

Commonwealth of Virginia

Heightened Scrutiny Evidence Package

As required by 42 CFR 441.301 (c) (5) the Commonwealth of Virginia submits the request for CMS heightened scrutiny review.

Setting Information

Provider Name: Cumberland Mountain Community Services Board	Setting Name: Group Day Support
Setting Address: 350 Cumberland Road Cedar Bluff, VA 24609	Type of Setting: Group Day Support
Number of people served at the setting: 57	Number of individuals reviewed: 14

Waiver Service Information

Individuals in this setting use one of the three (3) DD Waivers available in Virginia.

Community Living (CL Waiver)

Family and Individual Supports Waiver (FIS)

Building Independence Waiver (BI)

Heightened Scrutiny Criteria Met

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.

Section One

Onsite Visit Observation and Assessment

Date(s) of onsite assessment and review: July 13, 2021

State Agencies that Conducted the Onsite Visit: Department of Medical Assistance Services (DMAS) and the Department of Behavioral Health and Developmental Services (DBHDS)

Number of State Agency Representatives who Completed Assessment: Three; 1 representative from DMAS and 2 representatives from DBHDS

Description of Setting:

The group day support is located at 350 Cumberland Road Cedar Bluff, VA 24609. Cedar Bluff is a rural area of Virginia. The group day support building is located on a piece of property that contains several other CSB owned and operated buildings including: the administration building, the case management building, and a 15 bed group home directly behind the day support. Across the street from the building is Southwest Virginia Community College.

Within the setting, there are several activity rooms that are utilized for center-based activities such as: crafts, watching movies, puzzles, playing video games, painting finger and toe nails, board games and other activities of choice. There are also multiple staff offices, a receptionist area, a conference room, bathrooms specifically for the individuals, bathrooms for staff, a kitchenette with outside access, and a commercial kitchen that is no longer in use. The physical space of the group day setting is large and spacious. It does allow for individuals of all support needs to access and utilize the building.

Outside of the building there is a basketball hoop, volleyball net, glider swings and tables/chairs. There are multiple company vehicles that allow for community access. These vehicles are parked in the outside parking lot.

Evidence included: interviews with staff and individuals, review of pictures, and an in-person tour completed on 7/13/2021.



Section Two

Evidence of Community Access to the Same Degree as Someone Who Does Not Utilize HCBS Services

The group day support setting does have opportunities for community access. While the state team were onsite, several individuals spoke about going shopping, out to eat, bowling and to the movies. Individuals discussed visiting different restaurants such as: Shoney's, Huddle House, Wendy's and McDonalds). The staff at the group day center reported traveling into other nearby towns such as Abington to have a wider variety of activities and restaurants to pick from. The setting has also developed an agreement with the community college across the street to allow for access to the library and individuals are able to utilize the services at the library for books or technology. All activities are completed in groups and staff and individual's reported the need to stay with their assigned group while out places. As an example, staff would note that all individuals need to be "seen" at all times.

Individuals are also monitored by "line of sight" when they go outside to utilize the sports equipment or just want to sit outside. The staff reports that this is due to wildlife, however there was no safety assessment completed prior to implementing the line of sight procedure.

Evidence: Provider's Community Integration Policy, Provider's Home and Community Based Services Policy, Person-Centered Plans, Quarterly Person-Centered Reviews, Daily Progress Notes, Interviews with staff and individuals.

Section Three

Evidence of Privacy, Autonomy and Independence

Staff and individuals do report that individuals are able to speak to staff in private whenever they desire. Individuals are able to utilize vacant rooms for privacy or a space to calm down and relax as needed throughout their day. Individuals do report having privacy in the restroom and staff reports prompting privacy with reminders to shut doors as needed.

Evidence included: interviews with staff and individuals, daily progress notes, in-person tour completed 7/13/2021.

Individuals did report that staff always accompanies them when they leave the setting. The staff reported that due to the rural nature of the home there is a concern for wildlife. However, there was no record of a safety assessment being completed before implementing the rule that staff are to accompany folks outside of the setting. Individuals report being able to select their own daily activities and report having the right to decline any activity they don't wish to complete. Individuals did report having a schedule for snacks and lunch and did report that if they wanted a snack outside of snack times they would be instructed to wait.

Evidence included: interviews with staff and individuals and daily progress notes.

Section Four

Evidence of Choice and Freedom from Coercion and Restraint

The Virginia Informed Choice Form is completed at least annually with each individual by their assigned support coordinator/case manager. This form is kept on file stating the individual's choice to receive home and community based services and their choice of provider. Should an individual wish to change their services, the support coordinator/case manager would support the individual by looking at multiple other service choices and again completing the choice form (should another service or service provider be selected).

Several individuals did report attending the group day program every day even when they might not want to attend. The provider did not have any procedures in place for identifying why someone would not want to attend or making arraignments for them to leave. This is a remediation item.

Evidence Included: Virginia Informed Choice Form, Person-Centered Plans, Provider's Home and Community Based Services Policy, Interviews with staff and individuals, Person-Centered Plans

The provider utilizes a de-escalation training for all employees upon hire and annually thereafter. The program utilized is Safety Care. All staff reported that any kind of restraint is an absolute last resort and verbal de-escalation should be used. When asked about the agency policy on coercion, staff were unable to provide any insight on how they avoid coercion or how to recognize signs that someone is being coerced. A re-training for all staff members will be required for this setting regarding coercion.

Evidence included: Orientation checklist for staff, Provider's Home and Community Based Services Policy, interviews with staff.

Section Five

Evidence of an Accessible Environment

This setting supports people with a wide variety of support needs. This setting is accessible to everyone who attends the program.



*Evidence included: pictures
and in-person tour
completed on 7/13/2021*

Section Six

Evidence of Participation in the Person-Centered Planning Process.

Individuals reported participating in their person-centered planning meeting. This included deciding where to hold the meeting, who should attend the meeting, picking their outcomes and voicing any needs for changes. In the event that an individual does not use words to communicate, the staff reported that the Day Support Manager will ask for input from staff who know them well prior to the meeting and ask for feedback from the staff once the plan is drafted. Direct Support Staff did not report attending the meeting.

Evidence included: a review of the person-centered plan, interviews with staff and individuals, review of the provider's Home and Community Based Services Policy- Expectations for Person Centered Planning.

Section Seven (As applicable)

Evidence of Provider-Owned Residential Protections including: a lease agreement, access to food at any time, ability to have visitors at any time, a key to the dwelling, and the ability for the individual to decorate their bedroom.

Not applicable as the setting is a group day support.

Public Comment Review Period:

Public Comments Summary

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Section Nine

Summary of State Response to Public Comments

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Attachment List:

Attachment A- Commonwealth of Virginia: Modernizing Culture, Practices and Competencies in Home and Community-Based Services

HCBS Review Team, Provider On-Site Settings Review Protocol, July 2020

Attachment B- Full Evidence List

Attachment C- Provider Remediation Plan

Attachment A:

Summary of Review Protocol Utilized by Virginia

Protocol Overview

The purpose of this protocol is to describe the processes, tools and timelines for the Commonwealth of Virginia Home and Community-Based Services (HCBS) Review Team to conduct a review of a statistically significant sample of the following home and community-based settings: Group Day Services, Supported Living, Sponsored Residential, Group Home and Group Supported Employment Services. The purpose of these reviews is to ensure the rights, dignity and autonomy of individuals enrolled in these programs are honored according to the HCBS Final Rule published in the Federal Register on January 16, 2014; effective March 17, 2014. The HCBS Final Rule establishes requirements for residential and nonresidential service settings in Medicaid waiver programs to ensure individuals receiving services through HCBS waiver programs have access to the benefits of community living and are able to receive services in the most integrated settings. This process is referred to as the provider on-site¹ settings review (OSR).

A HCBS Review Team is established from the Department of Medical Assistance Services (DMAS) and the Department of Behavioral Health and Developmental Services (DBHDS). Each review team consists of 2-4 state staff and may include a combination of representatives from DMAS and DBHDS. In preparation for each OSR, the HCBS Review Team assimilates findings from all provider self-assessment information entered into Research Electronic Data Capture (REDCap). The interview questions, documentation review and visual observations are based on the evaluation of compliance in the following six categories:

- *Community integration and engagement*
- *Autonomy, choice and control*
- *Friends and visitors*
- *Physical environment (Location, signage, accessibility)*
- *Privacy and respect*
- *Policies, procedures and practices (promotion of rights and integration)*

Settings Tours and Observations

Settings Tour

The HCBS Review Team conducts a walking tour of the physical environment to observe indicators of compliance/non-compliance. This includes but is not limited to the location, decoration, accessibility, signage and privacy. The settings tour occurs using the Provider Settings Review Tool

¹ As of 6/1/2020, an alternative, hybrid approach was added to this protocol. All references to OSR mean any method of review, in-person or virtual.

which includes questions for determining if the setting is fully integrated into the community; is accessible, which includes no obstructions or blocked doorways; is decorated according to individual preferences; has locks on the inside of bathroom and bedroom doors to allow privacy; and has signage without terms stating that people with disabilities receive services there.

Additionally, the HCBS Review Team determines whether:

- The home is on or adjacent to an institutional setting (heightened scrutiny)
- The home is isolated from the community and does not have the effect of isolating people from the community
- The home is integrated in and supports access to the greater community
- The environment is physically accessible

The HCBS Review Team also may take indoor and outdoor photographs of the building, signage, access doors, etc., as evidence in the setting's OSR file and to submit to CMS for heightened scrutiny review. For confidentiality purposes, no photos are taken of people.

For OSRs with virtual elements, the HCBS Review Team tours the setting through virtual means with the provider using a tablet or cell phone to offer a live, visual (FaceTime or other visual application) opportunity to observe the setting. The HCBS Review Team may request the provider submit photos taken (both indoors and outdoors) during the virtual tour. The Commonwealth may submit these photos to CMS as evidence for settings subject to a heightened scrutiny review. Photos do not include images of people.

The state may decide to follow-up with an in-person visit if only one state reviewer can participate in the virtual tour or if deemed necessary as determined by what is observed.

Settings Observations

The HCBS Review Team seeks to learn about the implementation of provider processes to assure community integration and engagement. The OSR involves discussion with staff, supervisors and leadership, and review of service documentation. Dependent upon the type of setting, the review may involve observation of active service delivery, such as day programs, residential supports or group supported employment. Where possible, the HCBS Review Team focuses discussions with those involved in the frontline application of the provider's service delivery processes. Observations and discussions with provider leadership, supervisors and managers occur in addition to rather than instead of discussions with direct line staff.

The HCBS Review Team makes observations and ask questions to determine:

- Individuals are provided choice, autonomy, and community engagement
- Individuals are provided choice regarding services and who provides them
- The individual has a lease or other legally enforceable agreement providing protections from eviction that tenants have under the landlord/tenant law of the state, county, city or other entity (for settings where landlord tenant laws do not apply, the state must ensure

that a lease, residency or other agreement provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law). The agreement must include at a minimum the agreement length, payment information, use and return of security deposits, maintenance expectations, notice before entry into a unit, and conditions that could initiate an eviction and the process to terminate an agreement, evict a tenant/resident and the process to appeal an eviction. Additional information regarding the Virginia Resident Landlord and Tenant Law Act can be found [here](#).

- The individual has privacy in his or her unit, including lockable doors, choice of roommates and freedom to furnish or decorate the unit
- The individual controls his or her own schedule, including access to food at any time
- The individual can have visitors at any time
- The home is selected by the individual from among setting options
- Policies, procedures and practices promote HCBS rights and integration
- Staff competencies, training, and interactions promote rights of privacy, and respect, as well as freedom from coercion and restraint

Interview with Direct Service Providers, Volunteer and Supervisor

Interviews with staff and volunteers in the setting, including direct service providers and supervisors, are for the HCBS Review Team to learn about implemented practice and processes for assuring individual's experience with community integration, engagement, and autonomy. Additionally, the team asks questions relating to the physical aspects of the setting to determine how they assure the individual's understanding of their options to participate in general community activities with supports/services, including options for employment and where they live. Questions are to determine if individuals have privacy, understand their choice in roommates, and have the liberty to furnish and decorate the room/home in which they reside.

The HCBS Review Team focuses the interviews with staff who are directly involved in the frontline application of the provider's direct service delivery processes, including group home managers, DSPs, sponsored residential providers, day program managers and employment site managers and/or job coaches. Interviews with provider executive leadership and administrative staff occur separately, in addition to rather than instead of conversations with direct line staff. Interviews occur with individual staff and/or in groups to glean as much information from as many people as possible during the OSR. For settings with five or fewer staff, the HCBS Review Team asks all staff to participate in interviews. The HCBS Review Team interviews a 10% sample when the setting has six or more staff.

All staff interviews, regardless of role within the setting, include the following common elements to initiate the discussion:

- Introductions of the HCBS Review Team
- Introductions by the staff, including a short overview of their role with the setting
- An overview of the project and the purpose of the OSRs and the importance of the staff person's participation in the interview
- An overview of the interview process to include:

- An explanation that the interview is intended to be a fact gathering exercise and that notes are taken to inform the OSR to support the provider's goal of organizational compliance with the HCBS Final Rule
- A note that any references to HCBS individuals include the Authorized Representative/Guardian, as appropriate
- A request that the staff person provide candid responses to the questions to seek improvement with the provider's goal for organizational compliance with the HCBS Final Rule
- An opportunity for the provider or staff to ask questions about the process

The HCBS Review Team then uses the state-developed interview questions to facilitate the conversation and record responses. At the conclusion of the interview, the HCBS Review Team provides contact information for the Regional DMAS staff if the person wants to share additional information after the OSR. The HCBS Review Team concludes with an expression of thanks to the person for sharing valuable information and insights.

When conducting a 100% In-Person OSR, the HCBS Review Team selects staff who are present during the OSR for interviews. Otherwise, a selection of staff that regularly work in the setting receive a remote interview session. Virtual interviews occur by telephone, or teleconference, preferably using a webcam for visual participation (with applications such as FaceTime or Zoom Meetings). It is important to convey to the provider these interviews are private so that no other staff or supervisors are present in the room during the interview.

Interviews with Individuals Who Receive HCBS

The HCBS Review Team interviews individuals during the OSR to learn about their experience in the setting and what they understand about their options for services and supports outside the setting. A minimum of 25% of individuals receiving services in a setting are interviewed and no less than 2 individuals for smaller settings of 2-10 persons receiving services. The HCBS Review Team randomly selects individuals for interviews and provides a list of those individuals in the Provider Packet. Individuals receive information about the visit prior to the OSR via the Individual and Family Letter and Individual Interview Fact Sheet. Individual interviews occur outside of the presence of staff. The HCBS Review Team assures individuals that their responses are not shared with staff. Individual participation in an interview is optional. If an individual does not want to participate, the HCBS Review Team works with the provider to identify a replacement, if possible. The HCBS Review Team documents the number of individuals in each setting that refuses an interview.

The HCBS Review Team then uses the interview questions to facilitate the conversation and record responses. At the conclusion of an in-person interview, the HCBS Review Team provides contact information of Regional DMAS staff if the individual wants to share additional information after the OSR.

At the conclusion of a virtual interview, the interviewer verbally or visually (using a paper sign) provides contact information of Regional DMAS staff if the individual wants to share additional information after the interview. If able, the individual can write down the contact information. Other options for sharing this contact information include:

- Inviting the support person back into the room to assist
- Sending the contact information via email
- Sending the contact information via text message
- Mailing a postcard to the individual
- Adding the contact information to the Individual/Family letter prior to sending the provider packet

Regardless of OSR approach, individuals, or family/guardian, may choose to participate in the interview remotely. The HCBS Review Team collaborates with the provider to determine if individuals in the sample have the ability to consent to participation in a private, remote interview. The expectation is the individual can participate independently without assistance from staff other than to set up and start the phone/video call. At the start of a remote video interview, the interviewer will ask the individual if anyone has joined them in the room. If the response is affirmative, the interviewer will ask the individual to introduce their guest. At this time, the interviewer will determine if the guest will be participating in the interview; if yes, they will be asked to move into the video frame and in view.

Attachment B:

Full Evidence List

REDCap Provider Self-Assessment
Mission Statement
HCBS Policy, Community Participation Policy, Provider policies in REDCap
Code of Conduct
DSP Job Description
Video Monitoring Policy and proof of approval
Consent forms signed by individuals and/or guardians
Employee Training Checklist
Staff Orientation Form
HCBS training materials
HCBS staff training records
Lease agreements signed by individuals
HCBS rights disclosure form signed by individuals
Person Centered Individual Support Plans
ISP part V for all individuals reviewed
Person Centered Quarterly Reviews for all individuals reviewed
On Site Visit Tool
House Activity Calendar
Individual Schedules
Pictures of location
Google Maps
Supplemental Risk Assessments
Daily and Monthly Notes for the period of 1/1/2020-1/31/2020
Logs/Data sheets for 1/1/2020-1/31/2020
Interviews with individuals and staff completed on 8/13/2021.

Attachment C:

Summary of Audit Findings

HCBS Standard	Rating
1. Integrated Setting supports access to the Community.	Partially Compliant
2. Individual Choice of Setting.	Partially Compliant
3. Individual Rights	Partially Compliant
4. Autonomy	Partially Compliant
5. Choice	Partially Compliant

Attachment D:

Provider Remediation Plan

Remediation Item	Completion Time Frame	Strategies to Address Remediation Item	Resources Needed to Complete	Notes
Setting Specific				
1. Designated “staff” and “individual” bathrooms.	Immediately	Informing staff and individuals that all restrooms are available for use.	N/A	<i>All individuals/staff will be informed of their right to use any choice of restroom that is available to them immediately.</i>
2. Ability to access all center areas (indoor and outdoor).	Immediately	We are in partial agreement with this assessment. We need further clarification on what “line of sight” entails. There may be certain areas that are unsafe for specific individuals to enter at times. (cleaning products and potential weapons). All individuals will be assessed and a determination made on a case by case basis. Retraining all staff to ensure that it is understood that individuals are able to access all areas (indoor & outdoor) as deemed appropriate at GDS. Staff will be retrained to	Retraining for ISP-Part V writers at GDS. Assessment of individuals needs.	<i>This will be implemented at staff meetings to ensure that staff understands the importance of this matter.</i>

Remediation Item	Completion Time Frame	Strategies to Address Remediation Item	Resources Needed to Complete	Notes
		document in the ISPs that if the individual in question is needing to be within sight at all times, that this is documented accordingly in their GDS Part V.		
3. Provide choice in daily room assignments	Immediately	We respectfully disagree with this assessment. In most cases this is not an issue, however certain individuals have complicated behavioral issues that could present a safety risk for other individuals.	N/A	<i>All individuals will be spoken with to ensure they understand that they are able to move about while at GDS and choose where/who they spend their time with accordingly.</i>
Staff Level				
1. Retrain all setting staff on HCBS Rights. Including right to privacy and the ability to access food as desired.	Immediately	During staff meetings, supervisors will retrain staff to ensure that they understand that all individuals are able to access food as desired, in compliance with their physician prescribed dietary plan. Also retraining the staff at GDS to ensure that they understand HCBS Rights and the privacy of individuals.	Copy of HCBS Rights to provide for Staff to review and keep on hand for future use.	<i>All staff will be informed and will sign a sign-in log which will be submitted through Edoc with the printed names and signatures of those who attend the staff meeting.</i>

Remediation Item	Completion Time Frame	Strategies to Address Remediation Item	Resources Needed to Complete	Notes
2. Train staff on coercion	Immediately	During staff meetings, supervisors will explain the definition of coercion to staff and provide pamphlets that provides further explanation. Coercion will be stated in the ISP (Part V GDS) to be discussed on a monthly basis with each individual with documentation.	Informative pamphlets on coercion and examples of coercion in real life scenarios.	<i>All staff will be informed about coercion and will sign a sign-in log which will be submitted through Edoc with the training materials.</i>
3. Retrain staff on the ability to choose not to attend day support	Immediately	We respectfully disagree with this assessment. This has not been an issue in the past. This only became an issue during the pandemic and staffing crisis. This should be a self-correcting issue.	N/A	<i>Remind staff to have a discussion about any issues or concerns as to why individuals would not want to participate in any GDS activities.</i>
Individual Level				
1. Re-disclose HCBS rights to all individuals.	Immediately	In small groups, inform individuals who attend GDS about HCBS Rights and provide them with informative pamphlets as well as ensure that they understand to the best of their ability.	N/A	<i>After individuals have been provided their HCBS Rights and provided an explanation (as needed), an attestation will be submitted into Edoc.</i>
	Immediately	We need further clarification on what this exactly entails. Staff will	N/A	<i>All staff who support an individual will discuss any identified support needs that</i>

Remediation Item	Completion Time Frame	Strategies to Address Remediation Item	Resources Needed to Complete	Notes
2. Assess safety for the ability to come and go at any time.		discuss at the annual plan meeting about the safety/support needs that would require an individual to be within line of sight and document the support in their ISP for GDS.		<i>would require them to stay within line of sight due to safety concerns while attending GDS, and document this in their ISP (Part V).</i>

