursue a challenge to termination in court. |
| *42 CFR 441.301(c)(4)(vi)(B)*  Yes  Partial  No  Not Applicable | Each individual has privacy in their sleeping or living unit: (1) Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors. (2) Individuals sharing units have a choice of roommates in that setting. (3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement. | Residents have privacy in their sleeping units. Residents have keys to their apartments with only appropriate staff having keys to doors. All bedroom and bathroom doors are lockable, to ensure privacy. If applicable, individuals in semi-private rooms have choice of roommate based upon availability and compatibility. As observed, residents have the opportunity to furnish and decorate their rooms as they wish. |

**Recommendation**

As required by 42 CFR 441.301(c)(5), the State of New York submits this request for heightened scrutiny review for the setting identified above. The State has compiled evidence that the setting is integrated in and supports full access of individuals to the greater community, is selected by the individual from among disability and non-disability specific settings, ensures individual rights, and promotes individual initiative, autonomy, choice, and independence.

**Instructions for Completing Sections One through Four**

**The following four (4) sections may be expanded in length to capture evidence of HCBS Final Rule compliance. However, a complete heightened scrutiny packet may be no longer than ten (10) pages in length. The ten (10) pages should include documentation that demonstrates support of the statements made here. Any additional supporting documentation should be kept by agencies/offices/units for the recommended amount of time.**

**Section One**

**On-Site Visit Observation**

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| **Date(s) Conducted**  **9/13/2019**  **12/04/2019, 04/05/2022, 05/09/2022, 06/07/2022** | **State Agency/Entity that Conducted the On-Site Visit New York State Department of Health** |
| **Description of the Setting**  St. Vincent de Paul Assisted Living Program is a 59-bed Adult Home based Assisted Living Program. The facility provides long-term residential care, room, board, housekeeping, personal care, and supervision to five or more adults who are medically eligible for nursing home placement but in a less medically intensive, lower cost setting. The ALP provides home health aides, personal emergency response services, nursing, physical therapy, occupational therapy, speech therapy, medical supplies and equipment, adult day health care, and the case management services of a registered professional nurse.  St. Vincent de Paul ALP offers housing for people who wish to maintain their independence but require assistance with activities of daily living. Co-located with ArchCare at San Vicente de Paul Nursing Home and Rehabilitation Center and the ArchCare Senior Life Program of All-inclusive Care for the Elderly, the ALP is designed to maximize residents’ health, safety and well-being through a full array of on-site medical, social and other services, and close coordination of specialized care received from outside healthcare providers.  The facility is located in Bronx County in a community proximal to a park and commercial businesses. There is another ALP approximately 2 miles away. The facility is free of barriers inhibiting access to or egress from the location. The facility is free from barriers inhibiting movement. The facility is physically accessible by all individuals. Residents have access to all common areas of the facility. Assistive devices, such as walkers and rollators, are available to residents as prescribed. The facility features semi-private shared rooms and one private room. Bedrooms are equipped with locks to provide privacy, and residents have keys to their rooms. Residents may decorate the room as desired to meet their personal preference. Bathroom doors are lockable for resident’s privacy. Residents have access to food throughout the day.  St. Vincent de Paul ALP’s Therapeutic Recreation Department provides an organized program of activities such as arts and crafts, drama and discussion groups, chorus, outings, physical fitness, and other similar types of group activities. All residents are encouraged to participate in facility-sponsored activities and may choose activity programs they like or in which they have an interest. Residents are supported in sustaining physical and psychosocial function, as well as maintaining a sense of usefulness to themselves and to others. Residents may interact with members of the community both outside and within the facility. The facility provides and Activities Assessment upon intake and annually thereafter. This assessment allows for staff to get an understanding of the residents likes and dislikes regarding activities. Each month a Resident Council meeting is held. All residents are welcome and encouraged to attend. This gives residents and opportunity to provide feedback and input on all outings and activities. The Recreation Department will develop the activities calendar based on the input from these meetings. Monthly activities calendars are distributed to each resident every month. The facility also facilitates a Food Committee meeting in which residents can provide input and feedback on meals. Residents can discuss what they like or dislike and provide suggestions for meals in the upcoming month. | |

**Section Two**

**Community Integration Observations and Input from Individuals Served (without observation by staff), Family Members/Guardians, and Staff**

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| **Individual Interviews**  During the onsite visit two residents were interviewed without observation by staff. The following information was gathered regarding community integration:  Individual A shared that she enjoys going out into the community. She is able to access the community through facility-planned events or independently. She often goes out with a friend (not a resident of the facility). She said that she does not have to go out, she only goes out when she wants to. She enjoys running errands, going shopping, and out to eat.  Individual B shared that she accesses the community often. She will often go out independently to run errands, or to do things of interests. Individual B enjoys shopping and eating at restaurants. Individual B also said that she will participate in a facility-planned outing or event if it is of interest to her.  **Employee Interviews**  At the time of the onsite visit the administrator was interviewed. The following information was gathered regarding community integration: The facility offers a variety of in-house and community activities through its recreation department. There are organized and scheduled activities including but not limited to, arts and crafts, physical fitness, Bingo, word games, movies, current event discussions, opportunities for socialization, religious services, and more. Residents are able and encouraged to interact with members of the community both outside of and within the facility. Residents are able to access the community through facility planned outings and events, or independent of the facility. Many residents choose to go out with family or friends. |

**Section Three**

**Additional Evidence**

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| **The following evidence has been compiled that demonstrates the setting is integrated in, and supports full access of, individuals receiving HCBS into the greater community.**  Click or tap here to enter text.  1. Letter from facility confirming locks and decentralized meals  2. Therapeutic Recreation Policy  3. Individualized Service Plan Policy  4. Resident’s Bill of Rights and Responsibilities  5. Visitor Access Policy  6. Case Management Services Policy  7. Snack Area (photo)  8. Resident Bedroom (photo)  9. Google Maps  10. Website: [www.archcare.org](http://www.archcare.org) |

**Section Four**

**Public Comments Summary**

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| **Public Comment Period**  **From:** Click or tap to enter a date. **To:** Click or tap to enter a date. |
| **Summary of Public Comments Received for the Setting** |
| **Summary of the State’s Response to the Public Comments Received**  Click or tap here to enter text. |