



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	267
Provider Name	Quality
Setting Name	Quality
Setting Type	
Waiver(s) Served	
Setting Address	
Site Assessment Completion Date	6/27/2019
Heightened Scrutiny Summary Sheet Completion Date	6/11/2022
Expected Date of Compliance	12/06/2022

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	<p>Quality CLHF does not actively promote community engagement. The provider relies on families for transportation for non-medical activities. Community activities are not planned due to transportation limits and the support needs of individuals. The provider relies on the physician to restrict community access.</p>
Summary of Remediation Strategy	<p>Quality CLHF submitted an accepted plan to come into compliance with the final rule. Quality CLHF stated that individuals are assisted by staff to set up third party transportation services for any activities, not just medical appointments. Quality CLHF also stated that public transportation is accessible, and staff are available to provide assistance as well. Additionally, the provider stated any restriction or support needed is based on an assessed need that is reviewed by the person-centered team and documented in the person-centered plan. The administrator will review this these options with individuals upon admission, at least annually, or as needed. The start date is 6/6/22 with a completion date of 12/06/2022.</p> <p>Quality CLHF stated the setting provides outings and activities in the community. The person-centered plans outline the likes and preferences of the individuals as well as any support or restriction needed based on an assessed need. Any assessed need is reviewed by the person-centered team and documented in the person-centered plans. Activities are reviewed by the activity director at least monthly or as needed. Additionally, the provider states that individuals have access to transportation through third party and public services. Staff are available to assist with accessing these options for any activity, not just medical appointments. This will also be reviewed with individuals, responsible parties, and staff. The start date is 6/6/22 with a completion date of 12/06/2022.</p> <p>Quality CLHF states the setting encourages community involvement of individuals in consideration of their person center plan and care plan that includes the individual’s needs and preferences. Additionally, the provider states that the setting does not require staff to accompany an individual unless there is a person-centered assessment that addresses any health and safety concerns regarding going into the community unaccompanied. Any restrictions from the person-centered assessment are documented in the individual’s ISP and reviewed semi-annually and as needed by the administrator. Those who need additional support as documented by a person-centered assessment are supported to access the community with staff. The administrator or Director of</p>



	<p>Nursing will be responsible for communicating this information with staff and individuals currently in the setting and as part of the admission process going forward. These changes will begin 6/6/22 and be completed by 12/6/22.</p>
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Remediation Strategy Approved? Yes No

Remediation Start Date: 06/01/2022

Remediation End Date: 12/06/2022



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

Summary of Evidence	The administrator said they do not impose restrictions regarding access to the community, however, they noted that individuals must be accompanied by a staff member when leaving the site due to their support needs. They said they do not enforce a curfew but added that it would be rare for an individual to leave the setting after hours, noting that people prefer to remain onsite in the evenings. They said some people have conditions or diagnoses that restrict their ability to leave the setting but noted that these limitations are required by individuals' physicians, adding that this information is documented in each person's care plan.
Summary of Remediation Strategy	<p>Quality CLHF states the setting encourages community involvement of individuals in consideration of their person center plan and care plan that includes the individual's needs and preferences. Additionally, the provider states that the setting does not require staff to accompany an individual unless there is a person-centered assessment that addresses any health and safety concerns regarding going into the community unaccompanied. Any restrictions from the person-centered assessment are documented in the individual's ISP and reviewed semi-annually and as needed by the administrator. Those who need additional support as documented by a person-centered assessment are supported to access the community with staff. The administrator or Director of Nursing will be responsible for communicating this information with staff and individuals currently in the setting and as part of the admission process going forward. These changes will begin 6/6/22 and be completed by 12/6/22.</p> <p>Quality CLHF also indicates that individuals will be provided keys to enter the setting as they desire unless there is a person-centered assessment that addresses any health and safety concerns regarding having keys to the setting to go into the community unaccompanied. Additionally, the Round 2 RWP states all areas of the backyard will be made accessible to all individuals, including those who use mobility devices, and signing in/out is not mandatory.</p>

Remediation Strategy Approved? Yes No

Remediation Start Date: 06/01/2022

Remediation End Date: 12/06/2022



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: 06/01/2022

Remediation End Date: _____