On March 17, 2014, new federal Medicaid rules for Home and Community Based Services (HCBS) went into effect. The rules impact many parts of HCBS. One of the most important topics is the places where HCBS can be provided.

Because HCBS programs are offered as alternatives to nursing and intermediate care facility services, the new rules make sure that HCBS are provided in settings that are not institutional in nature. To follow this rule, states must make sure that HCBS settings are part of a larger community, people are able to have choices about their service settings, and that people are assured their rights to privacy, dignity and respect.

States must evaluate their HCBS programs to determine the level of compliance with the new rules. The setting indicated on this form has been identified as requiring to go through the heightened scrutiny process as part of the compliance process.

Additional information on Heightened Scrutiny can be found here: HCBS Settings Rule: Heightened Scrutiny

# **Setting Information**

Site Name:	Front Line Services				744
Site Address:	9287 S Redwood Rd #A, West Jordan, UT				
Website:	https://www.frontlineservices.us/				
# of Individuals Served at this		12	# of Medicaid Indivi	duals	12
location regard	lless of funding:	13	Served at this location	n:	13
Waiver(s) Served:		HCBS Provider Type:			
☑ Acquired Brain injury		☑ Day Support Services			
☐ Aging Waive	er		☐ Adult Day Care		
☑ Community Supports		☐ Residential Facility			
✓ Community Transition		☐ Supported Living			
New Choices		☑ Employment Preparation Services			
Description of Waivers can be found here:					
https://medicaid.utah.gov/ltc/					
Heightened Scrutiny Prong:					
☐ Prong 1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment					
$\square$ Prong 2: Setting is in a building on the grounds of, or immediately adjacent to, a public institution					
☑ Prong 3: From the initial assessment, the setting was found to have the effect of isolating individuals from the					
broader community. The following is the area that was identified:					
☑ A. Individuals have limited, if any, opportunities for interaction in and with the broader community					
and /or the setting is physically located separate and apart from the broader community and					
does not facilitate individual opportunity to access the broader community and participate in					

community services consistent with their person centered service plan ☑ B. The setting restricts individuals choice to receive services or to engage in activities outside of the setting ☑ C. The setting has qualities that are institutional in nature. These can include: The setting has policies and practices which control the behaviors of individuals; are rigid in their schedules; have multiple restrictive practices in place The setting does not ensure an individual's rights of privacy, dignity, and respect Onsite Visit(s) Conducted: 8/23/19 (on-site), 10/13/22 (virtual) **Description of Setting:** Frontline's Day Treatment program is designed to help people that have not been successful in other day settings. The program is developed to help identify and work on skills so that each person served can gain the skills to give those who want the opportunity to explore other options once they have the skills and are accepted into other community settings. This is done by teaching individuals and practicing appropriate behavior, integrated, social, religious, and recreational skills as well as compassion using the person-centered planning process and teamwork. Frontline is located in West Jordan, UT, the community near restaurants, parks, and residential area. **Current Standing of Setting:** Currently Compliant: the setting has overcome the qualities identified above Approved Remediation Plan: the setting has an approved remediation plan demonstrating how it will come into compliance. The approved timeline for compliance is: State will validate any remaining items by 1/31/2023 Evidence the Setting is Fully Compliant or Will Be Fully Compliant Prong 1: The setting is in a publicly or privately operated facility that provides inpatient institutional treatment; the setting overcomes this presumption of an institutional setting. **Compliance:** ☐ Met ☐ Remediation Plan demonstrating will be compliant ☑ Not Applicable Prong 2: The setting is in a building on the grounds of, or immediately adjacent to, a public institution; the setting overcomes this presumption of an institutional setting. **Compliance:** ☐ Met ☐ Remediation Plan demonstrating will be compliant ☑ Not Applicable Prong 3 A: The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS. **Compliance:** ☐ Met ☐ Remediation Plan demonstrating will be compliant Onsite Visit Summary (08/23/2019, on-site) Individuals come and go to work and other activities. Activities were not regimented and **Summary:** individuals were supported to speak up about what they wanted. Individuals are given the

opportunity to go out into the community on average 4x per week. The setting utilizes program and public transportation. Both staff and individuals served gave several examples of community integration activities they participated in.

Setting does not facilitate the process for individuals to pursue competitive integrated work as an option.

### **Remediation Plan Summary:**

Each individual Frontline serves has the option and choice to have competitive employment. Each year at consumers' annual PCSP meeting, they, their family, guardian's (if applicable), support coordinators, Behaviorist, therapist, and any other persons the individual would like to join, thoroughly discuss employment options available. The person then decides if they are Then, as well as at least monthly all individuals are given information and opportunities to learn about work skills, time on task and discussions in natural settings (while accessing the community) about different types of jobs, responsibilities of being employed, discuss interests and skills to have a better idea of what they would prefer to do if employed. There is regular discussions about safety when working to include stranger danger, street safety, personal safety, not to share personal information to strangers, how to be courteous to others, identify community classes that may teach skills necessary, positive risk taking, encourage volunteer work, social skills, personal hygiene, self-management skills, to control negative physical aggression toward others, communication and interaction with coworkers and supervisors, how to communicate their needs, respect, dignity, behavior management, role play situations that may arise with an employer. Some of the individual's Frontline serves have Behavior Support Plans that help them work on individual behavior and positive replacement behavior. They, along with their behaviorist work on self-management skills so they can work toward their goals. Many consumers that Frontline serves are currently employed. Their support staff and team supported them to access Vocational Rehabilitation and helped them through that process. Frontline Services supports them to arrange and schedule transportation to and from work through Frontline, Flex trans, public transportation, personal transportation, Supported Employment providers that offers and provides transportation to and from their shifts. Frontline will continue to provide support in this area as stated above. Each individual who is interested or gains interest in being employed will be given these options and they will be encouraged and supported to reach out to their PCSP team and guardians to help create a plan of action on the next steps needed for employment and to achieve the goal of being employed. The purpose of the day supports will be to provide daily support, supervision and training to adults with disabilities. This will be done in a safe, nonresidential, community habilitation structured programmatic setting and other naturally occurring environments or community settings. Each consumer will be encouraged to maintain or improve on one or more of the following; Job- readiness skills, work abilities, dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communications, mobility and other functional abilities and life skills.

### Onsite Visit Summary (10/13/22):

During the visit staff, people receiving services and leadership all highlighted multiple community activities. Exercise and recreation were noted in each interview. People receiving

services identified a community exercise instructor each time they were asked about interactions they had with community members or people they look forward to seeing. More than one community option is offered each day. Leadership and staff highlighted the rec center, State Fair (though the fair might have only been for people with disabilities), dollar store and a few other options. Nearly half of Frontline's participants already have competitive integrated jobs. Informed choice for employment and other decisions, is a requirement of the Settings Rule. This includes plans to provide information, options and experiences. Informed choice is not currently provided for all individuals in services. **Remediation Plan Summary:** The setting has a technical assistance meeting scheduled with the State. The setting will provide a final remediation plan to the State prior to 1/31/23. **Policy/Document Review:** The following were reviewed for compliance: **HCBSFront Line Day Program Core Indicator** Day Program Calendars Completed Staff Trainings

Prong 3 B: The setting is selected by the individual from among setting options, including non-disability specific settings.		
Compliance:	☑ Met □ Remediation Plan demonstrating will be compliant	
Summary:	The setting does not restrict access to non-disability settings. The setting has an admission process that assesses individuals' needs and preferences and regularly reassesses to ensure services are provided in a person-centered manner.	

Prong 3 C: The setting optimizes, but does not regiment individual initiative, autonomy, and independence in making life choices. The setting ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint. The setting ensures the individual has the freedom and support to control his/her own schedule and activities. ☐ Met ☐ Remediation Plan demonstrating will be compliant **Compliance:** Onsite Visit Summary (08/23/2019, on-site) There were no restrictions observed. The setting does not optimize autonomy and independence in making life choices and the setting does not support individuals to control their own schedule and activities. There is only one option of activity given, either individuals participate or not. There are no alternative activity options for exercise. No activities should be required (e.g. rec center). No one else from the community participates in rec center activities; **Summary:** individuals are segregated from the rest of the rec center. Clarification required on how option and choice is offered to individuals who are unable to verbalize their choices. **Remediation Plan Summary:** Each month, the consumers and their support staff have a planning meeting to discuss activities they want to participate in the coming month- after discussing and planning - we come up with at least three daily activities to choose from each day. We encourage everyone to be involved

in making choices- When a person is nonverbal or unable to verbalize- FLS will use picture communication cards, color or symbol indicators, sign language or any other option based on their communication style and ability to encourage them to express their wants, needs and desires. Frontline will use available assistive or adaptive technology whenever it has been determined that doing so will enhance the consumer's freedom and will not adversely affect the consumer's health and welfare. We will keep an ongoing master list of a person's preferred activities for future use. Rec Center- each individual is offered and encouraged to be physically active in many different ways. This may include but is not limited to walks, swimming, hiking, weight lifting, dancing, music, yoga, etc. Each person is given the option to join the community rec center and this is offered at least weekly if they choose to participate and engage in any class offered there. If the individual chooses to purchase a rec pass they will choose which classes to participate in and is open/available to the greater community. Therefore, all people, regardless of ability, have the option to participate in these classes. The rec center is not required and is a choice.

## Onsite Visit Summary (10/13/2022):

People receiving services indicated that they had friends in the Frontline and were able to participate in activities with friends. Additional options are offered when a person declines a planned activity. Leadership indicated a person-centered approach to developing schedules and gathering input from all participants regardless of communication style. If requests require additional planning, money or advanced notice these are scheduled for a future week or month.

## **Remediation Plan Summary:**

The provider will work to create a weekly, monthly, or daily schedule in a format that is easy to read, understand, and contribute to and that is available to the individuals they serve. As well as indicate existing or plans to increase the variety of activities offered. The setting has a technical assistance meeting scheduled with the State. The setting will provide a final remediation plan to the State prior to 1/31/23.

### **Policy/Document Review:**

The following were reviewed for compliance:

- HCBSFront Line Day Program Core Indicator
- Day Program Calendars
- Completed Staff Trainings

Overall, the setting enforces the Home and Community-Based Settings Regulation requirements.		
Compliance:	☐ Met ☑ Remediation Plan demonstrating will be compliant	
Summary:	The provider has identified areas of remediation and the State will validate to determine final compliance.	

# Input from Individuals Served and Staff

	Summary of interviews (2019):	
Individuals	<ul> <li>Individuals reported staff makes their schedules for them and then they choose which</li> </ul>	
Served	activities they go on	
Summary:	One individual reported they go swimming and shopping	
	Another individual reported they go the zoo, Lagoon, out to eat	

	Another individual reported they go to special olympics and volunteering	
	Individuals reported they can eat when they want to	
	One individual reported they do not speak to others in the community because they are	
	strangers	
	One individual reported they help them with budgeting in the community	
	Summary of interviews (2022):	
	One person interviewed expressed a desire to participate in more and different	
	community activities, community classes, and wanted a job in the community	
	<ul> <li>Some individuals indicated that the support team has restricted them from searching for a job</li> </ul>	
	Some of the people in services interviewed said they knew where to go if they needed	
	help and/or support.	
	When asked about rules, individuals mentioned basic program rules like respect, good	
	manners and not touching other people's property.	
	Summary of interviews (2019):	
	Staff reported everyone goes to community activities whether they participate or not	
	Staff reported they go into the community 4x weekly	
	Staff gave examples of community integration: swimming, rec center, parades (riding)	
	bikes), dances, volunteer opportunities, ski resorts, movies, theaters, etc.	
Staff	Summary of interviews (2022):	
Summary:	Staff referenced in their interviews training on the Settings Rule	
	Some staff indicated in interviews providing an environment for full choice.	
	Leadership indicated Settings Rule training has been a focus for months	
	Some staff indicated that weekly activities were difficult to adjust, other staff indicated	
	that entire days can be switched or moved based on desires of the person or small	
	group	

Ongoing Remediation Activities			
Current Standing:   Currently Compliant   Approved Remediation Plan			
Continued Remediation Activities	The provider has identified areas of remediation and the State will validate to determine final compliance.		
Ongoing Monitoring Activities	The State will use the following tools to ensure settings continue compliance with the Settings Rule criteria:  Conducting individual served experience surveys Addressing settings compliance during the annual person centered service planning process Ongoing provider training and certification Monitoring through critical incident reporting Case Management/Support Coordinator visit monitoring HCBS Waiver Reviews/Audits		

# Summary of Stakeholder Workgroup Comments Received and State Response:

Stakeholder Workgroup Review: January 3, 2023 - January 18, 2023

#### **General Comments Received**

#### Comment:

The materials provided by the State in the newly-released evidentiary packets ("batch 5") raise concerns about whether the identified settings currently demonstrate the qualities of HCBS. In most instances, the state has only completed a virtual review instead of an in-person visit. In our experience as the P&A, it is difficult to accurately assess characteristics of an institution as well as to communicate effectively with waiver participants without an in-person visit.

## Response:

The State has a comprehensive virtual validation visit process in place to determine HCBS Settings Rule compliance. If at any time the State determines that the virtual process is not sufficient for a specific setting, then the State will make the determination that an in-person visit is required at that time. Once a setting has completed its remediation and the State has validated its compliance with the HCBS settings rule, it moves to the ongoing monitoring process.

#### Comment:

In many instances, the packages state that the setting is compliant based on a remediation plan and indicate that a validation visit will be completed in the future. Many of the reviews state that individuals are not getting into the community to the degree they would wish and that there are still institution-like restrictions on individuals in the settings. It is difficult for stakeholders to provide feedback on whether a setting has the characteristics of an HCBS setting if it is still in the process of remediating. The remediation plans seem to lack the detail necessary to assist a setting with becoming compliant and the short time frame until the final compliance deadline leads us to believe that these sites will not remediate in time.

#### Response:

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process.

#### Comment:

The reviews in many instances lack the detail necessary to determine whether a setting is institutional/segregating. For example, there are reviews of 14c certificate holders that do not indicate whether the setting will pay subminimum wage moving forward. Reviews indicate that individuals access the community, but in many instances don't specify how large the groups are, what types of activities they engage in and the frequency with which activities occur. Some reviews mention work groups/work enclaves, but do not specify what type of work individuals engage in, where people work and how large the work groups are. The reviews frequently say that the setting does not restrict access to the community, that community amenities are within "miles" and that there is access to public transportation, but often do not specify how the facility supports individuals to access these amenities/public transportation.

## Response:

While the State agrees that certain criteria can create concerns with compliance, several elements described do not determine on their own whether a setting meets or fails requirements. Individual settings are reviewed and

assessed on their merit. For example, payment of sub-minimum wage work or group sizes in and of themselves are not including or excluding criteria. The state determines compliance based on factors such as person centered planning, individual choice and autonomy, individualized schedules, and individuals self-reporting they are accessing the community at the level that they desire.

#### Comment:

We are very concerned about how the state has handled non-residential settings, particularly large day programs and sheltered workshops. These reviews do not demonstrate that the state has ensured that these particularly problematic settings have remediated sufficient to comply with the settings rule as well as title II of the ADA and Olmstead. Again, many final reviews have not been completed in person, and most frequently the state is submitting sites that have submitted a remediation plan but have not been validated as remediated.

### Response:

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process. The State has a comprehensive virtual validation visit process in place to determine HCBS Settings Rule compliance. If at any time the State determines that the virtual process is not sufficient for a specific setting, then the State will make the determination that an in-person visit is required at that time. Once a setting has completed its remediation and the State has validated its compliance with the HCBS settings rule, it moves to the ongoing monitoring process. While the State does acknowledge that activities for remediation extended into March 2023, it does not believe strategies deviated from its Statewide Transition Plan, or that inappropriate methods were used in validating compliance. The State also acknowledges that Settings compliance is not a one time activity and the usage of ongoing monitoring will aid to reinforce core tenants of the Rule as well as the development and dissemination of best practices. The State encourages the submission of providers who are believed to be non-compliant with requirements of the Settings Rule, including the elements/criteria which are not sufficiently meeting expectations.

#### Comment:

Reviews indicate that individuals are still being segregated by "level of functioning" and even by whether an individual resides in an ICF or an HCBS setting.

#### Response:

The State agrees that settings identified as having this concern are institution and segregating in nature. The purpose of the heightened scrutiny process was to identify settings that were institutional and segregating in nature and go through the process of showing how they overcame those qualities. Settings submitting for heightened scrutiny were required to remediate through training of staff, provide evidence of compliance, and demonstrate compliance through validation that they were compliant in these areas of concern.

### Comment:

Reviews do not indicate that the EPR codes which contemplate meaningful, individualized, time-limited prevocational programs are being implemented in Workshops. Reviews do not indicate that individuals are spending at least 20% of their time in the community engaging in activities chosen by the individual. Reviews do not (for the most part) indicate whether or not the provider is continuing to pay subminimum wage. Reviews do not consider what type of work individuals engage in the setting and whether or not that work is chosen by the individual. Frequently, specificity as to how many individuals are working in a group is not given. Frequently,

information about how settings are supporting individuals to gain competitive, integrated employment as guaranteed by the settings rule is not given.

### Response:

As with all settings, the State's review was for the purpose of determining whether the tenants of the Settings Rule had been met, regardless of which specific services were delivered at the location. The State has separate compliance monitoring for the appropriate authorization of Employment Preparation Services and the delivery of those services by providers.

#### Comment:

Frequently, reviews indicate that there are still restrictive practices in the settings indicating an institution-like environment.

## Response:

The State agrees that many reviews indicated settings still had restrictive practices in place indicating an institution-like environment as they had not yet gone through their final validation process at the time they went out for heightened scrutiny. The State has spent considerable time with settings and providers providing technical assistance beyond what was documented in their remediation plans to remediate their institutional and segregating characteristics to come into compliance with the rule.

# Summary of Public Comments Received and State Response:

Public Comment Period: January 2, 2023 to February 3, 2023

### **Setting Specific Comments:**

#### Comment:

One commenter stated Front Line Services site 744 is a day support services and employment preparation services program located at 9287 S Redwood Rd #A, West Jordan, UT. It provides services to 13 waiver participants. The materials provided by the State in the evidentiary packet do not demonstrate that the identified setting currently demonstrates the qualities of HCBS. For stakeholders to provide effective feedback, the state needs to present stakeholders with final validations of compliance with the rule rather than un-validated remediation plans. Not doing so does not provide appropriate notice to community partners of the steps the state has taken to ensure that settings are fully in compliance with the settings rule. Without that assessment it is difficult for the state to ascertain that the setting will be compliant within the compliance deadline.

### Response:

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process. As indicated on the heightened scrutiny package, a technical assistance was provided by the State and the setting was required to resubmit a remediation plan to come into compliance with the additional areas identified. A comprehensive remediation plan was received by the setting addressing the remaining issues that needed to be addressed. The setting was determined compliant through a desk review.

### Comment:

The same commenter had additional feedback stating we have concerns that the most recent assessments of the setting and the planned assessment of the setting after public comment was not/will not be completed in person.

In our experience as the P&A, it is difficult to accurately assess characteristics of an institution as well as to communicate effectively with waiver participants without an in-person visit.

### Response:

The State has a comprehensive virtual validation visit process in place to determine HCBS Settings Rule compliance. If at any time the State determines that the virtual process is not sufficient for a specific setting, then the State will make the determination that an in-person visit is required at that time. Once a setting has completed its remediation and the State has validated its compliance with the HCBS settings rule, it moves to the ongoing monitoring process.

### **General Comments Received:**

#### Comment:

As the Protection and Advocacy agency for people with disabilities for the State of Utah, the Disability Law Center ("DLC") is uniquely suited to provide assistance and input during this process. Based on our own observations as the P&A as well as our evaluation of the state's assessments of settings, the state did not engage in a sufficient assessment process or provide adequate support to bring settings into compliance with the rule prior to the March 17, 2023 deadline. We are concerned that HCBS waiver dollars will continue to be spent on segregated, institutional settings despite the state's obligations under the HCBS settings rule, Title II of the ADA and Olmstead. This heightened scrutiny evidentiary package demonstrates these ongoing concerns as detailed below.

### Response:

While the State does acknowledge that activities for remediation extended into March 2023, it does not believe strategies deviated from its Statewide Transition Plan, or that inappropriate methods were used in validating compliance. The State also acknowledges that Settings compliance is not a one time activity and the usage of ongoing monitoring will aid to reinforce core tenants of the Rule as well as the development and dissemination of best practices. The State encourages the submission of providers who are believed to be non-compliant with requirements of the Settings Rule, including the elements/criteria which are not sufficiently meeting expectations.

# Summary of Stakeholder Workgroup Recommendation:

Stakeholder Workgroup Review: January 3, 2023 - January 18, 2023

We only got a response from one workgroup member. Their comments are noted above.

# **Utah's Recommendation**

**Recommendation: Compliant** 

At the time the heightened scrutiny packet was submitted for public comment, the State had not completed the final validation visit. The State has since completed the final validation visit and determined the setting has overcome the effect of isolating individuals from the broader community and is in compliance with the HCBS Settings Rule.