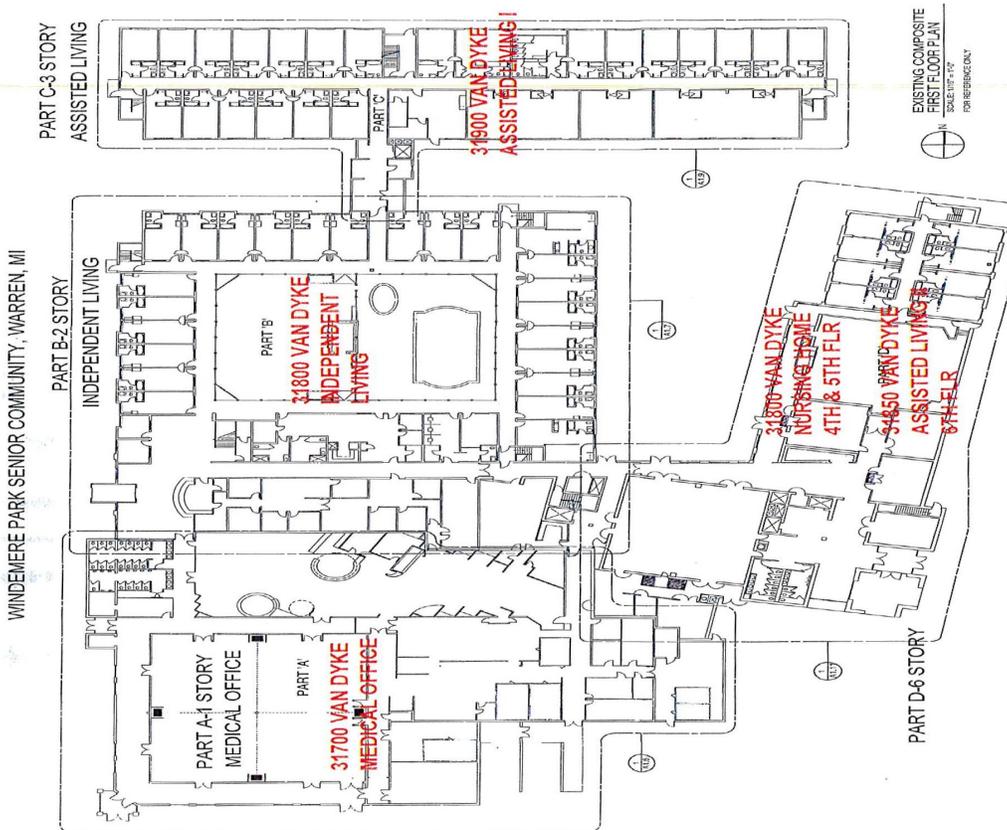


The State of Michigan
High Scrutiny Evidence packet

Provider's Name: Windemere Park Assisted Living	
Location of the Setting: Warren, 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 campus includes independent living, assisted living, memory care, skilled nursing, and rehabilitation services. There is also an independently owned urgent care onsite. There are 2 "assisted living areas" displayed on the campus map. One is the licensed assisted living (licensed Home for the Aged) noted as "Assisted Living 1," and the other is called "Assisted Living 2" in Building D. The Assisted Living 2 is described as *enhanced independent living* where individuals can request assistance if they choose to do so. An onsite pharmacy is available but not required to use. A skilled nursing facility (SNF), rehabilitation unit, and an independently owned urgent care facility are connected but separated from the assisted living facility (ALF 1) areas by keypad entry or badge swipe locked doors. When the urgent care is open, the door separating it from the ALF 1 area is unlocked and accessible if any resident wants to seek care there (but not required). Assisted living 1 residence options are studio units with private bathrooms.

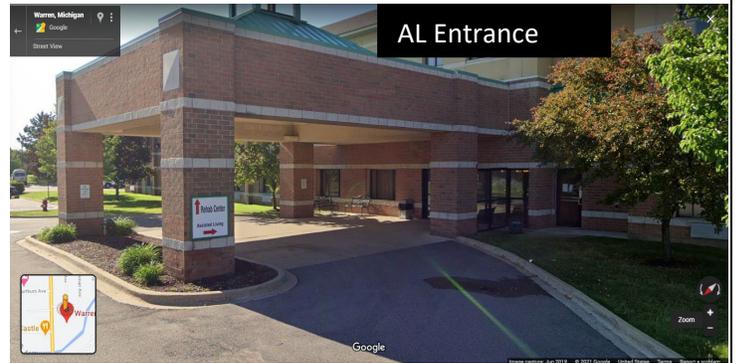


Evidence:

- A1 Facility License 2020, A2-license update 2021-22
- C1 Adjoining SNF License 2020-21
- D1-Windemere maps and pictures, exterior entrances to separate areas, D2-campus map annotated
- I1_Benie_JH interview

- J3_Staff ARodino interview

The campus offers studios units in the ALF 1 area, studio/1 bedroom, and 2-bedroom units available in the independent and enhanced independent living areas. The other side has Skilled Nursing care, rehab, and urgent care. The urgent care is independently owned, and the SNF and ALF 1 are individually licensed.



Evidence:

- A1 Facility License 2020, A2-license update 2021-22
- B1 – Board Membership Notification (attesting operational staff of ALF not involved with SNF operations), B2-Assisted Living Organizational Chart (showing positions)
- C1 Adjoining SNF License 2020-21
- D1-Windemere maps and pictures, exterior entrances to separate areas
- J3_Staff ARodino interview



A1- Facility License 2020-21.pdf



B1 Board Membership Notific



B2



C1- Adjoining



D1_Windemere pictures and maps.p



I1_Benie_JH.pdf



J3_Staff ARodino.pdf

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.

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 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

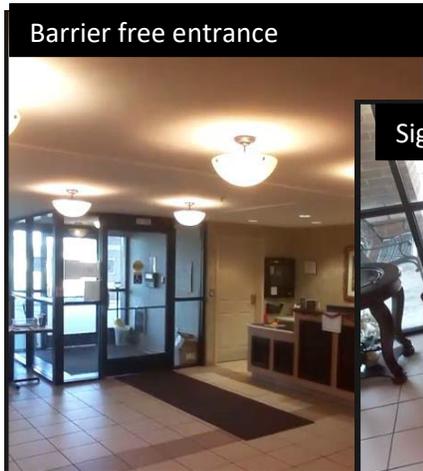
8. Include an assurance that interventions and supports will cause no harm to the individual.

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 and visitors can come and go 24/7. Residents can come and go as they wish unless documented otherwise in their plan of care. A sign-in/sign-out log system is in place for residents and visitors.

Evidence:

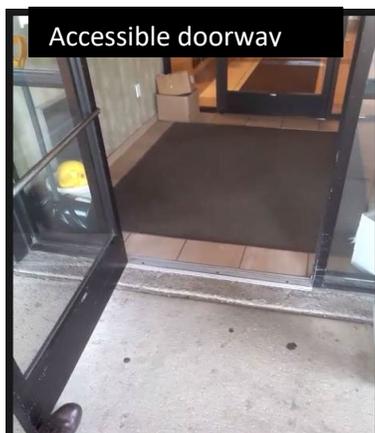
- D1-maps and pictures
- E7 clinical director position description
- F6 – resident rights training, F7-Sample Resident Service Plan
- G1-Service Planning Process, G3- policy regarding resident rights & Policy – statement of resident rights
- H2 Policies and Guidelines for Residents & Resident Rights Guidelines for Families
- I1_Benie JH interview
- J3_Staff ARodino interview



The facility has barrier-free entrances/exits and a barrier-free interior design.

The outdoor courtyard area does have fencing but no locked gates. All residents are able to go outside without restrictions unless documented in their plan of care. There are no restrictions to moving inside the setting unless documented in the resident's care plan. All common areas are available to residents 24/7.

The facility is barrier-free with grab bars and raised toilet seats in the bathrooms; shower chairs, transfer chairs, and commodes can be installed as needed. The facility has barrier-free entrances and barrier-free access to common areas within the facility. Elevator doors are wide with slow-timed open and close features. The elevators are equipped with floor selection panels at two different heights to accommodate user needs.



Evidence:

- D1-maps and pictures
- H1 resident information
- E7 clinical director position description
- F6 – resident rights training, F7-Sample Resident Service Plan
- G1-Service Planning Process, G3- policy regarding resident rights
- I1_Benie JH interview
- J1_Staff AArcher_SMarin, J2_Staff ALopez, J3_Staff ARodino interview

Onsite services include barber/hairstylist, home health care services, rehab, physical therapy services; however, residents may arrange for these types of services to be provided elsewhere in the broader community, or they can bring in their own support.

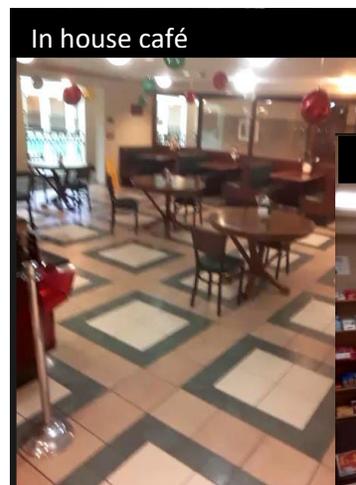
Residents may do their own laundry, or staff will assist. The residents' laundry room is available 24/7; staff will provide full laundry service if requested.

Evidence:

- E2 Activities Asst, E3 Activities Coord, E4 Admin Asst, E5 Administrator position, E15 Resident Care Partner position descriptions referencing coordinating services
- F6 Resident Rights Inservice materials
- G3 Policy Resident Rights and Responsibilities, G4-Policy Distribution of Residents Rights,
- H2 Resident Rights Guidelines for Families
- I1 Benie JH interview (mentions going to off site hair stylist)
- J3_Staff ARodino interview

This setting does not have restrictions on food. The setting does have scheduled mealtimes, but participants do not have to eat during those times. The facility features many dining options, including meals of choice delivered to the resident's unit or dining in a common dining area where food of choice can be ordered. A coffee shop in the commons area serves lighter fare, coffee, and wine. The common dining areas and kitchenettes are stocked with food items and available 24/7 for resident use.

Residents may have their own mini-fridge in their personal units to store snacks and beverages; a kitchenette and beverage station areas are also available 24/7 in the common area, which has a microwave and full-size refrigerator.



Evidence:

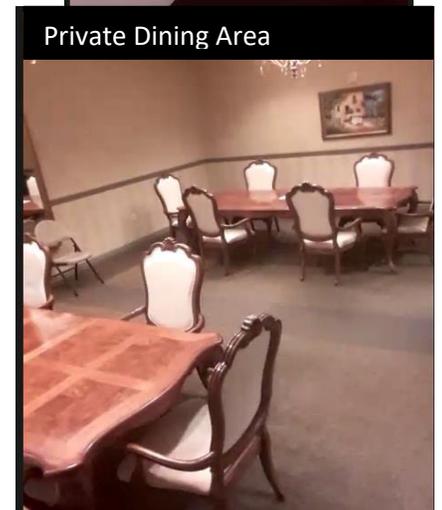
- D1 maps and pictures
- E8 Dietary Aide, E9 Dietary Director, E15 resident care partner position descriptions
- F6 – resident rights training, F7-sample Resident Service Plan
- G1 Policy Service Planning Process, G3 Policy Statement of Resident Rights
- H1_Resident information
- I1_Benie JH interview
- J2_Staff ALopez, J3_Staff ARodino interview

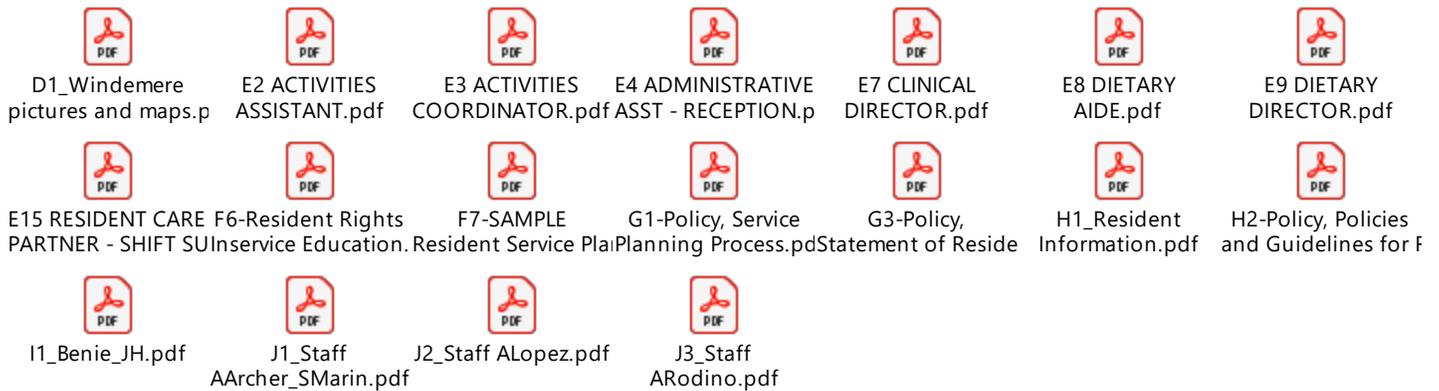
Residents may choose to dine alone or with others if mutually agreeable at any dining venue. Guests and visitors are also allowed to join for meals. Food served can be prepared by the facility staff or brought into the facility from other sources. Private dining rooms can be scheduled in advance for family meals and celebrations. Private dining rooms must be scheduled in advance. The Café in the lobby has scheduled hours.

Small comfortable common seating areas, common dining areas, reading and game rooms, and outdoor seating areas are also available. Furniture placement allows accessibility for those using assistive devices. Staff is available to assist as needed. Residents may visit privately in their units and use any common areas throughout the facility.

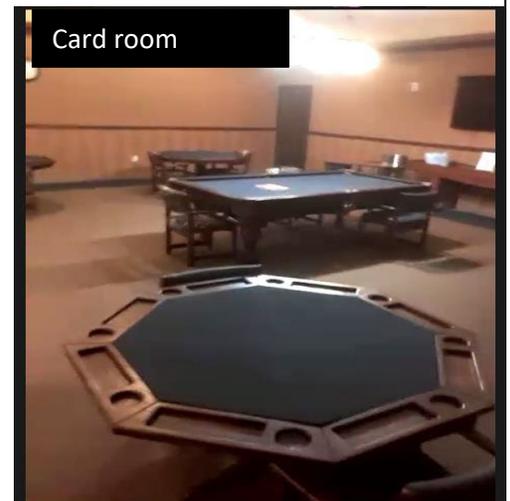
Evidence:

- D1 – maps and pictures
- E2 Activities Asst, E3 Activities Coord, E4 Admin Asst, position descriptions referencing activities communication, E8 Dietary Aide, E9 Dietary Director
- F6 – resident rights training, F7-sample Resident Service Plan
- G1 Policy Service Planning Process, G3- policy regarding resident rights
- H1 Resident information, H2 Policies/Guidelines for Residents
- I1_Benie JH interview
- J2_Staff ALopez, J3_Staff ARodino interview





Residents maintain their own schedule of activities and appointments. Staff interact with residents about their scheduled activities and appointments and assist in preparation or reminders as needed. 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. The activity calendar is delivered to the resident's room each month and is posted in common areas of the facility



Evidence:

- E2 Activities Asst, E3 Activities Coord, E4 Admin Asst, position descriptions referencing activities communication
- F7-Sample Resident Service Plan with personal preference section
- G3- Policy Resident Rights and Responsibilities
- H1 Resident information, H2 – Resident Rights Guidelines for Families.
- I1_Benie JH interview
- J3_Staff ARodino interview

Transportation within the broader community can be arranged via public or facility bus. Transportation schedules are posted in the resident's room. Staff will also assist in coordinating with family and friends, scheduling or planning bus routes. Residents can keep their own vehicles on site.

Evidence:

- E4 – Admin Asst, E5 Administrator, E13 Maintenance Director, E14 Maintenance Tech/Driver position descriptions referencing transportation
- I1_Benie JH interview
- J2_Staff ALopez, J3_Staff ARodino interviews



E3 ACTIVITIES
COORDINATOR.pdf



E4 ADMINISTRATIVE
ASST - RECEPTION.p



E5
ADMINISTRATOR.pd



E13 MAINTENANCE
DIRECTOR.pdf



E14 MAINTENANCE
TECHNICIAN - DRIVER



F7-SAMPLE
Resident Service Pla



G3-Policy,
Statement of Reside



H1_Resident
Information.pdf



H2-Policy, Policies
and Guidelines for F



I1_Benie_JH.pdf



J2_Staff ALopez.pdf



J3_Staff
ARodino.pdf

All bedrooms and bathrooms have locks, and the residents have keys. Only necessary facility staff carries a master key to unlock resident quarters, private bedroom doors, and bathroom doors in case a resident requires assistance. 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 knocked and waited for permission to enter. If there is no response, knock again and enter to check for safety.

Evidence:

- D1 maps and pictures
- F8-employee handbook
- G5-Policy Resident Service Absolutes
- I1_Benie JH interview
- J1_Staff AArcher_SMarin, J2_Staff ALopez, J3_Staff ARodino interviews

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 able to keep and use personal communication devices such as cell phones, tablets, and computers in private, at any time they choose. The facility does not provide shared telephones. However, staff can arrange for the private use of a landline phone in a staff office should the need arise. The facility provides internet-connected computers in the library area for residents' use. Internet, telephone, and Wi-Fi connections are available in all resident units at this facility. Additionally, the facility is Wi-Fi accessible throughout common areas.

Evidence:

- G3- policy regarding resident rights
- I1_Benie JH interview

- J3_Staff ARodino interview

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 upon initial orientation and annually thereafter. Rights are posted in a public area.

Evidence:

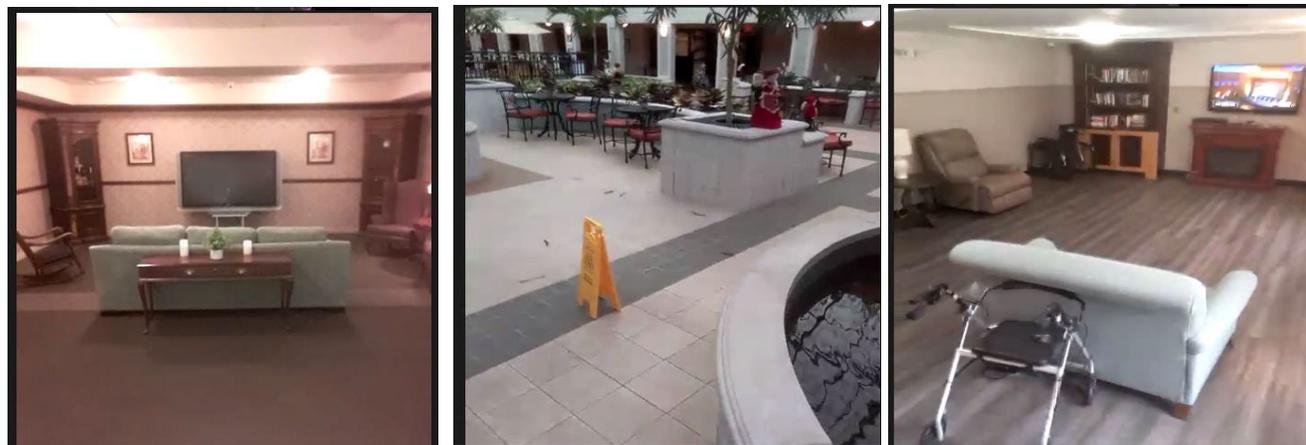
- F6 – Resident rights in service F8-employee handbook
- G2 – in service training, G3 Policy Statement of Resident Rights, G4 Policy Distribution of Resident Rights, G6 Inservice training exams
- J1_Staff AArcher_SMarin, J2_Staff ALopez, J3_Staff ARodino interview



						
D1_Windemere pictures and maps.pln	F6-Resident Rights in service Education.	F8_Employee Handbook AL.pdf	G2-Policy, Inservice Training.pdf	G3-Policy, Statement of Reside	G4-Policy, Distribution of Resit	G5-Policy, Resident Service Absolutes.pc
						
G6-Process, Inservice Training Ex	I1_Benie_JH.pdf	J2_Staff ALopez.pdf	J3_Staff ARodino.pdf			

Section 3: Additional Evidence

Comfortable sitting Area



Commonplace in independent living – available to AL



Exercise area



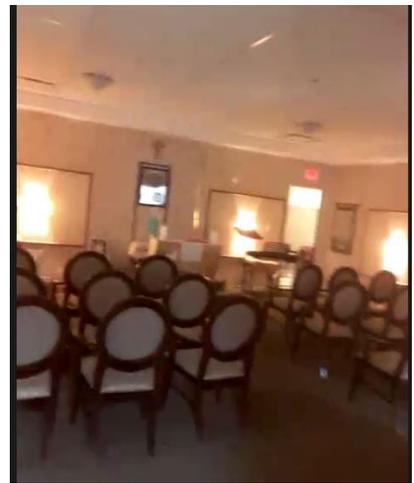
Library



Movie theater



Religious service area



Barrier free entrances



Inside atrium



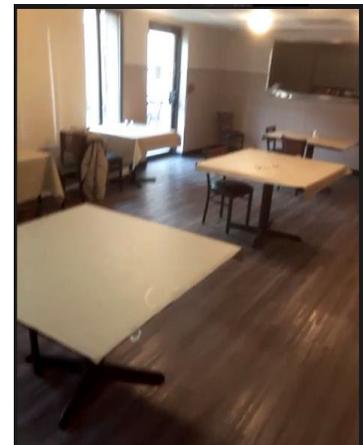
Doorbell and phone for late access



Menu posting



Common dining area



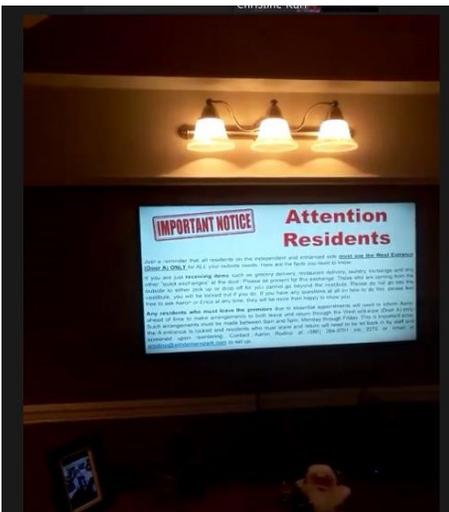
Entrance to onsite urgent care



Lock on door



Public announcement area



Independent living hallway



Independent living Hairstylist open to AL



Area to the outdoor courtyard – unlocked

Fenced area to the outdoor courtyard – no lock, just latched



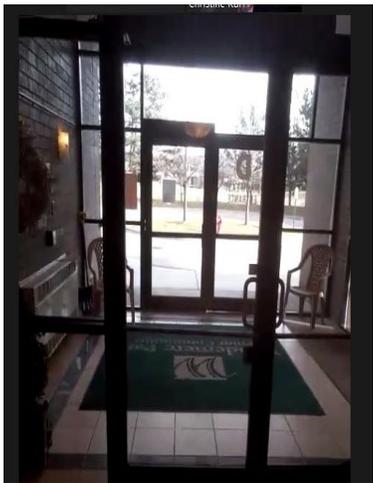
Entrance to skilled nursing

Independent area restaurant – open to AL



D-entrance, independent living entrance

Koi Pond

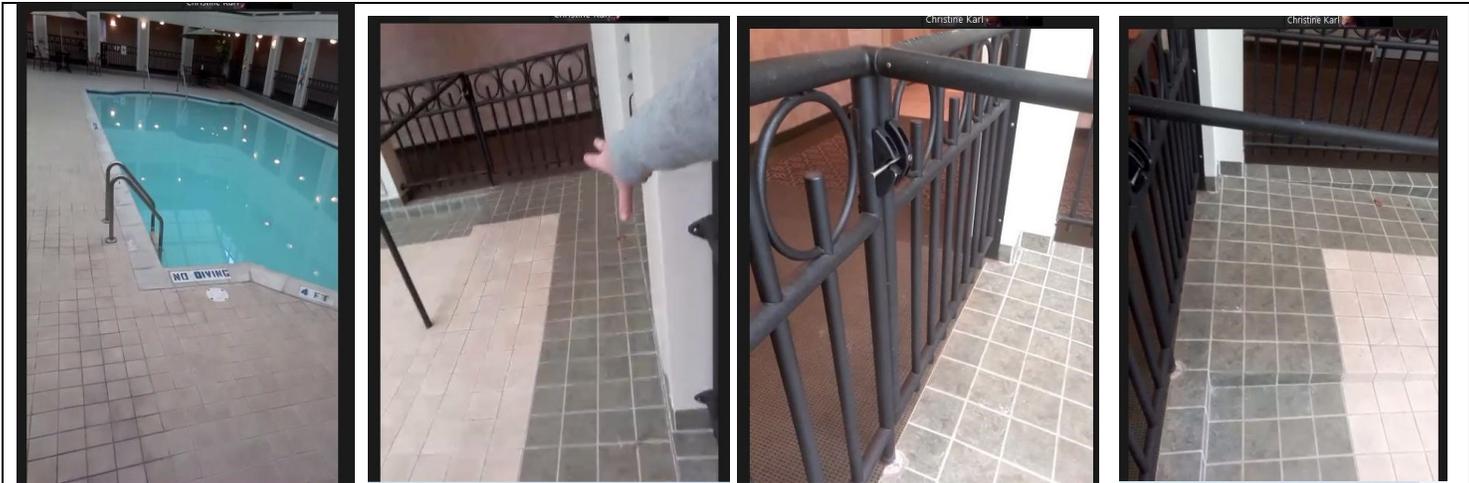


Pool

Fence around pool

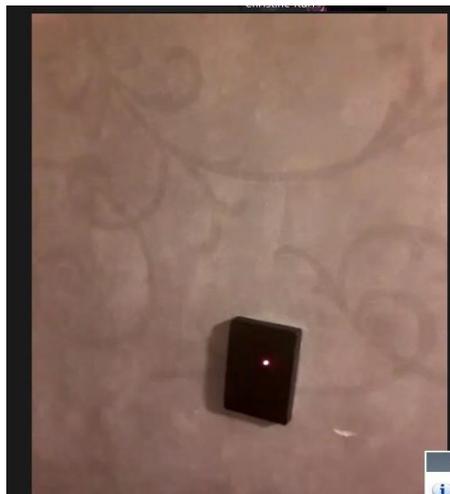
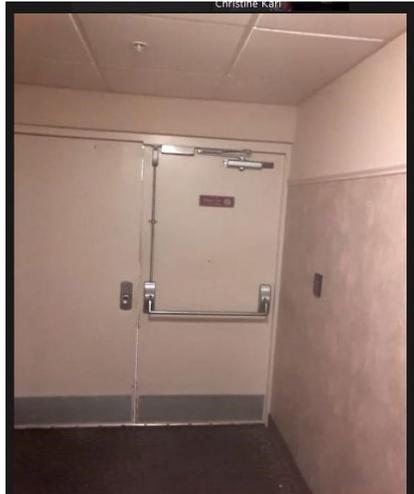
Latch to pool area

Ramp to pool



Doorway to AL: - key fob security but will open without fob

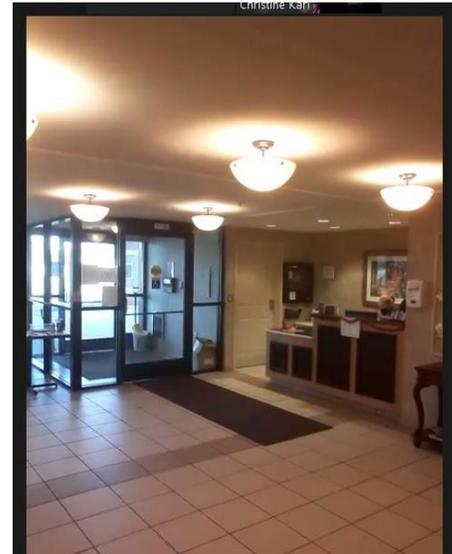
Key fob



AL hallway

Camera

Camera focus on entry way



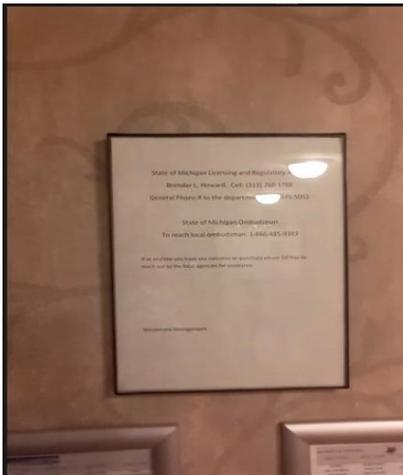
Smoking area policy



Handicapped accessible door



Ombud posting



public posting of AL menus and other required



Public bathroom



Doorknob in the bathroom - lockable

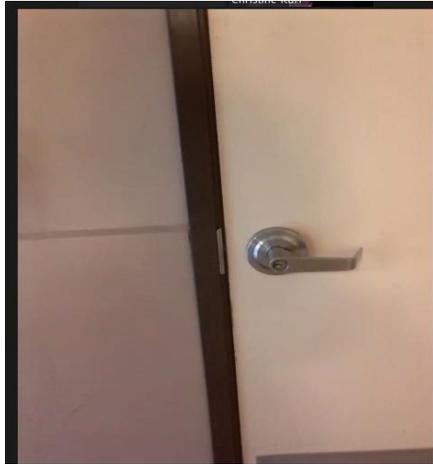


Outside bathroom lock



AL kitchen area

Kitchenette area locked



Beverage area – behind a locked door, staff will assist



Resident charts behind locked med room

Big fridge available to residents to store items



Locked door

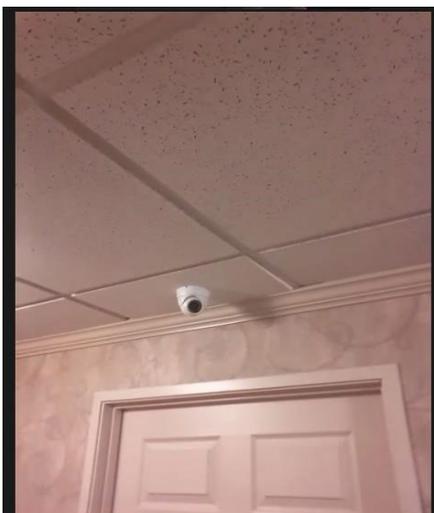


Camera facing nursing station



Hallway camera

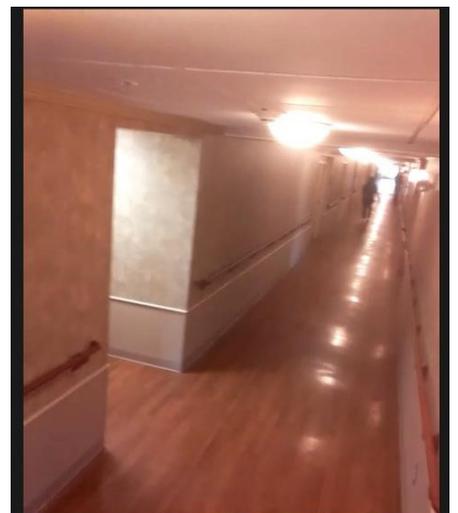
Picture from a hallway camera



Need elevator key to get it to work



Accessible buttons in elevator





Entrance to resident unit – lockable



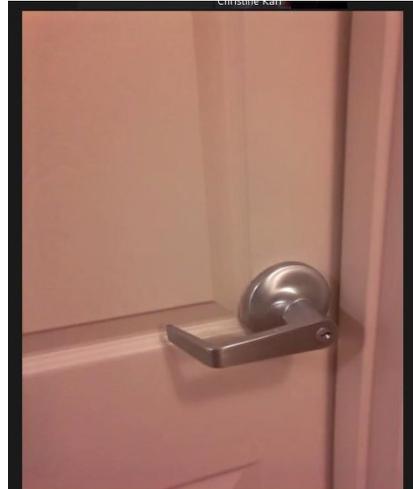
Door out of room – lockable



Door going into the bathroom



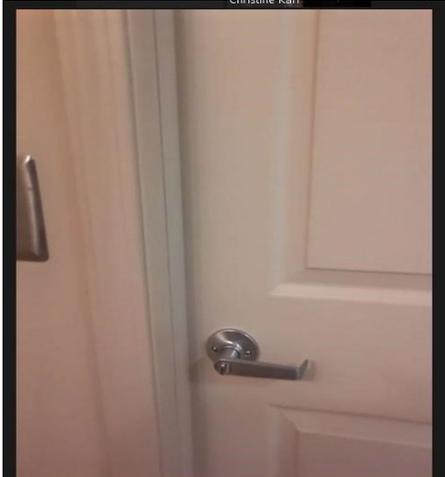
Doorknob out of bathroom – lockable



Bathroom accessible



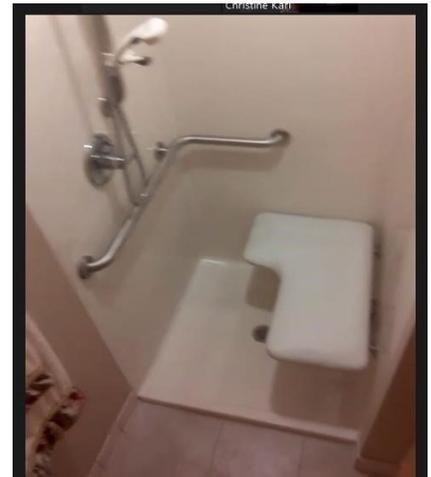
Bathroom accessible

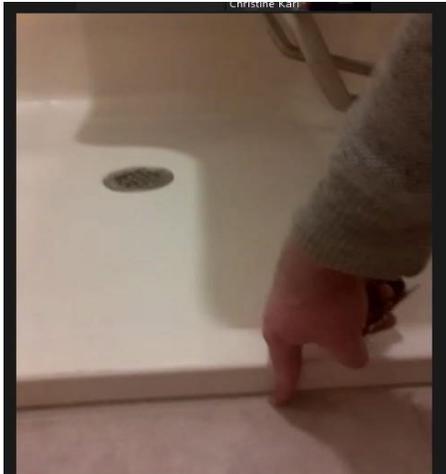


Small lip to shower area



Unit furnishings





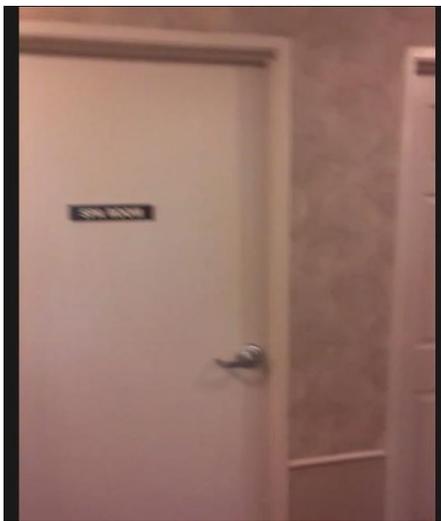
Spa bathroom



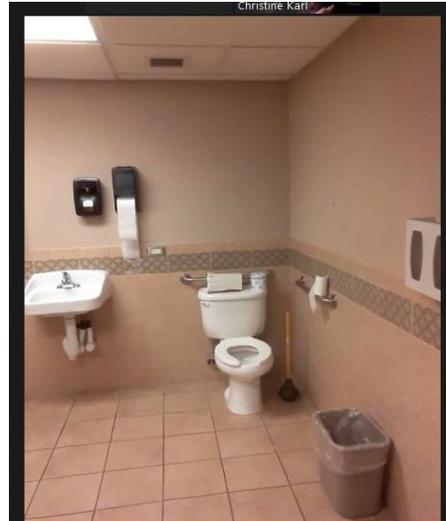
Spa bathroom door lock



Spa bath area



Spa bath area- accessible tub



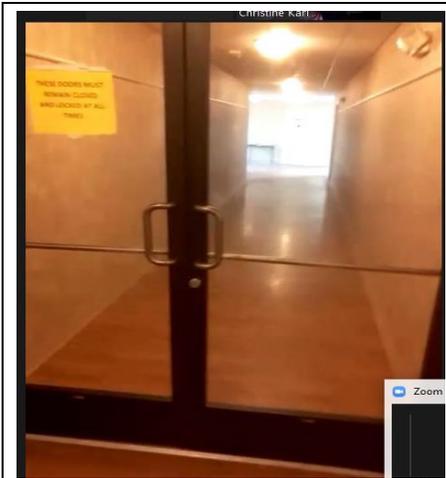
Spa bathroom to hallway- lockable



Locked doors to laundry area



Sign-in/out doing laundry



Residence machine



Residence dryer



Commercial washer for staff



Commercial dryer



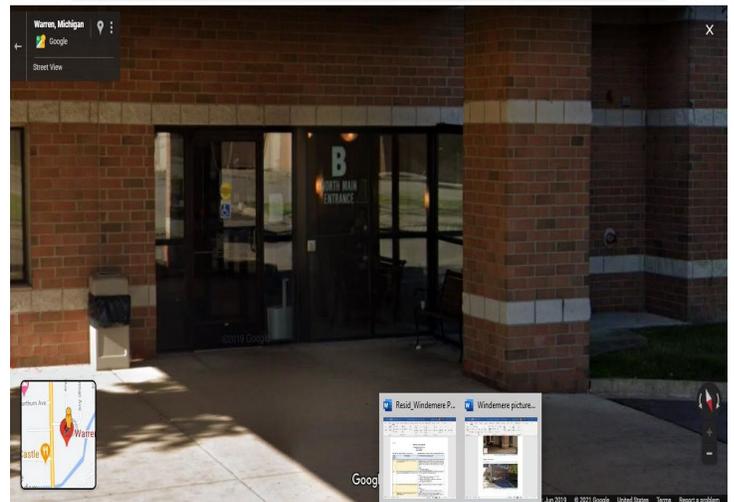
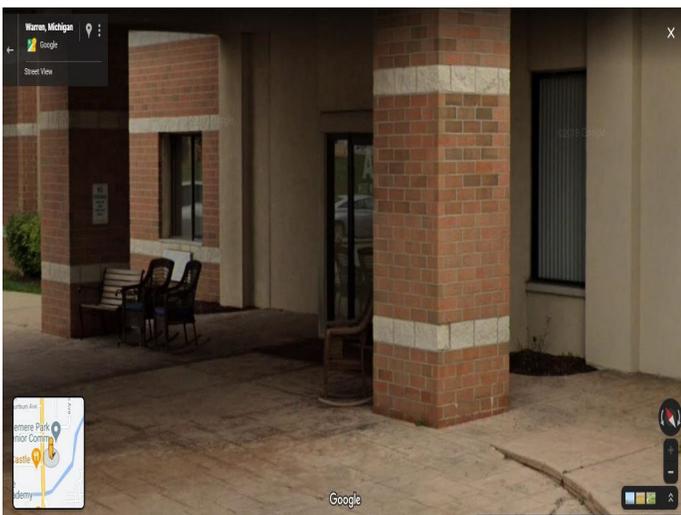
Door outside of laundry room



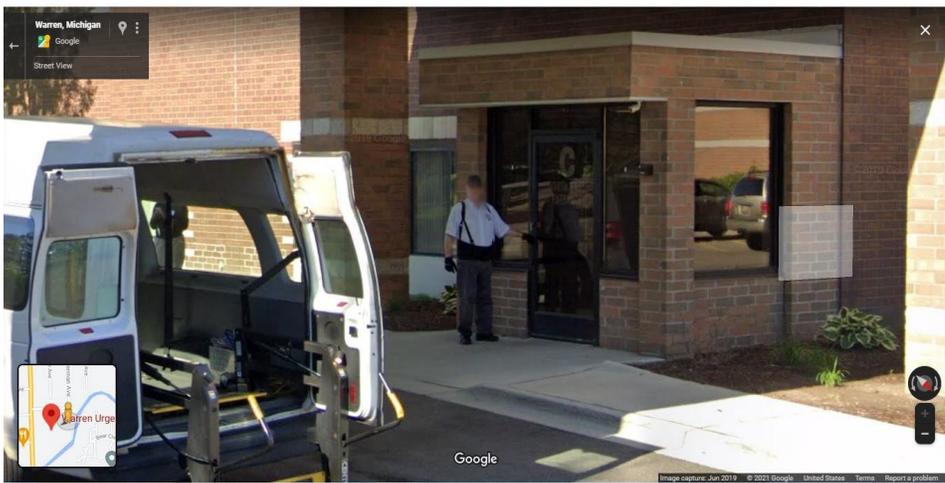
Community entrance – independent living, assisted and skilled/rehab located on the campus



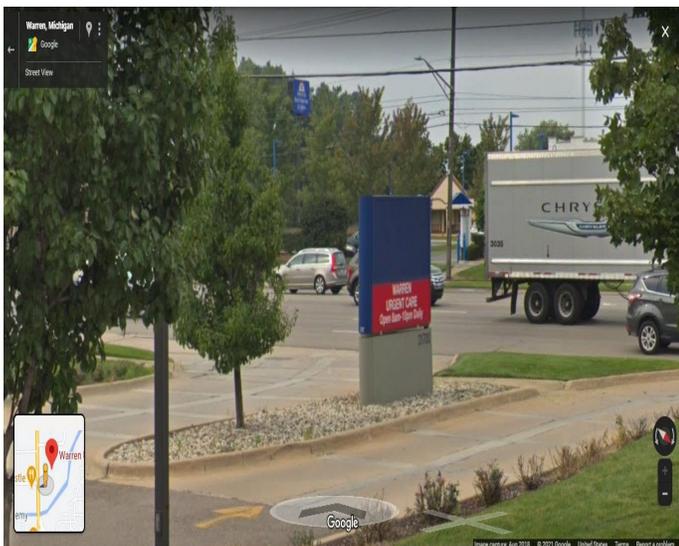
Barrier free entrance



Skilled area entrance- door "C"



Urgent Care



Separate Urgent Care exterior entrance



Onsite pharmacy available

windemerepark.com/warren/other-services/

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Pharmacy
On-site pharmacy with convenience store for your basic needs.



Section 4: Public Comment

