

**The State of Michigan**  
**High Scrutiny Evidence packet**

<b>Provider's Name:</b> Villas at Traverse Point	
<b>Location of the Setting:</b> Traverse City, Michigan	<b>Type of Setting:</b> Residential
<b>Waiver Services Being Provided at the setting:</b> Assisted Living	
<b>Heightened Scrutiny Prong</b>	
<div style="margin-bottom: 5px;"><input type="checkbox"/> Prong1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment</div> <div style="margin-bottom: 5px;"><input checked="" type="checkbox"/> Prong2: Setting is in a building or on the same grounds of, or adjacent to, a public institution.</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> Prong3: setting has an effect of isolating individuals from the broader community</div>	
<b>Recommendation</b>	
<p>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.</p>	

## Section 1: Facility Description

Villas at Traverse Point Assisted Living Facility (ALF) is located in the same building as a Skilled nursing facility (SNF) but has a separate barrier-free entrance/exit. The ALF was formerly known as Concord Place, and the campus map references that name. Now they are known as "The Villas at Traverse Point." There are also some shared community rooms between the SNF and the ALF, such as those used for faith services. A key-pad locked door separates the two facilities. Individuals in the ALF can ask staff to open the door to visit individuals in the SNF and access the shared community rooms. Assisted living is not separately licensed.

The setting offers only private units with private half-baths. None of the units have kitchenettes, but there are no prohibitions on individuals supplying their own mini-fridges. There are no showers/bathtubs in individual unit bathrooms but instead shared shower "spa" rooms.

### Evidence:

- B1-Governance sheet
- C1- Adjoining SNF license
- D1-maps and pictures, D2-Campus map



B1-Governance-Concord Organizational



C1- Adjoining SNF Licence 7.31.pdf



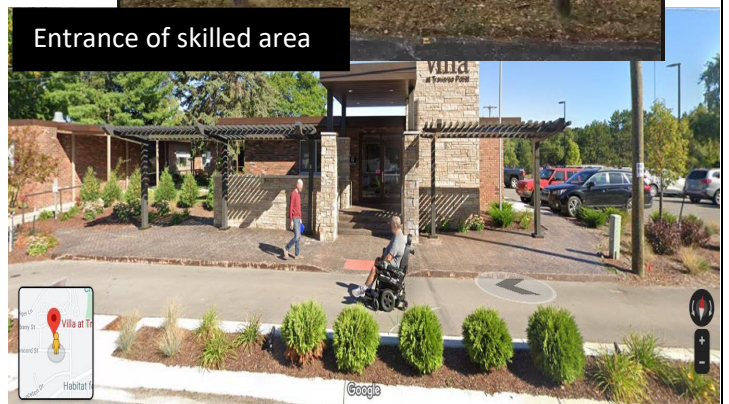
D1\_Villas detail maps\_pictures.pdf



D2-Campus Map-Villas at Trav Pointe-



Entrance of skilled area



## 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.

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.

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.

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. The exterior door is locked after 10 pm for security, but a phone is available by the door to have staff unlock it if returning after hours. There is a sign-in/out book at the entrance for residents and visitors. The need for assistance is dependent on individual assessments as documented in a care plan.

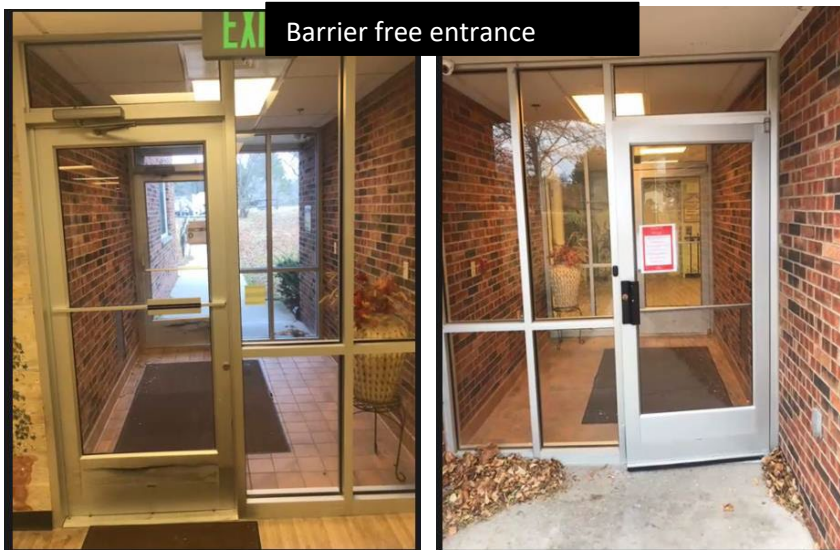
There are no restrictions on a resident's ability to move about the outside space of the facility. Residents may meet family and friends at any time inside or in the outside gathering spaces of the facility. There are no fencing or gates around outside patio areas (outside seating available at both ALF and SNF entrances).



**Evidence:**

- D1- maps and pictures (sign-in/out log area)
- G2-Resident Rights Policy, G4-Resident Policy Statement
- H5-Assisted Living Care Plan
- I1 Benie LJ interview
- J3 Staff MHaven, J4 Staff MLeiffers staff interviews

There are no restrictions on a resident's ability to move about the inside space of the facility. The door between ALF and SNF sides is locked via key-code and will be opened upon request for ALF residents to visit people and take advantage of SNF offerings such as events, religious services, etc. Residents have free access to the kitchen, dining area, common seating areas, and common bathrooms 24/7. The door between ALF and SNF is locked, but the phone is available to all staff to unlock at the resident's request.



Barrier free entrance

#### Evidence:

- D1- maps and pictures
- G2-Resident Rights Policy
- H5-Assisted Living Care Plan
- I1 Benie LJ interview
- J3 Staff MHaven, J4 Staff MLeiffers staff interviews
- Direct observation of residents moving about freely inside the facility



Barrier free and accessible entrance / ramp

The facility has a ramp from the parking lot to the entrance. All interior passageways are barrier-free and wide enough to accommodate wheelchairs and other mobility assistive devices.

The facility is equipped with grab bars, shower chairs, and wheelchair ramps throughout. Other adaptive devices such as hi-rise toilet seats are installed according to resident needs. An accessible tub is available in the spa room as well.

#### Evidence:

- D1- maps and pictures
- I1 Benie LJ interview
- J3 Staff MHaven, J4 Staff MLeiffers staff interviews

Residents may use services and supports outside the facility instead of onsite services. Onsite services include beautician, barber, podiatry, rehab, and physical therapy services. However, residents may arrange for these types of services to be provided elsewhere in the broader community. Facility leadership describes all residents have



access to all services, amenities, and supports regardless of payer. An example provided is that haircare "credit" is offered as part of the rent.

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
- G1, Resident Agreement, standard, and supplemental services sections
- H6-Digital brochure
- I1-Benie LJ interview
- J3-Staff MHaven, J4 Staff MLeiffers interviews



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 is generally served family-style around the tables with some staff present. Tables can be broken up to allow for more intimate groups. The menu is pre-determined; it include one main selection and three alternatives, e.g., they can eat a sandwich or other snack from the refrigerator. Residents can also bring in their own food. Leftovers, snacks, and access to personal foodstuffs are available 24/7. The resident may choose to eat in their own unit or in the dining area.



The dining room is furnished with 4 square tables, usually pushed together to form one table, but residents may separate them if they wish to dine away from the group. Residents may participate in meals with friends or family if they choose to do so. They may dine in the broader community or have guests join them to share meals at no charge.

**Evidence:**

- D1- maps and pictures
- G1-Resident Service Agreement, G5-Resident Care Planning Process
- H3-Dining Room Hours signage, H5-Assisted Living Care Plan
- I1 Benie LJ interview
- J1 Staff AMikowski, J3 Staff MHaven, J4 Staff MLeiffers staff interviews





D1-Villas detail  
maps\_pictures.pdf



G2-Resident Rights  
Policy-Traverse Poin



G4-Residence Policy  
Statements-Traverse



G5-Resident Care  
Planning Process-an



H3-Dining Room  
Hours.pdf



H5-Assisted Living  
Care Plan-Villas at T1



H6-digital  
brochure.pdf



I1-Benie\_LJ.pdf



J1\_Staff\_AMikowski  
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J3\_Staff\_MHaven.p  
df



J4\_Staff\_MLeiffers.p  
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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. Residents are free to participate in scheduled personal and medical appointments provided by either onsite or offsite providers. A single activity calendar is published monthly for all residents and distributed to the resident rooms, and residents are free to choose which activities they participate in. Residents arrange and control their personal schedules, daily appointments, and activities. Staff provides reminders about scheduled appointments and activities. This includes both onsite and offsite activities and appointments.



### Evidence:

- D1-Maps and pictures
- E1 ALF Manager, E2 Resident Care Assistant position descriptions (reference supporting recreational/social activities)
- G1 Resident Service Agreement, G2 Resident Rights Policy, G5 Resident Care Planning Process
- H1, H2, activity calendars, H5-Assisted Living Care Plan
- I1 Benie LJ interview
- J2 Staff GHolcomb, J3 Staff MHaven, J4 Staff MLeiffers interviews

The facility owns and operates two vans for group outings; a public bus is scheduled for larger groups. Staff assist with other forms of transportation, e.g., scheduling cab rides or contacting resident family or friends at their request. Medical trips take priority over social trips.

A public bus stop is located on the corner near the facility. Staff will assist residents with bus schedules and assistance with boarding and deboarding the bus if needed.



## Evidence:

- D1- maps and pictures
- E1-ALF Manager, E2-Resident Care Assistant position descriptions (assisting with implementing care plans)
- G1-Resident Service Agreement (mentions transportation availability)
- I1 Benie LJ interview
- J3 Staff MHaven, J4 Staff MLeiffers staff interviews
- Direct observation of staff assisting the resident with information about public bus transit or cab information



D1\_Villas detail  
maps\_pictures.pdf



E1-Job Description,  
ALF MANAGER anno



E2-Job  
Description-RESIDE



G1-Resident Service  
Agreemt, Policies-TR



G2-Resident Rights  
Policy-Traverse Poin



G5-Resident Care  
Planning Process-an



H1-Activity  
Calendar April 2021-



H2-Activity  
Calendar Feb 20-Tra



H5-Assisted Living  
Care Plan-Villas at Ti



I1-Benie\_LJ.pdf



J1\_Staff\_AMikowski  
.pdf



J2\_Staff\_GHolcomb.  
pdf



J3\_Staff\_MHaven.p  
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J4\_Staff\_MLeiffers.p  
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All private units have locks on exterior doors, with a pin-style lock. All residents have their own pin key. The staff has pin-style keys to unlock and enter individual units. 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. Staff observes the protocol "knock, wait for a response, repeat, then enter announcing themselves and look around the area to ensure the safety of the resident" when entering a resident's personal space.

## Evidence:

- D1, maps, and pictures
- G2-Resident Rights Policy
- I1 Benie LJ interview
- J3 Staff MHaven, J4 Staff MLeiffers staff interviews
- Direct observation of staff following the protocol of knock, wait for a response, repeat, then enter, announcing themselves and looking around the area to ensure the safety of the resident

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. Wifi is offered throughout the facility. Individual units are wired for landlines.



### Evidence:

- D1-maps and pictures (website advertising amenities)
- G2-Resident Rights Policy
- H5-Assisted Living Care Plan, H6 digital brochure
- I1 Benie LJ interview
- J3 Staff MHaven staff interview
- Direct observation of resident making a private cell phone call

This setting, as well as the MI Choice waiver program, prohibits the use of physical restraints and/or restrictive interventions. Facility staff receive training and continuing education on individual rights and protections upon hire and annually thereafter through standardized RELIAS training modules. Facility leadership monitors the system and provides regular reports on the training status, and they can assign specific topics.

### Evidence:

- E1-ALF Manager, E2-Resident Care Assistant position descriptions referencing policy adherence
- F1, F2, F3, F4, F5, F6, staff training records (resident rights, abuse/neglect, HIPAA modules)
- G2-Resident Rights policy, G3-Patient Confidentiality policy
- J1 Staff AMikowski, J3 Staff MHaven, J4 Staff MLeiffers staff interviews



D1\_Villas detail  
maps\_pictures.pdf



E1-Job Description,  
ALF MANAGER anno



E2-Job  
Description-RESIDE



F1-2019 Staff  
Trainings-Traverse P



F2-Staff Training-  
GH-Traverse Pointe-;



F3-Staff



F4-Staff  
Training-AM-Travers



F5-Staff



F6-Staff



G2-Resident Rights  
Policy-Traverse Point



G3-Staff



H5-Assisted Living  
Care Plan-Villas at T



H6-digital  
brochure.pdf



I1-Benie\_LJ.pdf



J1\_Staff\_AMikowski  
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J3\_Staff\_MHaven.p  
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J4\_Staff\_MLeiffers.p  
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## Section 3: Additional Evidence

**Doorway between AL & SNF**



**Barrier-free Hallway**



**Available dining area appliances**

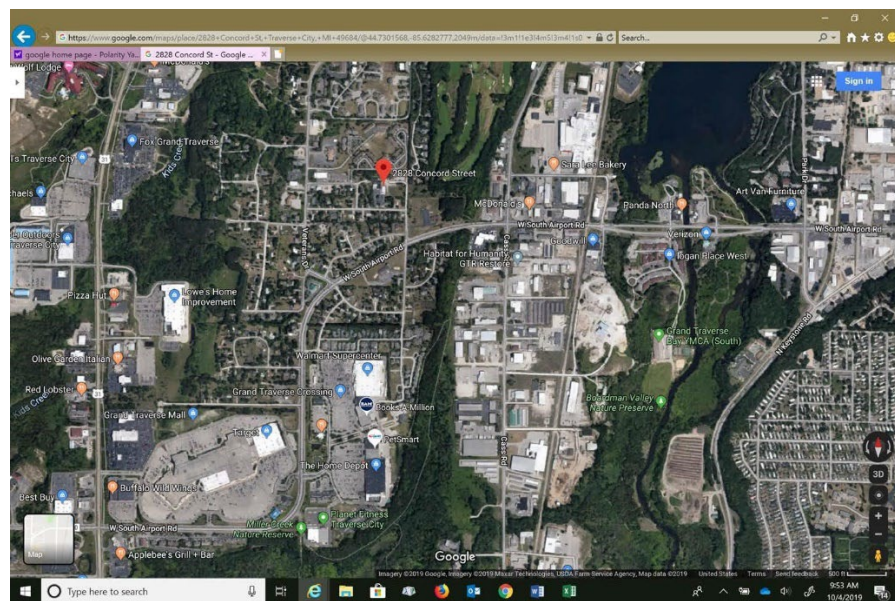


## Multi-purpose room

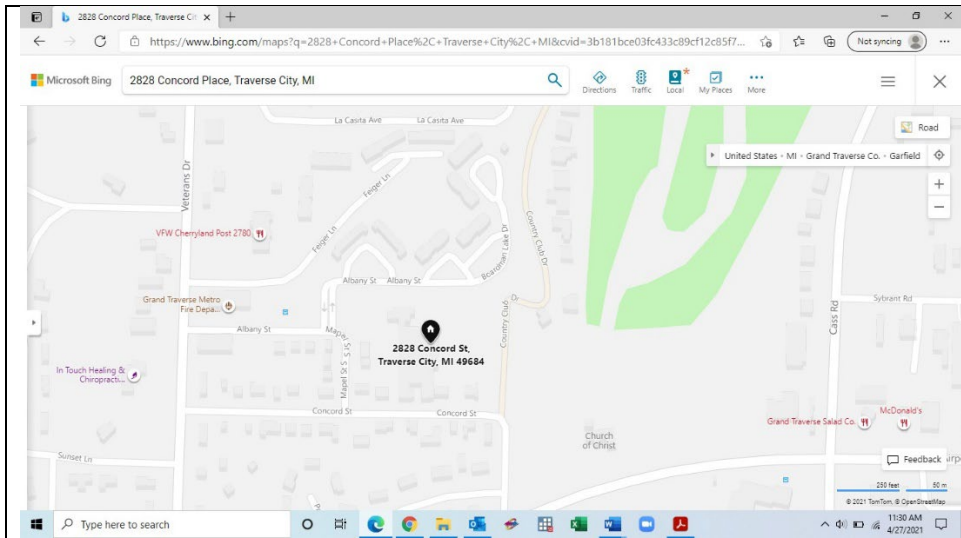


**GOOGLE MAPS** aerial view of Villas of Traverse Point Assisted Living in relationship to private residential and business areas.

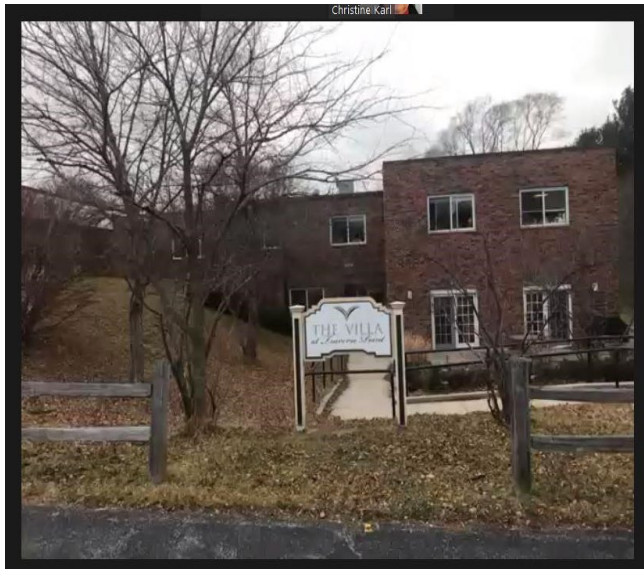
**RESIDENTIAL SITE: Villas of Traverse Point Assisted Living, 2828 Concord Place, Traverse City, MI 49684**







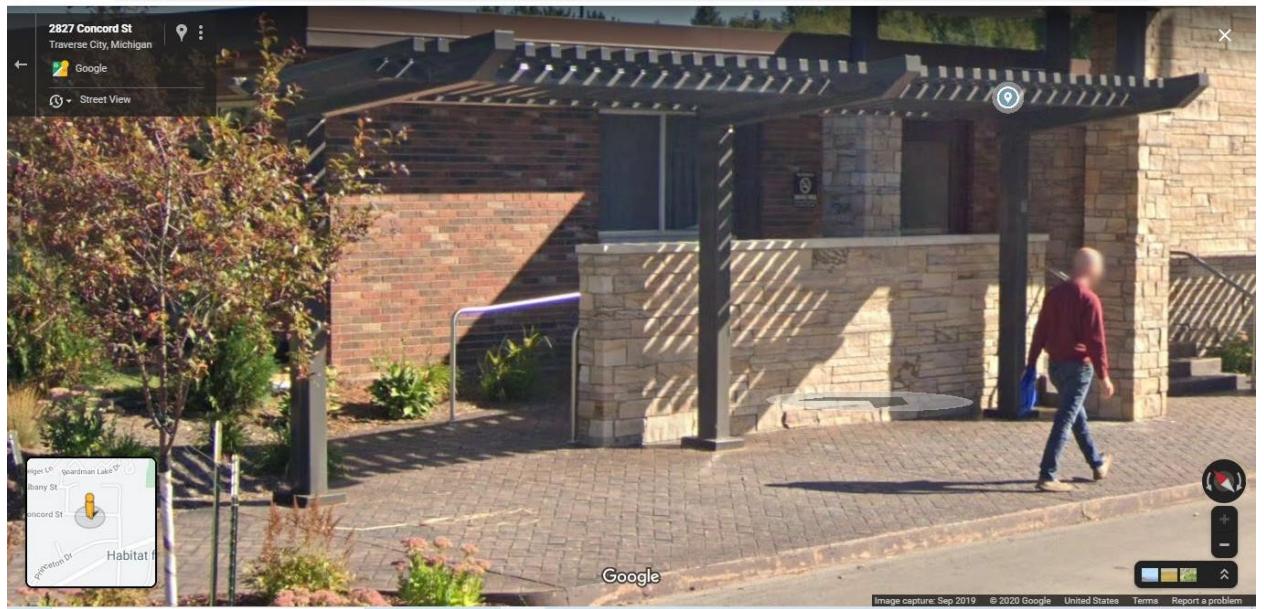
Exterior Entrance to Assisted Living – note new name



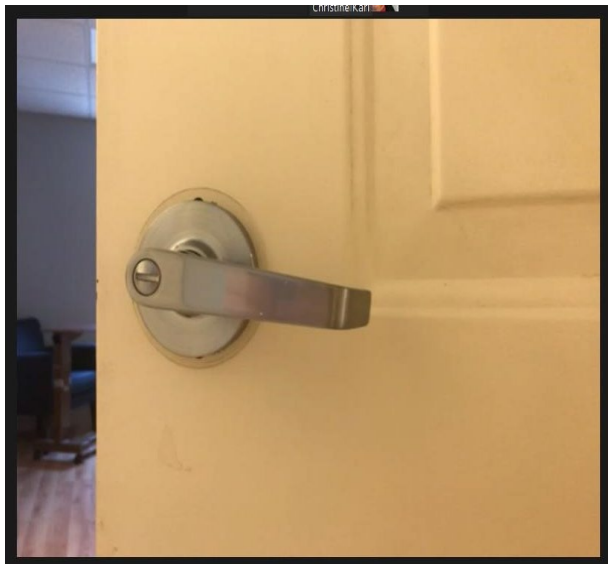
Entrance Shot of skilled area –ramp to the left side (per google street view)

Outdoor area, upper levels are residences and dining area:





Private room door and lock from hallway entering room

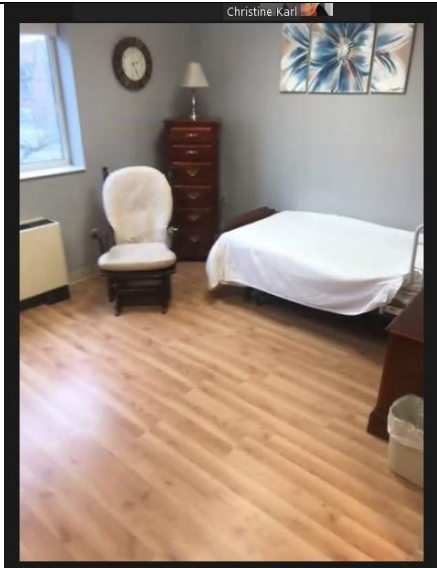


Room closet



Room furnishings, provided and/or resident may bring their own





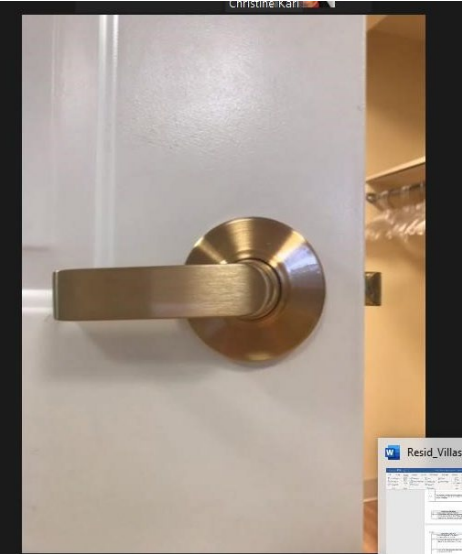
Room furnishings, provided and/or resident may bring their own:



Private Bathroom (has stool and sink, grab bars, and under sink access for wheelchair, no private shower/bath in any rooms – use spa area):



Bathroom doorknob, no locks



Laundry area (for staff and resident use)

Room door and lock from inside room



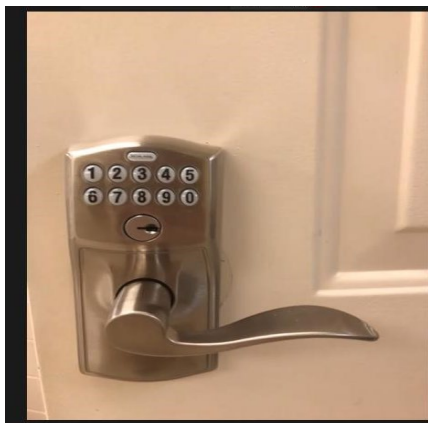


No showers in room, accessible tub in large bathing/laundry "spa" area

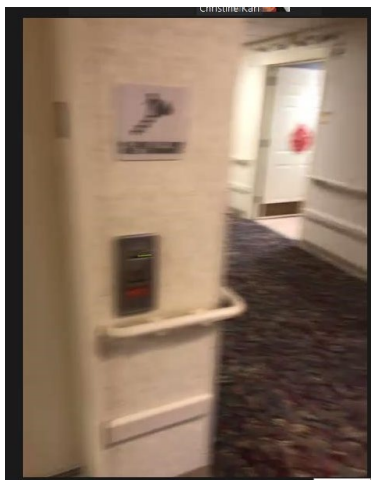


Lock to enter laundry/bathing area (exterior – only staff have code)  
bathing/showering

Bathing/laundry area interior lock for resident to engage when



Elevator to therapy area and non-skilled parking on lower level



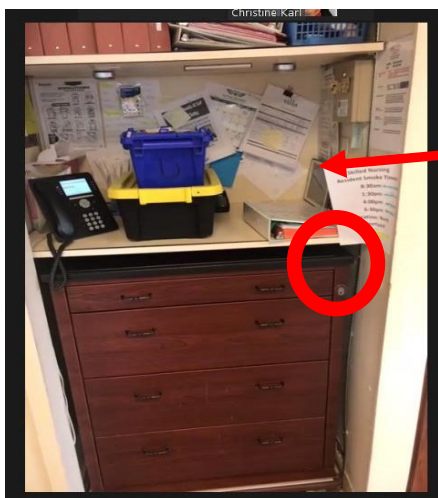
Ombuds posting in the hallway outside dining area: (provided via email 12/21/20)



Med cart/records held in the closet area in the dining area with only curtain barrier, records have SSNs/most PHI removed: THIS FIXED AND RECORDS MOVED TO LOCKED CABINET – SEE PHOTO



Locked med cart with med dispensing record on top: THIS FIXED AND DISPENSING RECORD MOVED TO LOCKED CABINET – SEE PHOTO

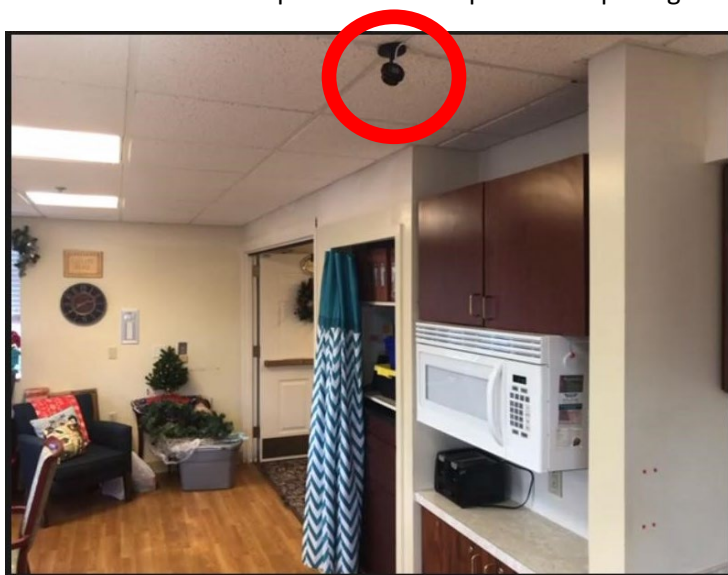


Resident charts on a shelf in the main dining area, secured only by a curtain: THIS FIXED AND RECORDS MOVED TO LOCKED CABINET – SEE PHOTO





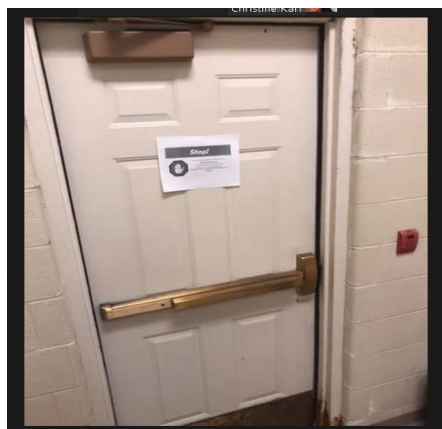
Camera over med cart positioned to capture staff pulling meds:



12/22/30: picture of new locked storage area for med records provided by setting



Door to the parking area



## Section 4: Public Comments