

State of California—Health and Human Services Agency

Department of Health Care Services



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES HEIGHTENED SCRUTINY EVALUATION SETTING SUMMARY SHEET

Home and Community-Based Services

SITE OVERVIEW

Heightened Scrutiny Identification Number	050
Provider Name	Bellaken Garden
Setting Name	Bellaken Garden
Setting Type	
Waiver(s) Served	
Setting Address	
Site Assessment Completion Date	09/10/2019
Heightened Scrutiny Summary Sheet Completion	1/1/2021
Date	
Expected Date of Compliance	12/1/2022

REASON(S) FOR HEIGHTENED SCRUTINY (HS)

\boxtimes	Setting is located in a building that is also a publicly or privately-operated facility
	that provides inpatient institutional treatment

Setting is in a building located on the grounds of, or immediately adjacent to, a
public institution

	nunity Base Services (HCBS) from the broader community of individuals not ing Medicaid
□ Du	ue to the design or model of service provision in the setting, individuals have limited, if any, opportunities for interaction in and with the broader community, including individuals not receiving Medicaid-funded HCBS
	Setting restricts individual choice to receive services or to engage in activities outside of the setting
	Setting is located separate and apart from the broader community without facilitating individual opportunity to access the broader community and participate in community services, consistent with an individual's personcentered plan
	receiv HCBS

SETTING SUMMARY: COMPLIANCE OVERVIEW AND REMEDIATION STRATEGY

Setting is located in a building that is also a publicly or privately-operated facility that provides inpatient institutional treatment

Summary of	This setting
Evidence	There is not physical separation between the two areas and the assessor observed individuals moving freely between the areas. Individuals also participate in activities in both areas. Individuals have limited access to the community and the site has blanket restrictions in place. Specifically, individuals are not allowed to leave the site without staff assistance. Individuals are also monitored if they access the front of the setting. Other restrictions include the site is surrounded by a fence with a gate that is locked at night, visitor restrictions, exterior security cameras, no access to the kitchen, individuals may have restricted access to food, all exterior doors are alarmed at all times, several exits were blocked by chains and signage as they were emergency exits, limited access to money, individuals are encouraged to dine in the dining room for socialization reasons.
Summary of Remediation Strategy	The front gate is no longer locked at night and individuals are encouraged to leave the setting with family and staff members for activities in the community. Individuals and visitors are no longer required to sign in and out but are asked to for safety/security reasons. Alarms will be removed or disabled from sounding so individuals can move freely around the home. Visitors are allowed at all times, including overnight. Individuals can eat where they choose, including their bedroom. Individuals can access the kitchen and food at any time, including storing non-perishable items in their rooms; they can use the main refrigerator for perishable items. Medical services are provided offsite and not from the co-located SNF and individuals are able to request their own medical providers as desired. The setting holds monthly resident council meetings to discuss activities and outings and the administrator noted that a wide variety of activities take place both on and off site. The SNF and assisted living each of their own activities but individuals are able to participate in the on site SNF activities if they desire. Outings are planned in the community throughout the month and based off ideas from the resident council meetings. Individuals can also go on individual outings and the setting has staff to support those who need it. For all modifications to individual rights, these will now be based on an assessed need and documented in the ISP.

Remediation Strategy Approved? □ No



Remediation Sta	tart Date: 01/01/2021	
Remediation End	nd Date: 12/01/2022	
Setting is in a bui	uilding located on the grounds of, or immediately adj	acent to, a public institution
Summary of Evidence		
Summary of Remediation Strategy		
Remediation Stra	trategy Approved? ☐ Yes ☐ No	
Remediation Sta	tart Date:	
Remediation End	nd Date:	



Due to the design or model of service provision in the setting, individuals have limited, if any, opportunities for interaction in and with the broader community, including individuals not receiving Medicaid-funded HCBS

Summary of Evidence						
Summary of Remediation Strategy						
Remediation Stra	tegy Approved?	☐ Yes	□ No			
Remediation Star						
Remediation End	Date:					



Setting restricts individual choice to receive services or to engage in activities outside of the setting

Summary of Evidence						
Summary of Remediation Strategy						
Remediation Strateg	y Approved?	☐ Yes	□ No			
Remediation Start D	ate:					
Remediation End Da	ate:					



Setting is located separate and apart from the broader community without facilitating individual opportunity to access the broader community and participate in community services, consistent with an individual's person-centered plan

Summary of Evidence					
Summary of Remediation Strategy					
Remediation Strategy Approved	? □ Yes	□No			
Remediation Start Date:					
Remediation End Date:					