

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	119
Provider Name	Elim
Setting Name	Elim
Setting Type	
Waiver(s) Served	
Setting Address	
Site Assessment Completion Date	04/25/2019
Heightened Scrutiny Summary Sheet Completion	5/31/2022
Date	
Expected Date of Compliance	06/15/2022

REASON(S) FOR HEIGHTENED SCRUTINY (HS)

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

Comn	g has the effect of isolating individuals receiving Medicaid Home and 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



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						
Evidence						
LVIGCTICC						
Summary of						
Remediation						
Strategy						
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Remediation Str	ategy Approved?	⊔ Yes	□ NO			
Remediation Sta	art Date:					
Remediation En	d Date:					



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

		Summary of
		Evidence
		Summary of Remediation Strategy
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l No	art Date:	Remediation Strategy Remediation Stra



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	Individuals living at Elim have limited access to the community and the site has practices that impede on individual's ability to interact in the community. Specifically, individuals are required to have staff assistance to leave their home. Several restrictions in place limiting individual movement such as delayed egress, locked gates locked doors, and the use of Wander Guards. Elim is dependent upon families to provide transportation and individuals do not have access to transportation for community activities and no community activities either individual or group.
Summary of Remediation Strategy	In response to the summary of evidence, Elim submitted a plan to increase opportunities for community engagement. Elim staff have and will collect information about community resources, transportation, programs, and activities to share with individuals during meetings, Elim intends to create an Individual Service Plan (ISP) with the individual and their team that describes the individual's wants, needs, preferences, goals, and likes/dislikes. The staff will use the ISP to ensure the community resources, transportation, programs, and activities they share with the individual match the person's interests.
	The ISP will guide planning for community activities. The staff will use the ISP and individuals' input to offer a verity of community activities each month. Elim will support individuals to participate in community activities. Individuals who are independent are encouraged to engage in community activities. Family members or staff will accompany individuals who want or need assistance to participate in community activities. The staff will assist the individual with transportation. Individuals are free to come and go as they want unless the person- centered team has identified a need that is documented in the ISP. Any restrictions will be reviewed at least annually.
	Elim provides individuals upon admission a key to the home. Individuals currently living in the home will be offered a key to the home unless a restriction or support was deemed necessary by the person-centered team and documented in the person-centered plan. It will be reviewed at least annually or as needed. Elim removed padlocks from the gates as of February 2022. Individuals can now open the gate independently. The chimes on the exterior doors are in place per regulation the administrator will create a



policy regarding the use of chimes which will be reviewed with staff, individuals and families. The policy will be added to the admission process for review at admission and documented in the ISP. Elim has exterior cameras for the home and is used for safety and security purposes. The video cameras do not record audio and recordings are kept for 30 days. Elim Assisted Living has signage posted informing individuals, staff, and guests that video cameras are recording. Individuals and responsible parties can request to see relevant footage from the administrator. The policy will be reviewed with individuals currently living in the home, responsible parties and staff by 6/15/2022 and then upon admission, at least annually, or as needed thereafter
Elim supports individuals to run errands independently of their housemates. Any restrictions or support needed are based on an assessed need, reviewed by the person-centered team, and documented in the person-centered plan. Staff are available to assist an individual with running errands as needed. The administrator will review this information with individuals, responsible parties, and staff before 6/15/2022 and then upon admission, at least annually, or as needed thereafter. Individuals also have the opportunity to participate in community outings with their housemates. If any individual has an assessed need that warrants a restriction, the person-centered team will document the restriction in the person-centered plan. Staff are available to accompany individuals into the community if needed. The administrator will inform staff, individuals, and responsible parties of the opportunities of group activities on a monthly or as needed basis. The administrator will review with individuals currently living at the setting, staff, and responsible parties before 6/15/2022.

Remediation Strategy Ap	□ No	
Remediation Start Date:		
Remediation End Date:	06/15/2022	



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

Summary of Evidence	The assessor noted that the exterior doors were locked and alarmed. The gates lock from the inside with padlocks and only staff have keys to the gate. The provider stated that Wander Guards are used at Elim . The assessor observed the "egress and delay" policy at Elim .
Summary of Remediation Strategy	In response to the summary of evidence Elim provides individuals upon admission a key to the home. Individuals currently living in the home will be offered a key to the home unless a restriction or support was deemed necessary by the person centered team and documented in the person centered plan. It will be reviewed at least annually or as needed. Elim removed padlocks from the gates as of February 2022 where individuals can now open the gate independently. The chimes on the exterior doors are in place per regulation the administrator will create a policy regarding the use of chimes which will be reviewed with staff, individuals and families. The policy will be added to the admission process for review at admission and documented in the ISP. Elim has exterior cameras for the home and is used for safety and security purposes. The video cameras do not record audio and recordings are kept for 30 days. Elim has signage posted informing individuals, staff, and guests that video cameras are recording. Individuals and responsible parties can request to see relevant footage from the administrator. The policy will be reviewed with individuals currently living in the home, responsible parties and staff by 6/15/2022 and then upon admission, at least annually, or as needed thereafter.

Remediation Strategy Ap	□ No	
Remediation Start Date:	05/31/2022	
Remediation End Date:	06/15/2022	



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?	□ Ves	□ No			
	□ 162				
Remediation Start Date:					
Remediation End Date:					