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State of California—Health and Human Services Agency

Department of Health Care Services



GAVIN NEWSOM GOVERNOR

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

Home and Community-Based Services

SITE OVERVIEW

Heightened Scrutiny Identification Number	249
Provider Name	Oak Park Manor
Setting Name	Oak Park Manor
Setting Type	
Waiver(s) Served	
Setting Address	
Site Assessment Completion Date	07/19/2019
Heightened Scrutiny Summary Sheet Completion	06/12/2022
Date	
Expected Date of Compliance	11/15/2022

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

- 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

Summary of Evidence	
Summary of Remediation Strategy	

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

Summary of Evidence	
Summary of Remediation Strategy	

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

Summary of Evidence	Oak Park Manor employs systemic and physical barriers that impede community access. The back yard has two gates that are always locked. The exterior doors are locked, and individuals rely on staff to let them in. Individuals do not have keys to their homes. Video cameras are used in the foyer, the hallways, and other shared areas in the home. Individual have limited opportunities to interact in and with the broader community. Individuals are not permitted to leave their home without family or staff. Restrictions are not individualized but based on their diagnosis of dementia. Individuals were required to sign out when leaving with their families. Oak Park Manor does not plan community activities as part of its plan for service. Individuals do not have the opportunity to go out separate from or together with their housemates/roommates. Individuals do not participate in community integrated services like senior centers or adult day care.	
Summary of Remediation Strategy	In response, Oak Park Manor submitted a Remediation Work Plan (RWP) that describes a process for ensuring restrictions or modifications are based on individualized assessed need, documented in the Individual Service Plan (ISP), and reviewed by the person-centered team at least annually. Individuals are supported to participate in community activities unless there are restrictions documented in their ISP based on assessed needs and reviewed at least annually. Individuals are not required to sign in and out. Staff request that individuals let staff know if individuals are going to be out later than usual. Oak Park Manor addressed physical barriers stating that individuals are offered the keys to the doors and gates unless otherwise documented in their ISP. If an individual does not accept the option to carry their own key, they are reminded that they can change their mind at least annually. Oak Park Manor will create a video monitoring and disclosure policy to include the placement of cameras, access to recordings, storage of recordings, and disposal of recordings. There will be a sign stating that video cameras are in use.	



Oak Park Manor intends to increase opportunities individual have for community engagement. Using information about individuals' needs, like, preferences, and goals and ongoing input to plan community activities. Individuals can participate in community activities as they choose unless there is an assessed need documented in their ISP. When someone has an assessed need that says they require assistance while participating in community activities, the administrator will provide or arrange for someone to go with the individual or individuals. Individuals can be supported to go out with or without their housemate/roommates. Supports and restrictions will be reviewed no less than annually.

Remediation Strategy Approved? x Yes \Box No

Remediation Start Date: 06/08/2022

Remediation End Date: 11/15/2022



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

Summary of Evidence	Oak Park Manor employs systemic and physical barriers that impede community access. The back yard has two gates that are always locked. The exterior doors are locked, and individuals rely on staff to let them in. Individuals do not have keys to their homes. Video cameras are used in the foyer, the hallways, and other shared areas in the home. Individual have limited opportunities to interact in and with the broader community. Individuals are not permitted to leave their home without family or staff. Restrictions are not individualized but based on their diagnosis of dementia. Individuals were required to sign out when leaving with their families
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Remediation	Strategy	Approved?	x Yes	🗆 No

Remediation	Start Date:	06/08/2022

Remediation End Date: 11/15/2022



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 S	Strategy Approved?	□ Yes	□ No			
Remediation S	tart Date:					
Remediation E	nd Date:					