



State of California—Health and Human Services Agency  
**Department of Health Care Services**



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

**Home and Community-Based Services**

**SITE OVERVIEW**

Heightened Scrutiny Identification Number	<b>221</b>
Provider Name	<b>LJMP LP (dba Capri in the Desert)</b>
Setting Name	<b>LJMP LP (dba Capri in the Desert)</b>
Setting Type	
Waiver(s) Served	
Setting Address	
Site Assessment Completion Date	<b>07/18/2019</b>
Heightened Scrutiny Summary Sheet Completion Date	<b>06/02/2022</b>
Expected Date of Compliance	<b>12/02/2022</b>

**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

- Setting has the effect of isolating individuals receiving Medicaid Home and Community-Based Services (HCBS) from the broader community of individuals not receiving Medicaid HCBS
  - 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
  - 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 person-centered 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**

<b>Summary of Evidence</b>	
<b>Summary of Remediation Strategy</b>	

**Remediation Strategy Approved?**     Yes     No

**Remediation Start Date:** \_\_\_\_\_

**Remediation End Date:** \_\_\_\_\_

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



<b>Summary of Evidence</b>	
<b>Summary of Remediation Strategy</b>	

**Remediation Strategy Approved?**     Yes     No

**Remediation Start Date:** \_\_\_\_\_

**Remediation End 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**

<p><b>Summary of Evidence</b></p>	<p>LJMP LP is now Capri in the Desert. At the time of the assessment, Capri in the Desert reported that they provided services to one individual through the home and community-based service (HCBS) wavier program. They reported that individuals had high level of medical needs. Individuals living at Capri in the Desert have limited opportunities for interaction in and with the broader community. Capri in the Desert did not provide information about community services. Individuals were not supported to participate in community integrated activities like adult day care or senior centers. Capri in the Desert did not plan activities in the community. Individuals did not have the opportunity to participate in community activities with or without their housemates/roommates.</p> <p>Capri in the Desert employs practices that impede individuals’ access to the community. Individuals were not permitted to leave their home except for emergencies or medical appointments. The doors are locked, and individuals did not have a key to enter their home. The doors were alarmed or chimed. Capri in the Desert used video monitoring.</p>
<p><b>Summary of Remediation Strategy</b></p>	<p>Capri in the Desert submitted a Remediation Work Plan (RWP) that described their plan to promote community integration. They intend to provide information about community services during semi-annually house meetings and individual meetings. The administrator intends to share information about libraries, post offices, local businesses, transportation, senior centers, and adult day care. Staff will support individuals by assisting them to research, contact, and coordinate exchange of information. The staff will assist in finding senior centers and adult day programs that fit an individual’s needs and wants, as described in their person-centered plan. As part of the admission and during annual meetings, the administrator will review options for senior centers and adult day care with individuals.</p>



Capri in the Desert said that they will assist individuals in arranging transportation for non-medical community activities. Individuals will be supported to access the community unless there is a need identified through a person-centered assessment that is documented in the person-centered plan. Staff can assist individuals in securing third party transportation for any activity. The administrator intends to share information about transportation options with individuals during admission and at least annually.

As part of the remediation, the Activity Director will plan community outings based on suggestions from individuals. The Activity Director will share information about local events and planned outings on a monthly calendar. During house meetings that occur at least semi-annually, the administrator will review community events and remind individuals that they can request community activities. Staff are available to assist individuals to run errands or go separate from their roommates/housemates. Individuals will also have the opportunity to participate in community activities with their housemates/roommates. Group activities are also posted on the activity calendars made by the activity director.

Capri in the Desert develop a process for ensuring that restrictions were imposed only after the person-centered team identified a need through an assessment. If there is an assessed need, it is documented in the person-centered plan and reviewed at least annually. Individuals can access the community as they desire. They can leave their home with a friend or family member without a physician's order. Any restriction or support needed to access the community is based on an assessed need that is reviewed by their person-centered team and documented in their person-centered plan. The exterior doors to the home are locked and alarmed. Individuals are given a key to their home. It is offered at admission and at least annually unless there is an assessed need that results in a support for maintaining a key or a restriction. Supports and restrictions are identified in the person-centered plan, also known as the Individual Service Plan (ISP). Capri in the Desert informs individuals that doors are alarmed or chimed at admission and annually. They will update the admission agreement to indicate that the chimes are used to notify staff when a door is open and not to track or monitor individuals unless there is an assessed need for that individual. Capri in the Desert describes the use of video cameras ensuring that individuals know that audio is not recorded, the footage is maintained for two weeks. Individuals and/or their responsible parties can review the recording before it is erased. The video policy will be reviewed at admission and at least annually after that. Any restrictions are documented in the ISP based on assessed need and reviewed at least annually.



Remediation Strategy Approved?  Yes  No

Remediation Start Date: 06/02/2022

Remediation End Date: 12/02/2022

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

<b>Summary of Evidence</b>	Capri in the Desert employs practices that impede individuals' access to the community. Individuals were not permitted to leave their home except for emergencies or medical appointments. The doors are locked, and individuals did not have a key to enter their home. The doors were alarmed or chimed. Capri in the Desert used video monitoring.
<b>Summary of Remediation Strategy</b>	Capri in the Desert develop a process for ensuring that restrictions were imposed only after the person-centered team identified a need through an assessment. If there is an assessed need, it is documented in the person-centered plan and reviewed at least annually. Individuals can access the community as they desire. They can leave their home with a friend or family member without a physician's order. Any restriction or support needed to access the community is based on an assessed need that is reviewed by their person-centered team and documented in their person-centered plan. The exterior doors to the home are locked and alarmed. Individuals are given a key to their home. It is offered at admission and at least annually unless there is an assessed need that results in a support for maintaining a key or a restriction. Supports and restrictions are identified in the person-centered plan, also known as the Individual Service Plan (ISP). Capri in the Desert informs individuals that doors are alarmed or chimed at admission and annually. They will update the admission agreement to indicate that the chimes are used to notify staff when a door is open and not to track or monitor individuals unless there is an assessed need for that individual. Capri in the Desert describes the use of video cameras ensuring that individuals know that audio is not recorded, the footage is maintained for two weeks. Individuals and/or their responsible parties can review the recording before it is erased. The video policy will be reviewed at admission and at least annually after that. Any restrictions are documented in the ISP based on assessed need and reviewed at least annually.

Remediation Strategy Approved?  Yes  No



Remediation Start Date: 06/02/2022

Remediation End Date: 12/02/2022

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?  Yes  No

Remediation Start Date: \_\_\_\_\_

Remediation End Date: \_\_\_\_\_