

The State of Michigan
High Scrutiny Evidence packet

Provider's Name: Burcham Hills Assisted Living	
Location of the Setting: East Lansing, Michigan	Type of Setting: Residential
Waiver Services Being Provided at the setting: Assisted Living	
Heightened Scrutiny Prong	
<input type="checkbox"/> Prong1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment <input checked="" type="checkbox"/> Prong2: Setting is in a building or on the same grounds of, or adjacent to, a public institution. <input type="checkbox"/> Prong3: setting has an effect of isolating individuals from the broader community	
Recommendation	
As required by 42 CFR 441.301 (c) (5), the State of Michigan submits this request for heightened scrutiny review for the setting identified above. The State has compiled evidence that the setting is integrated and supports full access of individuals to the greater community, is selected by the individual from among disability and non-disability-specific settings, ensures individual rights, and promotes individual initiative, autonomy, choice, and independence.	

Section 1: Facility Description

The Burcham Hills campus is privately owned and operated. The campus includes independent living, a licensed home for the aged (assisted living), and skilled nursing, long-term care facility options.

Burcham Hills Independent and Assisted Living facilities do not share staff or services with the skilled nursing facility and operate as stand-alone facilities.

The assisted living and independent living facility have a dedicated Executive Director responsible for operations.

Burcham Hills independent and assisted living residential options include studio and 1-bedroom apartments and include private bathrooms. It is situated within a populated residential urban area near downtown shopping and the university campus.

The Assisted Living and Skilled Nursing facility is located in the same building, but they are separated by locked doors and are located on separate floors. The Independent Living facility is individual condos located on the campus but not attached to the same building as the assisted living and skilled nursing facility.



Evidence:

- A-Assisted living facility license
- C-SNF license
- D1 Burcham maps and pictures pages 8, 14-15, 31

- A2-2021 LARA license
- C2-2021 SNF License
- D1-maps and pictures pages 8, 14-15, 31
- E4-Executive Director PD, E9-Scheduling Coordinator, E10-Staff Development Coordinator,



-  A-Asst Living FACILITY LICENSE-an
-  A2 2021 License LARA.pdf
-  C- SNF ADJOINING FACILITY LICENSE-an
-  C2 2021 SNF License.pdf
-  D1 Burcham maps and pictures.pdf
-  E4-EXECUTIVE DIRECTOR-annotate
-  E9-SCHEDULING COORDINATOR-ann
-  E10-STAFF DEVELOPMENT COC

Section 2: Final Rule Compliance and Input from Individuals, Family Members, Guardians, and Staff

This setting accepts people who are on Medicaid waiver as well as those not on Medicaid. All residents receiving Medicaid funded HCBS are provided the same opportunities to receive services and supports and participate in social and/or recreational activities in the same manner as individuals who are not receiving Medicaid funded HCBS.

This setting does not limit residency based on disability or diagnosis. Residents are admitted regardless of disability or diagnosis as long as the setting is able to meet their needs.

There are options to use providers, supports, and services at the setting, but participants are able to choose to use options outside the residence if they choose to do so. Individuals are able to update or change the services and supports they receive based on their preferences and needs, and they are able to refuse services if they choose.

This setting does not prohibit individuals from coming and going from the setting. The setting does not try to limit activities the individuals participate in, such as shopping, religious or spiritual services, scheduling appointments, participating in meals with friends and family, participating in any activities, participating in

community events, participating in school or volunteer activities, engaging in legal activity (voting, drinking, gambling, etc) or any other activity the participant chooses to participate in. There is a new activity calendar posted every month in various locations in the building so the residents can choose which activities they would like to participate in.

This setting does not have visiting hours. Participants can come and go 24/7. Participants at this setting are able to come into the setting at all hours. Participants can have visitors 24/7. Individuals arrange and control their personal schedules of daily appointments and activities. There is a log-in and out book for visitors and residents on each floor. A family member stated they could take their mother out any time of the day. Residents are free to move about the outside campus 24/7; staff will assist those for whom this will be unsafe. There is a patio area outside with a fence and gate, but there is no lock. Direct observation of residents entering and exiting the facility, some accompanied by staff, others on their own, and some were sitting in outdoor seating and garden areas. The procedure for entering a resident's apartment is to knock, wait for a response, knock again, and wait for a response. If none, enter and announce who you are and why you have entered the room.

Residents at this setting have leases or residential agreements offering eviction protections and information on appealing evictions.

This setting does not restrict common areas. Common areas are not locked within the facility, and individuals have full access to all common areas. Access to the building and within the facility is barrier-free (wheelchair ramp) and accessible.

This setting provides all residents with their policies, which outline individual rights, protections, and expectations of services and supports in an understandable format.

Information about filing an anonymous complaint at this setting is in an understandable format and posted in an obvious location. Individuals are also provided with the information on how to discuss any concerns with staff if they choose to discuss concerns with staff.

This setting protects the privacy of individuals' health and personal information by keeping this information locked up. The staff does not discuss individual residents' issues in public spaces.

When addressing individuals, this setting addresses the individual in the manner they prefer.

This setting does not control residents' funds. Residents access and control their own funds.

Residents at this setting have a safe and locked space to store their belongings.

Provider staff receives training and continuing education on individual rights and protections.

All participants have locks on the entry door to their room and have the keys. Only necessary staff have the keys to participants' rooms. All shared, or public restrooms are equipped with locks. Staff members are respectful of entering participants' private rooms. They do not enter without permission of the participant or notifying them if they need to enter. Before entering the participant's private room, staff knocks; if there is no answer, staff knock

again; if still no answer, staff will open the door and call out for the participant and let them know they are there. If there is still no answer, staff will enter the participants' private room to conduct a welfare check. Upon moving in, residents are given the key to their apartment and a separate key for their mailbox. The staff has a key to the doors. Residents may request additional security locks if they are away from the setting for longer (e.g., admission to a hospital or rehabilitation area). The maintenance department only has the capacity to install and remove these additional locks. The residents may designate an individual(s) in writing who would be allowed in the apartment, and Maintenance Department would give them access as needed.

If the participant has a shared room, the participant has a choice of roommate. Participants have the freedom to furnish or decorate their rooms.

This setting does not have restrictions on food. The setting does have scheduled mealtimes, but participants do not have to eat during those times. Residents can choose what they eat, when, where, and with whom they eat. Dining rooms have several menu options. Residents choose from standard and special items, and staff bring the food to the resident's table. The wait staff knows dietary restrictions in the dining areas, and the reviewer observed guidance being given to a resident respectfully. Meals are served at specific hours of the day, but snacks and beverages are available 24/7. Residents are free to choose mealtime companions and where they sit in the dining area. Residents may request meals to be taken to their own apartment. Residents can have refrigerators and microwaves in their apartments as well as access to facility kitchenettes (microwave, refrigerators) in common areas. The kitchenette is stocked with fruit, snacks, and beverages at all times. The facility provides mini-refrigerators and microwaves. Food can be kept and consumed whenever the resident wishes. The facility has a commercial kitchen that is locked, and only staff may access it. The facility is barrier-free, and staffs are also available to assist if needed.

This setting will provide assistance to residents who need help with dressing, showering, or other hygiene matters. Participants are able to wear whatever clothing they want and can get assistance with dressing. The setting does ensure privacy for the individual when providing assistance.

The setting must comply with all aspects of the CMS Final Rule. The person-centered service plan must be developed through an individualized planning process and is driven by the individual. Any modification to the rule must be done on a case-by-case basis and should never apply to all. Any modification must be documented in the person-centered service plan. The HCBS Final Rule states the modification should:

1. Identify a specific and individualized assessed need.
2. Document the positive interventions and supports used prior to any modifications to the person-centered service plan.
3. Document the positive interventions and supports used prior to any modifications to the person-centered service plan.
4. Include a clear description of the condition that is directly proportionate to the specific assessed need.
5. Include regular collection and review of data to measure the ongoing effectiveness of the modification
6. Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
7. Include the informed consent of the individual or guardian
8. Include an assurance that interventions and supports will cause no harm to the individual.

All modifications would need to be reviewed frequently and the service plan updated to ensure the participant still needs the modifications.

Evidence:

- D1-maps and pictures pages 4, 5, and 29
- H3 – Move-in Orientation (discuss log request), H4 – Resident Handbook (sign in/out process),
- I1_Benie DL resident interview, I2_Benie JB interviews
- J1_Staff_DQuisenberry interview

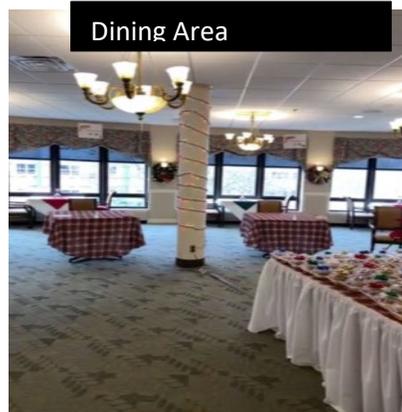
The residence is physically accessible to all individuals. Barrier-free facility design as well as assistive devices such as handrails, grab bars, shower chairs, elevators with low set keypads to select floors, elevator doors slow-timed for closing, and wide doorways.

Modifications are available to set up as deemed necessary by assessments. There are various areas to visit in comfortable seating areas. The facility is barrier-free, and furniture is spaced to allow assistive devices.

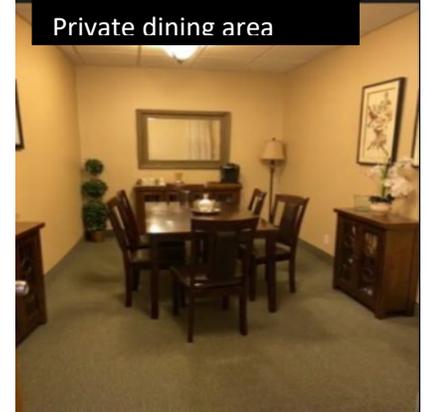


Evidence:

- D1-maps and pictures pages 1,2,9,10,19, 20, and 24
- H3 – Move-in Orientation (reminder about keeping accessible personal space)
- I1_Benie DL, I2_Benie JB resident interview
- J1_Staff_DQuisenberry interview



Dining Area

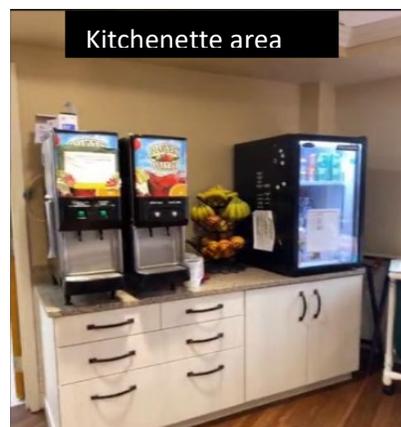
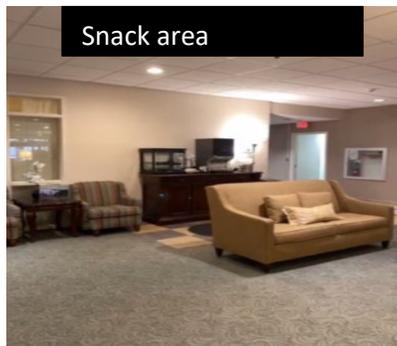


Private dining area

Residents may do their own laundry, or staff will assist. The residents' laundry room is available 24/7; staff will provide full laundry service if requested.

Evidence:

- D1 – maps and pictures of snack/beverage areas mealtimes advertised on scrolling electronic announcement board. pages 5,6,7,8,27,28, and 30
- H3 – move-in orientation discussing visitor dining, H4 – Resident Handbook
- I1_Benie_DL, I2_Benie_JB (reports snacks out all the time and availability of kitchenette to make something) resident interviews
- J1_Staff_DQuisenberry interview



			
D1 Burcham maps and pictures.pdf	G2 - POLICIES and PROCEDURES-anno	H3 MOVE IN ORIENTATION PACK	H4 RESIDENT HANDBOOK-annota
			
I1_Benie_DL.pdf	I2_Benie_JB.pdf	J1_Staff_DQuisenberry.pdf	

The facility is a stop on the public bus route. The facility bus can be scheduled for personal transport or group transport to destinations within the broader community. Residents may also park and use their own vehicles. A personal wellness assistant or front desk receptionist assists with arranging transportation (facility, public or private) for residents as needed and can ensure accessibility as needed (accommodating wheelchairs). Staff will assist with bust routes and rates upon request. Taxi service is also available when requested.

Evidence:

- D1-maps and pictures of facility van-accessible page 33
- E8 Personal Wellness Assistant PD (responsible for transportation tasks)
- H3 – Move-In Orientation (contact number to schedule transportation), H4 Resident Handbook (scheduled and personalized transportation)
- I1_Benie_DL, I2_Benie_JB interviews
- J1_staff_DQuisenberry interview



This setting does not limit communication devices. Individuals can have and use landlines, cell phones, personal computers, and TV's 24/7 without restriction. Residents are free to use personal communication devices such as cell phones, landline phones, personal computers, and tablets in private at any time. The facility has computers available in the library for residents' use, and they are spaced apart so as to create privacy. Individual bedrooms have a telephone jack, wireless internet, or an Ethernet jack.

Evidence:

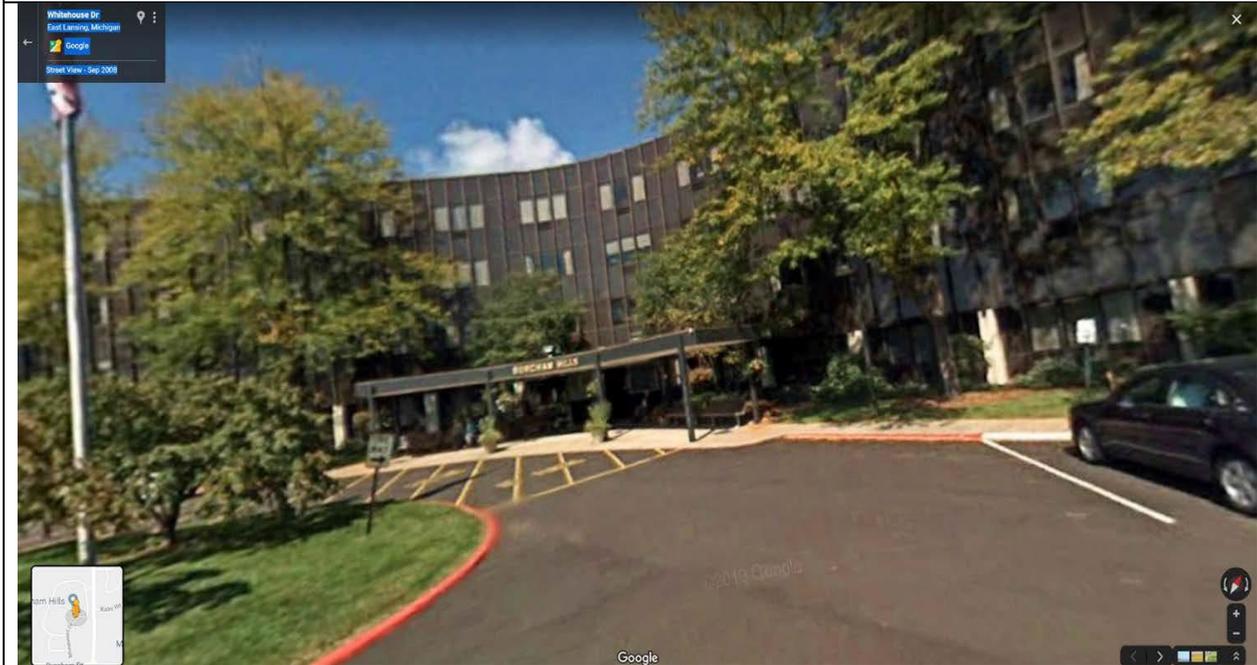
- D1 – maps and pictures pages 10,11,21,22
- G1 – Staff Handbook (Resident Rights), G2 – Policies and Procedures (Daily Check-In)
- H4 – Resident Handbook, H6 – Services Agreements (Wi-Fi and phone connection information)(Apartment access authorization form)
- I1_Benie_DL, I2_Benie_JB resident interviews
- J1_Staff_DQuisenberry interview
- Direct observation of residents engaging in cell phone conversations and playing games on personal tablet devices
- Direct observation of staff knocking, awaiting a response, and entering the room, addressing the resident respectfully by title and last name.

This setting, as well as the MI Choice waiver program, prohibits the use of physical restraints and/or restrictive interventions. Staff receives training and continuing education on individual rights and protections. The facility uses Relias training in-house as well as in-person presentations. A set schedule has been established, and topics are presented monthly each year to ensure annual coverage. Additional topics may be presented along with the mandatory topics.

- E1 – Clinical Services Manager PD (responsible for training), E2 – Care Coord PD, E3-Caregiver PD, E8-Personal Wellness Assistant PD (participate with training, ensure compliance with rights), E10 – Staff Development Coordinator PD (responsible for carrying out training, coordinating onboarding, present continuing education)
- F-1—Staff Training Log – monthly schedule of topics
- G1 – Staff Handbook, G2 – Policies and Procedures (Confidentiality of Resident Information, In-Service Education, Med Mgmt-Antipsychotic Drugs, Restraints, Bedside Mobility Aids, Roam Alert Devices, Visitors)
- H6 Services Agreements (resident rights and privacy acknowledgment)
- J1 Staff_DQuisenberry interview

						
D1 Burcham maps and pictures.pdf	E1 -CLINICAL SERVICES MANAGERCOORDINATOR-annotated.pdf	E2-CARE	E3-CAREGIVER-annotated.pdf	E8-PESONAL WELLNESS ASSISTANDEVELOPMENT COC	E10-STAFF TRAININGS-annotated.pdf	F-STAFF
						
G1 -STAFF HANDBOOK-annotated.pdf	G2 - POLICIES and PROCEDURES-annotated.pdf	H4 RESIDENT HANDBOOK-annotated.pdf	H6 SERVICES AGREEMENTS-annotated.pdf	I1_Benie_DL.pdf	I2_Benie_JB.pdf	J1_Staff_DQuisenberry.pdf

Section 3: Additional Evidence



Exterior entrance



Lobby area



Resident sign in/ sign out area



Dining room entrance



The patio area has fenced a gate but no lock



Sink area – can be replaced with barrier-free if needed



Elevator accessible



Resident kitchenette area



Facility van



Electronic marquee



Camera at the end of the Hallway



Accessible hallway



Snack area available 24/7



No keyed area to elevator



Elevator rail



Bathroom door with lock Hallway entrance to public bathroom Commercial kitchen – no access to residents, keypad



lock

Resident Laundry

Resident Laundry Area

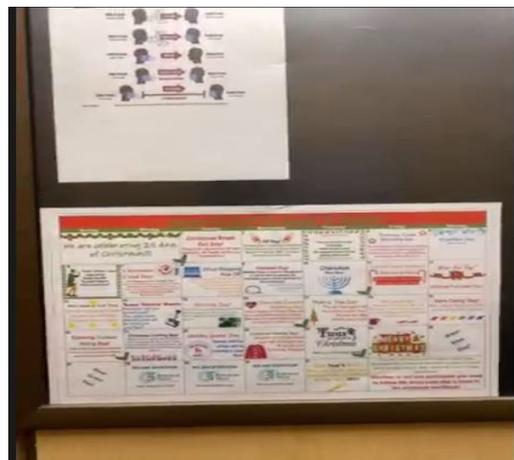
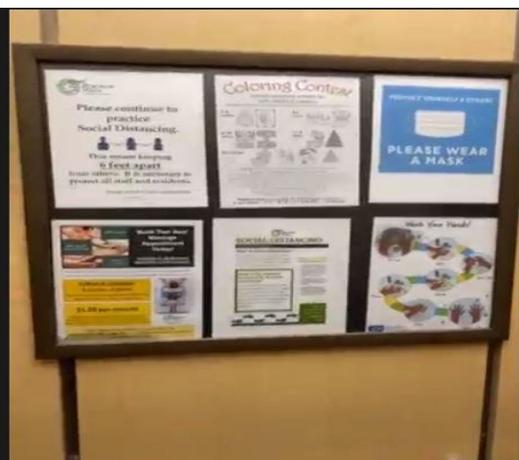
Resident storage available in laundry



area

Public Postings in elevator

Activities Posted in the elevator



The doorknob to laundry area/ With deadbolt to lock if needed Interior from laundry room



Commercial laundry – not available to residents



Entrance to skilled area- Keypad



Keypad to maintenance hallway/Maintenance hallway



Salon entrance



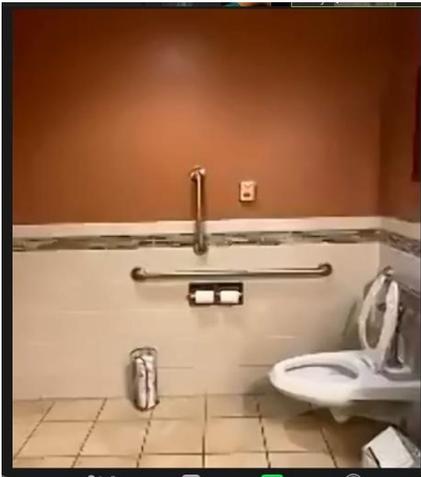
Entrance to the resident room – old style doorknobs being converted to paddle-style



Interior bathroom door



Public bathroom – accessible



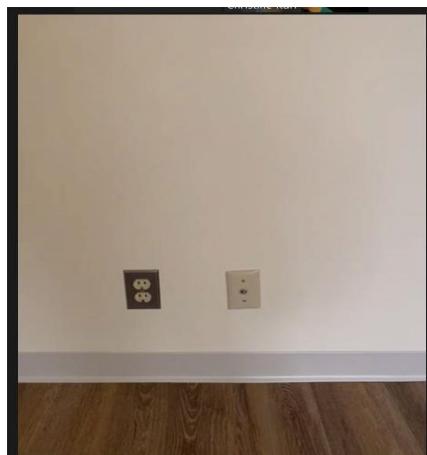
Bathroom door with lock Resident's room



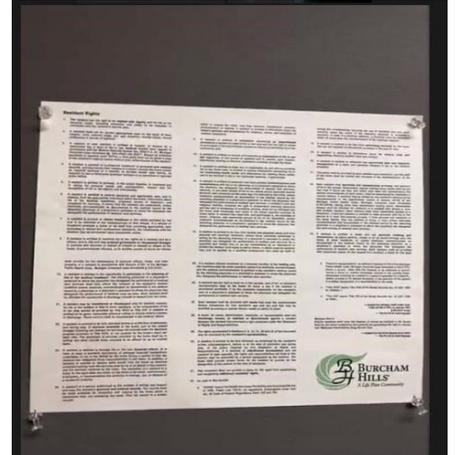
Phone Jack



Cable outlet



Hallway posted resident rights



Exercise bike for use



Nurses station



Nurse station entrance- can be locked



Comment cards



We value your opinions. Please evaluate the following:

Courtesy of Staff: *Excellent* *Good* *Fair* *Poor*

Name of Server: _____

Timeliness of Service: *Excellent* *Good* *Fair* *Poor*

Quality of Food: *Excellent* *Good* *Fair* *Poor*

Accuracy of Order: *Excellent* *Good* *Fair* *Poor*

Date: _____ Meal: _____

Other comments: _____

Name: _____ Apt#: _____

Please check if you prefer a personal follow-up regarding your comments by: Dining Manager Chef Director

Section 4: Public Comment