

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Alternative Services Oregon-Inc. Date of Submission: 5/18/16

Agency Address: Tigard, Or. 97223

Name/Site Location: Portland, Or

Capacity of Home: 3 Number of individuals residing in the home: 3

Type of secure measures utilized by the site: (Check any that apply)

X Magnetic Locks  Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

Describe the physical location of the home: *(Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)*

The home is located in a residential single family homes neighborhood. The home is a typical 1950's built bungalow style home with a fenced back yard and deck area, with grass in the front and back yards. The home was purchased by ASI when Multnomah County asked us to develop in the late 1990's. The home fits within the neighborhood as it was built in a housing sub division at the same time other homes were built. The side and front streets serve as parking for staff, as is with other homes within that area. This home is not recognizable as a "group home".

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)*

Although the home is magnetically locked, this has not hindered the people who reside there to access their chosen community activities when they are safe to do so, and not posing a threat to anyone or themselves and have specifically assigned staff. Two of the three individuals have a high risk of danger by leaving supervised settings without staff and risking their own safety due to lack of street, stranger and other community dangers. This home has one vehicle, which allows staff to assist each individual to access the community. All individuals supported in this home have daily access to a variety of activities within their own communities and partake in activities outside of their own community as well. Of the 3 individuals that live here, 2 of them like to go out of the house and do activities daily, the 3rd gentleman prefers to stay home and typically goes out on average every other day or every couple days, depending on what he chooses.

Each individual chooses the activities that are important to them and how frequently they want to go during ISP planning time. However, this information may change continually throughout the year if the person chooses. These activities are listed on a weekly activity form called a Schedule Sheet. On a weekly basis a staff person sits with the person and they plan days and times that the person wants to do activities. This helps operationally for staffing and our ability to ensure there is cash on hand, however, the individual may change their mind or want to reschedule throughout the week. The form and the purpose of the activity are trained to all staff who works in the home during Core Competency training when they are hired, ongoing as needed and each time a new ISP is implemented. It is our expectation that staff will assist each individual to achieve and participate in the activities as they have been assigned.

Some of the activities that people enjoy in their local community include: going to convenience stores or min-marts; visits with and from family, shopping at stores such as

Target, Wal-Mart, Fred Meyer; going out to restaurants; coffee shops; holiday parties and community dances. Additionally, individuals may want to try new activities or do other activities that may not have been generated as “preferred” activities during their ISP. ASI encourages and accommodates people to try new things and be out in the community.

Occasionally, two of the individuals that live here want to do an activity together, but for the most part prefer to go out having 1-1 time with a Direct Support Professional.

Each participates in DSA (Day Support Activities) and is assisted with transportation in order to attend. The house works around all of the schedules so people can travel to the DSA activities and be in the community daily.

Describe the nature and frequency of visitation by others to home: *(Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)*

All 3 of the current individuals that reside at \_\_\_\_\_ have visitors and family that comes to the home. Due to some of the high behavioral support needs, none of the 3 men go to their family homes for visits. But, all of their families live in the Portland area and do routinely come over. Additionally, ASI provides support for individuals to meet with their family members out to eat or other activities in the community.

Describe the typical source and utilization of transportation by the residents of the home: *(Include a description of accessible public transportation specific to the home’s location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)*

For one of the men, it is very unsafe to attempt public transportation for the safety of our staff, other patrons and himself, therefore, we do not use public transportation. The other two men have had multiple opportunities to ride the max trains. ASI transports all of the men to their DSA programs.

Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: *(Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)*

ASI has written policies to incorporate the HCBS standards. All staff will receive training on this policy once approved by the ASI Board of Directors (see attached). Along with the new HCBS policy, the Rights, Behavioral Support Plan, Functional Assessment, Personal Money, Personal Property, Abuse and Neglect/Mandatory Reporting and an approved Residency Agreement will be trained after the June 2016 ASI Board meeting. ASI has a strong set of Core Competency trainings and will begin having staff use the DHS Learning Center for other Core Competency training within the next 6 months.

Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and-how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL-support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)*

It is important that individuals feel encouraged and supported to be independent and have a self-directed life. ASI strives to ensure our Person Centered Information is thorough, accurate and continually updated to reflect the individual and their choices. Our PCI plans are over 20 pages, and offer new staff the ability to understand what is important to the person. This also assists in avoiding an interruption in activities when staff turn-over.

The PCI plan is the foundation of the ISP. The PCI is built upon a person's strengths, preferences, and needs; and empowers the person to maximize their choice and control. Strategies utilized to encourage individuals to self-direct their routines and activities and support independence include: ensuring the person is involved with their PCI plan and annual ISP; ensuring the person has the opportunity to communicate when they want to do activities and allowing and encouraging them to change their mind and/or reschedule; accommodating staff time with when the person wants to wake up/go to bed, go to work/DSA, eat meals, and go into the community and enjoy learning and participating in community activities.

This home currently operates with a 3:3:1 staffing pattern for the 3 individuals live in the home – which is 3 staff on day shift, 3 staff on swing shift and 1 staff during the awake overnight shift. The staffing pattern provides optimal flexibility in each person’s daily life and supports opportunities outside of the home. When a person chooses to do an activity that may be for an extended period of time, or away from the home overnight, the staffing pattern is adjusted to accommodate those activities. During the DSP staffing crisis that is affecting Comprehensive Services in the State of Oregon, ASI has not altered the staffing pattern. During this fiscal year, this home has generated 14,251 hours of overtime, equating to approximately \$51,828.00. ASI values each individual and the opportunities to do the activities they choose to do, and when they choose to do them. Our agency conducts satisfaction surveys annually. Families consistently praise our staff and agency for assisting the individuals we support to have meaningful lives.

Describe how the home was selected by the individual: *(Include a description of how the individual-exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home-or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)*

ASI does not place anyone in our homes without the CDDP referral process and visits occurring. We are not involved in the initial placement process unless they are referred to our program. We take every entry into our program very seriously and spend time with anyone who is interested in living in one of our homes to ensure that the home is a good fit for them as well as current residents of the home. If individuals express dissatisfaction, they are referred to their Service Coordinator to seek alternative living arrangements.

Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:

List any supporting documents in addition to this form being submitted as part of the evidence package:

Schedule Sheets  
HCBS Policy

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Alternative Services Oregon-Inc. Date of Submission: 5/23/16

Agency Address: 7165 SW Fir Loop, Tigard, Or. 97223

Name/Site Location: , Portland, OR 97220

Capacity of Home: 5 Number of individuals residing in the home: 5

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks                      xx Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

Describe the physical location of the home: *(Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)*

The home is located in a residential neighborhood where both single family homes and multi-family apartments are located. The home is a typical 1960's daylight ranch style home with both a large fenced front yard and back yard with grass in both and large play and climbing structures. The home was purchased by a private investor who has leased the property to ASI since the purchase in the late 90's. All of the individuals who reside in this home have been served by ASI as children, and upon aging out of kids services, the home was converted to an adult home to ensure the stability of all, who are now young adults. The home fits within the neighborhood as it was built in a housing sub division at the same time other homes were built. The drive way, side and front streets serve as parking for staff, as is with other homes within that area.

The home is located a block from \_\_\_\_\_ where multiple small and large businesses offer full integration for shopping, dining out and recreational activities

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)*

This home has a locked gate to prevent three (3) of the five (5) individuals from actively seeking to leave supervised settings without staff. Of this group of residents, 4 of the 5 have resided in this home together since childhood. If any of the five (5) individuals leave without staff supervision they are risking their own safety due to lack of street, stranger and other community dangers. The home has a large deck and very large back yard where all of the individuals are able to come and go freely.

This home has two vehicles, which allows staff to assist each individual to access the community. All individuals supported in this home have daily access to a variety of activities within their own communities and partake in activities outside of their own community as well. All of the individuals who reside here are very active within the community

Each individual chooses the activities that are important to them and how frequently they want to go during ISP planning time. However, this information may change continually throughout the year if the person chooses. These activities are listed on a weekly activity form called a Schedule Sheet. On a weekly basis a staff person sits with the person and they plan days and times that the person wants to do activities. This helps operationally for staffing and our ability to ensure there is cash on hand, however, the individual may change their mind or want to reschedule throughout the week. The form and the purpose of the activity are trained to all staff who works in the home during Core Competency training when they are hired, ongoing as needed and each time a new ISP is implemented. It is our expectation that staff will assist each individual to achieve and participate in the activities as they have been assigned.

Some of the activities that people enjoy in their local community include: going to convenience stores or min-marts; visits with and from family, shopping at stores such as Target, Wal-Mart, Fred Meyer; going out to restaurants; movies, concerts in the park, aquatic parks, hiking and walking on the beach, riding the Max with staff, Saturday Market when in season, Oaks Park and Carnivals during fairs and Rose Festivals, viewing holiday lights, holiday parties and community dances, Special Olympics, and sporting events. Outside of the general community where they reside, they also enjoy camping, the beach, various river and day trips, and concerts in other areas of the state to name a few. Additionally, individuals may want to try new activities or do other activities that may not have been generated as “preferred” activities during their ISP. ASI encourages and accommodates people to try new things and be out in the community.

Occasionally, two or three of the individuals that live here want to do an activity together, but one individual for the most part each prefers to go out having 1-1 time with a Direct Support Professional.

Two individuals participate in community paid work and three in DSA (Day Support Activities) Two individuals ride the Tri-Met Lift and ASI transports the others to their work/DSA program

*Describe the nature and frequency of visitation by others to home: (Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)*

Four of the five current individuals that reside at \_\_\_\_\_ have visitors, friends and family that come to the home. ASI provides support for individuals to meet with their friends and family members and participate in visiting their home, or enjoying time eating out or other activities in the community. One individual has no family involvement, but does engage in a lot of activities with staff.

*Describe the typical source and utilization of transportation by the residents of the home: (Include a description of accessible public transportation specific to the home’s location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)*

Two of the individuals ride tri-met lift several times a week to work. ASI transports all of the others to community activities and one to her DSA activities as requested.

Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: *(Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)*

ASI has written policies to incorporate the HCBS standards. All staff will receive training on this policy once approved by the ASI Board of Directors (see attached). Along with the new HCBS policy, the Rights, Behavioral Support Plan, Functional Assessment, Personal Money, Personal Property, Abuse and Neglect/Mandatory Reporting and an approved Residency Agreement will be trained after the June 2016 ASI Board meeting. ASI has a strong set of Core Competency trainings and will begin having staff use the DHS Learning Center for other Core Competency training within the next 6 months.

Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)*

It is important that individuals feel encouraged and supported to be independent and have a self-directed life. ASI strives to ensure our Person Centered Information is thorough, accurate and continually updated to reflect the individual and their choices. Our PCI plans are over 20 pages, and offer new staff the ability to understand what is important to the person. This also assists in avoiding an interruption in activities when staff turn-over.

The PCI plan is the foundation of the ISP. The PCI is built upon a person's strengths, preferences, and needs; and empowers the person to maximize their choice and control. Strategies utilized to encourage individuals to self-direct their routines and activities and support independence include: ensuring the person is involved with their PCI plan and annual ISP; ensuring the person has the opportunity to communicate when they want to do activities and allowing and encouraging them to change their mind and/or reschedule; accommodating

staff time with when the person wants to wake up/go to bed, go to work/DSA, eat meals, and go into the community and enjoy learning and participating in community activities.

This home currently operates with a 3:3:1 staffing pattern for the 5 individuals that live in the home. One young man receives 1-1 16 hours per day. The staffing pattern provides optimal flexibility in each person's daily life and supports opportunities outside of the home. When a person chooses to do an activity that may be for an extended period of time, or away from the home overnight, the staffing pattern is adjusted to accommodate those activities. During the DSP staffing crisis that is affecting Comprehensive Services in the State of Oregon, ASI has not altered the staffing pattern. During this fiscal year, this home has generated 2227 hours of overtime, equating to approximately \$40,798.00. ASI values each individual and the opportunities to do the activities they choose to do, and when they choose to do them. Our agency conducts satisfaction surveys annually. Families consistently praise our staff and agency for assisting the individuals we support to have meaningful lives.

*Describe how the home was selected by the individual: (Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)*

ASI has not placed anyone in our homes without the CDDP referral process and visits occurring. We are not involved in the initial placement process unless they are referred to our program. We take every entry into our program very seriously and spend time with anyone who is interested in living in one of our homes to ensure that the home is a good fit for them as well as current residents of the home. If individuals express dissatisfaction, they are referred to their Service Coordinator to seek alternative living arrangements.

Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:

List any supporting documents in addition to this form being submitted as part of the evidence package:

Schedule Sheets

HCBS Policy

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Alternative Services Oregon-Inc. Date of Submission: 5/6/16

Agency Address: 7165 SW Fir Loop, Tigard, Or. 97223

Name/Site Location: Lebanon, Or

Capacity of Home: 5                      Number of individuals residing in the home: 4

Type of secure measures utilized by the site: (Check any that apply)

X Magnetic Locks                       Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

Describe the physical location of the home: *(Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)*

home is located in a residential single family homes neighborhood. The home is a ranch style home with a courtyard, and front and back grassed yards. The home was built under the Fairview bond and is managed by Specialized Housing Inc. The home fits within the neighborhood as it was built in a housing sub division at the same time other homes were built. Aside from the parking area being larger than most driveways, it is not recognizable as a "group home".

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)*

While this home is magnetically locked, it has not hindered the people who reside to access their chosen community activities when they are safe to do so, and not posing a threat to anyone or themselves. Also, the individuals that live here that do not have a "risk of leaving supervised settings" do not access the community independently due to skill level and are dependent on DSP's for assistance with accessing the community, regardless of whether or not the door is locked. This home has two vehicles, which allows staff to assist each individual to access the community. All individuals supported in this home have daily access to a variety of activities within their own communities and partake in activities outside of their own community. Of the 5 individuals that live here, 4 of them like to go out of the house and do activities daily, the 5<sup>th</sup> woman prefers to stay home and typically goes out on average every other day or every couple days, depending on what she is up for.

Each individual chooses the activities that are important to them and how frequently they want to go during ISP planning time. However, this information may change continually throughout the year if the person chooses. These activities are listed on a weekly activity form called a Schedule Sheet. On a weekly basis a staff person sits with the person and they plan days and times that the person wants to do activities. This helps operationally for staffing and cash on hand, however, the individual may change their mind or want to reschedule throughout the week. The form and the purpose of the activity are trained to all staff who works in the home during Core Competency training when they are hired, ongoing as needed and each time a new ISP is implemented. It is our expectations that staff will assist each individual to achieve and participate in the activities as they have been assigned.

Some of the activities that people enjoy in their local community include: going to convenience stores or min-marts; shopping at stores such as Target, Wal-Mart, Fred Meyer; garage sales (especially to look for old records); bowling; going out to restaurants; watching

local city league baseball games; Church; car shows; manicure/pedicures; and more. There are also activities that they enjoy outside of the immediate area throughout Oregon such as Wildlife Safari; McMinnville Air Museum; the Fish Hatchery; Disney on Ice; Portland Trailblazer basketball games; Portland Timber Soccer games; going to the Oregon Coast; the State Fair. Please see attached Schedule Sheets demonstrating preferred activities. Additionally, individuals may want to try new activities or do other activities that may not have been generated as "preferred" activities during their ISP. ASI encourages and accommodates people to try new things and be out in the community.

Occasionally the individuals that live here want to do an activity together, or with 1 other person, but for the most part prefer to go out with a Direct Support Professional.

Each individual that works, or participate in DSA (Day Support Activities), is assisted with transportation in order to attend. The house has two vehicles so people can travel to both depending on their work or DSA schedule. Additionally, all medical appointments, hair appointments or any other service that a person might want to access, are in the community, not done in the home.

*Describe the nature and frequency of visitation by others to home: (Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)*

Of the 5 current individuals that reside at \_\_\_\_\_, all have visitors and some have family that comes to visits. One individual has a sister who is also her guardian, \_\_\_\_\_. She comes to visit regularly and exchange phone calls. During holidays, her sister makes special trips to come and visit. Another individual has a brother who is also his guardian, but he lives out of state, and does not come to visit, but does have staff that no longer works for ASI come and visit. One gentleman is close to his mother and she comes to visit regularly and he visits with the ex-staff who also come to the home to visit everyone. Lastly, one of the individuals has no family involvement but does have committed friends who come and visit regularly, take him out to eat and to their own home for holidays, and on summer camping trips.

*Describe the typical source and utilization of transportation by the residents of the home: (Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for*

*individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)*

Lebanon is very limited for bus service. Maple has two vehicles that are used to ensure people are out in the community and get to their work or DSA program. The transportation time for Maple to their work site is 20 minutes.

*Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: (Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)*

ASI has written policies to incorporate the HCBS standards. All staff will receive training on this policy once approved by the ASI Board of Directors, (see attached). Along with the new HCBS policy, the Rights, Behavioral Support Plan, Functional Assessment, Personal Money, Personal Property, Abuse and Neglect/Mandatory Reporting and an approved Residency Agreement will be trained after the June 2016 ASI Board meeting. ASI has a strong set of Core Competency trainings and will begin having staff use the DHS Learning Center for other Core Competency training within the next 6 months.

*Describe how the self-direction and independence of individuals is encouraged and supported in the home: (Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)*

It is important that individuals feel encouraged and supported to be independent and have a self-directed life. ASI strives to ensure our Person Centered Information is thorough, accurate and continually updated to reflect the individual and their choices. Our PCI plans are over 20 pages, and offer new staff the ability to understand what is important to the person. This also assists in avoiding an interruption in activities when staff turn-over.

The PCI plan is the foundation of the ISP. The PCI is built upon a person's strengths, preferences, and needs; and empowers the person to maximize their choice and control. Strategies utilized to encourage individuals to self-direct their routines and activities and support independence include: ensuring the person is involved with their PCI plan and annual ISP; ensuring the person has the opportunity to communicate when they want to do activities and allowing and encouraging them to change their mind and/or reschedule; accommodating staff time with when the person wants to wake up/go to bed, go to work/DSA, eat meals, and go into the community and enjoy learning and participating in community activities.

This home currently operates with a 2:3:2 staffing pattern while 5 individuals live in the home – which is 2 staff on day shift, 3 staff on swing shift and 2 staff during the awake overnight shift. The staffing pattern provides optimal flexibility in each person's daily life and supports opportunities outside of the home. When a person chooses to do an activity that may be for an extended period of time, or away from the home overnight, the staffing pattern is adjusted to accommodate those activities. During the DSP staffing crisis that is affecting Comprehensive Services in the State of Oregon, ASI has not altered the staffing pattern. During this fiscal year, this home has generated 2,627 hours of overtime, equating to approximately \$45,000. ASI values each individual and the opportunities to do the activities they choose to do, and when they choose to do them. Our agency conducts satisfaction surveys annually. Families consistently praise our staff and agency for assisting the individuals we support to have meaningful lives.

*Describe how the home was selected by the individual: (Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)*

ASI does not place anyone in our homes without the CDDP referral process and visits occurring. We are not involved in the initial placement process unless they are referred to our program. We take every entry into our program very seriously and spend time with anyone who is interested in living in one of our homes to ensure that the home is a good fit for them as well as current residents of the home. If individuals express dissatisfaction, they are referred to their Service Coordinator to seek alternative living arrangements.

Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:

List any supporting documents in addition to this form being submitted as part of the evidence package:

Schedule Sheets  
HCBS Policy

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: South Coast Horizons

Date of Submission: May 17, 2016

Agency Address: 320 Central Ave Ste. 201 Coos Bay, OR 97420

Name/Site Location: , North Bend OR 97459

Capacity of Home: 5

Number of individuals residing in the home: 5

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks

Secure fencing

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**HOW DOES THE PHYSICAL LOCATION OF THE HOME ENSURE INTEGRATION IN, AND ACCESS TO, THE GREATER COMMUNITY?**

- The home is located in a quiet residential neighborhood among other private residences. Features of the home are similar to the neighbors' homes located next to and across from it: single story, wide paved drive-way, well maintained, and fenced backyard. There are no "institutional-like" characteristics that would call attention to the home: no signage and nothing posted on or beside the front door.
- Close proximity to community services provides access to settings that are also used by people not receiving HCBS. The home is close to parks, churches, the airport, a convenience store, the only Mall in the community, coffee kiosks, movie theaters and the gateway to the beaches.
- There are no zoning requirements or prohibitions for residential group homes that would jeopardize the privacy of the individuals in the home. (ORS 197.665)
- Neighbors or others walking in the neighborhood have never been observed taking an alternate route to avoid walking by the home.

Photo redacted  
for privacy

**HOW DOES THE SETTING SUPPORT INDIVIDUALS IN ACCESSING COMMUNITY ACTIVITIES AND LOCATIONS, INCLUDING THE FREQUENCY AND NATURE OF COMMUNITY ACTIVITIES?**

- People engage in community activities, events and services outside the home on a daily or weekly basis.
- Community activities and events described here are in addition to those specifically designed for individuals with I/DD.
- People are supported in accessing community services that are commonly delivered outside the home to individuals not receiving HCBS, including medical care, shopping, drive-thru coffee kiosks, dental care and restaurants.
- People are encouraged to choose activities through their participation in the ISP team meetings. An example of activities of choice, purpose and size of group is demonstrated in the table:

| <b>Activities of Choice:</b>   | <b>Purpose:</b>                              | <b>How Often:</b>           | <b>With Whom:</b>                            |
|--|--|-----------------------------|--|
| Purchasing coffee (or other drinks) from a drive thru coffee kiosk   | Recreation                                   | Weekly                      | Individual<br>Small Group<br>Whole Household |
| Visiting Farmers' Markets and making purchases (lunch, drinks, snacks)   | Recreation<br>Purchasing with personal funds | Weekly, in season           | Individual                                   |
| Participating in community activities, including bowling, swimming, visiting art museums   | Recreation<br>Fitness                        | Twice weekly                | Individual<br>Small Group                    |
| Doing preferred leisure activities including; visiting construction zones, fire department, painting at the Pottery Company, feeding the ducks at the park, watching sea lions and sitting in the sand at the beach. | Leisure<br>Relaxation<br>Pleasure            | Twice Monthly or More often | Individual                                   |

- During the ISP process, and documented on the Person Centered Information document, persons indicate whether they want to participate in Discovery/volunteer work in the community, day service activities or stay in their home. Their choices are supported and strategies are written and implemented.
- Day service activities are available five days a week to all residents. The setting for day service activities is centrally located in the community, and is within walking distance to a variety of places of interest to all community members. These include, the library, the Art Museum, the boardwalk along the river, a pottery-making store, several restaurants, a city park and the police and fire department. People are encouraged and supported to access any and all of these places during the DSA program. If, at any time, a person indicates a preference to do something other than their current choice, they will meet with their ISP team to discuss and make changes.
- During the year, depending on the weather and holidays, residents are offered to participate in company-wide activities located outside the local community setting. These include, visiting the Wild-life Safari in another county, attending the county fair in another town, exploring a farm and pumpkin patch, picnicking and walking in a large campground and park and attending the Marine Center in Newport. These activities are also open to the public.
- Transportation and support for medical care is provided by the program as determined by the PCP and the person's needs. The Program Manager and a house staff accompany the person.
- Each person has a customized personal schedule that reflects their preferences and opportunities for community access—whether leaving from the home or the DAS setting. Personal schedules are developed directly from Person Centered Plan documents and are designated Action Plans. Action plans list desired outcomes, measurable steps to be taken based on the person's preference, timelines for each step, who is responsible and where to record progress.

Supporting documents attached:

- Action Plans home
- Action Plans Seacove (DSA)

## HOW DOES THE SETTING SUPPORT VISITATION BY OTHERS TO THE HOME?

- Each person may choose at anytime to have visitors, including family, friends, and non-staff persons.
- Family and visitors are welcomed to spend time with their person, including participating in celebrations, holidays, birthdays, eating meals and spending time alone.
- Family and visitors are encouraged to visit the home through personal contact by the Program Manager, especially for birthdays, celebrations and barbeques.
- The setting is welcoming as a “home” rather than as an “institution” because it is free of “institutional- like” qualities. There is no visitor’s log for visitor’s to “sign-in”. Visitors are not restricted to specified visiting hours. There is no restricted visitation meeting area. There are no “visitor’s hours” posted by the door; no visitor name tags and no identifiable signage on or around the house, such as, “no-trespassing” signs, or signage that announces the house.

## WHAT IS THE TYPICAL SOURCE AND UTILIZATION OF TRANSPORTATION BY THE RESIDENT?

- Public transportation specific to the location of the home includes bus lines and Dial-a-Ride services, as well as taxi-cab services.
- Due to safety reasons our residents are transported to all services and locations in company vehicles. The vehicles are not identifiable as “institutional transporters” – there are no logos or numbers on the vehicles.
- An accessible van is always available to transport residents to appointments, community activities and day activity services.
- The typical length of the commute from home to the day service activities is fifteen minutes.
- Transport to services and activities anywhere in the local area is less than 30 minutes.
- The average length and nature of the commute is consistent with that of non-HCBS member of the local community.

## HOW DOES STAFF TRAINING REFLECT THE REQUIREMENTS OF HCBS?

The philosophy of community-based living is the basis behind HCBS requirements: services and supports to persons with I/DD must be based on the needs of the person as indicated in their person-centered service plan. Our Agency's training program embraces the concept of person-centered living—person-centered services and supports are the corner-stone of the Oregon ISP. Support staff are trained on all parts of the ISP for each person served in the house. Training includes,

- The One Page Profile (IPP): lists positive qualities about the person, important things to the person in a specific setting and how best to support the person.
- The Person-Centered Information document (PCI): the foundation of the planning process for the ISP. It is the record of the person's perspective about many areas in their life.
- Risk Identification Tool (RIT): identifies serious risks in the person's life.
- Provider Risk Management Strategies (RMS): guidelines, protocols, safety plans, action plans and other written instructions for staff to follow while providing services to specific persons.
- Protocols: aspiration/choking, constipation, dehydration and seizures.

Staff training is documented on Inservice Training forms kept in each staff's binder in the main office. A change in any document requires all staff to be trained on the change.

Supporting documents attached:

- IPP
- PCI
- RIT

## WHAT STRATEGIES ARE USED TO ENCOURAGE AND SUPPORT SELF-DIRECTION AND INDEPENDENCE?

Strategies are based on the ISP, the development of implementation strategies (action plans) and training of staff who provide supports in the home.

- Implementation strategies, including action plans and support documents are developed to address desired outcomes expressed by the person and their ISP team. Support documents are developed to manage identified risks. Support staff are then trained on these action plans.
- If action plans or support documents need to be changed, the established procedures as outlined in the Oregon ISP are followed.
- Individual preferences are encouraged and supported. For example, one person coming home from the DAS program prefers to change into a lounging outfit and sit quietly looking at fashion magazines, while at the same time, another person goes into the backyard and sits at the picnic table watching the hummingbirds gather at the feeder. People will be supported in another activity if they want. For example, if the hummingbird watcher wants to shower before going outside, then that choice is accommodated by staff.
- Routines, such as, bathing, mealtimes and other ADLs are loosely scheduled so as to be flexible if people want to do something different, or refuse the ADL tasks. People always have the right to refuse, or change their minds. House staff will then offer different times, different ADLs and keep meals to be eaten at a later time.
- People are encouraged to make choices about many things in their daily lives. For example, what particular outfit to wear to the movies, which television show to watch, where to watch TV—in their bedroom or in the living-room, and what snack to have while watching TV.
- People are supported in exercising their privacy rights, including, being supported in making phone calls in private, in the use of bathroom facilities and in the right to request that housemates stay out of their bedrooms.

## **HOW WAS THIS HOME SELECTED BY THE RESIDENTS?**

- The individuals have lived together in this home for over fifteen years. Their individual needs and preferences guided the choice for the setting.
- The guardian of one of the residents, after visiting several settings in other counties, requested placement for their family member in this home. The decision was based on the individual's preferences, for example, she really likes privacy and was pleased to have her own room.
- Individual choice of support services or settings is addressed annually during the Person-Centered Planning process. Individuals are encouraged and supported to express their concerns with the provider and/or to change services or settings.
- If at any time an individual expresses dissatisfaction with their home, they will be supported in contacting their services coordinator immediately.

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Albertina Kerr Centers    Date of Submission: 5/16/16 Revised 06/28/16

Agency Address: 424 NE 22nd. Ave., Portland, OR 97232

Name/Site Location: \_\_\_\_\_, Tigard, OR 97123

Capacity of Home: 4                      Number of individuals residing in the home: 4

Type of secure measures utilized by the site: (Check any that apply)

X Magnetic Locks              Secure fencing

You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

Describe the physical location of the home: (Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)

Albertina Kerr currently supports four young people with mental health challenges and developmental disabilities in the Tigard area. The program has neighbors on each side for the home and we share a joint driveway with one neighbor. This home is in a neighborhood very close to a highway exchange that would offer a challenge to the program and police department to find clients with elopement issues. The home is located in Tigard, OR \_\_\_\_\_ off of the 217 freeway. The cross streets to the neighborhood are \_\_\_\_\_ . The \_\_\_\_\_ group home sits at the corner of \_\_\_\_\_ and \_\_\_\_\_ and has neighbors directly in front of the home and on either sides of the home. It is a nice neighborhood with a high population of retired couples and families with small children.

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: (Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small

groups, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)

The \_\_\_\_\_ program is located near major malls (Washington Square & Bridgeport Village) there is a small shopping center with a Walmart and Winco Foods that our staff and girls like to take walks to several times a week. Often to window shop, other times to do budget shopping or purchase items for the home. We can access these through transportation or by bus. The \_\_\_\_\_ and \_\_\_\_\_ bus routes have bus stops on \_\_\_\_\_ and \_\_\_\_\_ (one block away) that the girls access when they need to utilize public transportation. . . There are established activities that the young ladies can choose from in the home. There is an activity calendar generated monthly to ensure that the young ladies have a say in scheduling of activities to fit in with the routine schedule for the home. Activities vary upon interest but school activities (football game, dances), volunteer service (humane society, soup kitchen, SOLV), physical outings (nature hikes, Kerr bikes, races, swimming), and movie nights are popular monthly activities that we ensure happens, (school activities vary depending on the time of month and if young ladies are interested). We encourage the young ladies to pursue personal goals through joining school clubs, church affiliations, scouts programs, and hanging out with friends. We currently have young ladies in School Soccer program, scouts, Tutor program at school.

For the summer we have a young lady signed up to volunteer weekly at the \_\_\_\_\_ Library, Another young lady attending Kiwanis camp, and another young lady signed up to volunteer at the local thrift shop run by the UGM. Several young ladies are showing interest in volunteering or working for Kerr. As a group, the home volunteers at a soup kitchen each month and feed the homeless on the streets of Portland every quarter. We are hoping to set up the opportunity for gardening boxes for those interested through the OFB as well and we also have a beach trip scheduled for June 26-30, 2016. All of our young ladies also attend the local high schools

Describe the nature and frequency of visitation by others to home: (Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)

Our neighborhood boasts the previous mayor \_\_\_\_\_ (our neighbor \_\_\_\_\_). We have a school teacher and a veterinarian as our neighbors to the right. On the other side of the street two houses down is the retired principal of \_\_\_\_\_ High School and two houses down on our right side is a firefighter with 4 young children. When our young ladies are outside playing, they come over and ask to play house or chalk and over the years, they have become fast friends with our girls. They invite the girls over to their birthday parties and to play on the trampoline, the teacher next door has come over to teach the girls how to do Christmas crafts and the retired mayor would drop over goodies for our girls during the holiday season. For our part, we invite the kids over to the mini parties we throw for the girls or holiday celebrations or pool parties that we have at the home. We bake cookies or make holiday cards and have the girls pass it out in our neighborhood which is how we learn of our neighbors and they learn more about who we are. It's truly a great community environment that we have fostered and encouraged our young ladies to be proactive in becoming good neighbors and citizens in our area. Families of each young lady are encouraged to schedule visits that we can host in the group home. Family and friends are welcome to visit as often as the young ladies would like.

Describe the typical source and utilization of transportation by the residents of the home: (Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)

The program typically provides transportation of the youth at this program using a shared vehicle and public transportation (Tri-Met). Some individuals ride to school by school bus. Public transportation is one block away from the group home. Bus lines and are accessible less than a 5 minute walk. The Tigard transit center is about a 15 minute walk or a 5 minute car ride away. The home has access to a company vehicle to ensure we are able to make our appointments and attend activities that may be out of the way of the public transport. For the time being we do not utilize dial a ride or ride wise. Commute to Hillsboro for any appointments at the Main Kerr office or a local PCP appointment is 2 hours by bus. Public transport to the local high school is 30 minutes.

Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: (Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)

All-Direct Support Professionals, (DSP) for the majority, are trained on an annual basis. DSP are trained on each-person's individual support plan, medical plan, dining plan, behavior support plan and supplemental core competencies. DSP are also trained on HIPPA, Collaborative Problem Solving and National Association of Direct Support Professionals Code of Ethics. This code focuses on person centered thinking.

Describe how the self-direction and independence of individuals is encouraged and supported in the home: (Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)

Staff are trained to encourage and assist people to direct their own support as much as possible, given the person's support needs. The individual's choices about their preferences for their daily routines and other preferences are what drive the Individual Support Plan process and the development of their plans. Staff are trained to respect and support the individual's preferences.

We truly try to live out the vision of creating strong families and helping them to thrive in their communities and provide the opportunities to live full and self-determined lives without limiting them in any way.

Describe how the home was selected by the individual: (Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)

All persons requesting services are referred by DHS (Department of Human Services) or the CDDP (Community Developmental Disability Program). It is important to ensure our program is a good fit for the person being considered. Individuals residing at \_\_\_\_\_ toured the home prior to moving in. The individual and guardian chose the program that they prefer. The Guardian is ultimately the person who decides if the child will live at \_\_\_\_\_. Their decision is then communicated to their ISP team and Service Coordinator.

If a child, guardian or ISP team is not satisfied with the program and wishes to transfer to exit, the ISP team meets and reviews what other programs may have openings. If there is a suitable opening in another AKC program, the child and ISP team members can schedule a visit to the program to see if it may be a better fit for the child. If there is no other option, then the CDDP, with ISP-team approval, will submit a referral to outside agencies.

Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:  
List any supporting documents in addition to this form being submitted as part of the evidence package:

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Albertina Kerr Centers

Date of Submission: 04/21/2016

Agency Address: 424 NE 22<sup>nd</sup> Ave. Portland, Or. 97232

Name/Site Location: Quiet Meadows –

Milwaukie, Or. 97267

Capacity of Home: 3

Number of individuals residing in the home: 3

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks       Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally-identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

**Describe the physical location of the home: (Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)**

is located on a dead end street in a quiet residentially zoned neighborhood. The homes are close together on standard lots and a few of the neighbors are friendly. There are no stores or other service stations close to the home. The closest store is approximately 2 – 3 miles away. The home fits in well with other homes in the neighborhood.

**Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)***

This home to three individuals. Each person likes a variety of different activities. For community activities they frequently go 1:1 with staff, or sometimes with a housemate depending on what they desire. One individual goes to a day program; another prefers to remain home in the comforts of his recliner; while the third individual receives Community Inclusion services for 25 hours per week, enjoying a variety of activities in the community. Each person chooses the activities they want to participate in. Direct Support Professional's (DSPs) are trained to assist people to develop new ideas for activities and to suggest other things that what each person might enjoy.

**Describe the nature and frequency of visitation by others to home: *(Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)***

Family members and friends are welcome at any time and are encouraged to stop by whenever they choose. Visitors will often call when they are coming or when they plan to be in the neighborhood to ensure the person they are coming to visit is at home. One individual likes to have dinner parties and invites family members or friends to come and enjoy food that he helped prepare. The other 2 individuals have family members that come on occasion.

**Describe the typical source and utilization of transportation by the residents of the home: *(Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)***

The home has a van assigned to them. It is a specific van with barrier protection in accordance with a BSP to keep the driver safe. The closest bus stop is 1.5-2.5 miles away. Two of the individuals use the barrier van, as they are unable to ride tri-met due to their complex medical and behavioral needs. The third individual is able to use the van as well as Tri-met lift.

**Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: *(Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)***

Staff are trained in CPR/First aid, OIS, Drivers, Med class, SIM (Safety in motion), mandatory abuse, etc. DSPs also receive training on a variety of Core Competencies that include person-centered thinking. DSP's are trained on person-specific core comps, medical plans, and behavior support plans/functional assessments as well. In addition, all staff are trained on the National Alliance of Direct Support Professionals (DSP) Code of Ethics and held to these standards. These ethical standards focus on person-centered thinking.

**Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)***

All staff are trained to encourage and assist each person to direct their own care as much as possible. Each person living in the home is encouraged and given every opportunity to assert their independence and to self-direct their routines and activities. Each experiences different communication challenges. Staff assist people by using picture books or magazines to see what seems to peek each person's interest. People can sometime point to things they might enjoy. These things are then researched and turned into activity for the person to try. Staff communicate well with each other and share ideas and activities that people particularly enjoyed or did not seem to like. This information then informs future plans.

***Describe how the home was selected by the individual: (Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)***

Unfortunately one of the individuals living in the home cannot verbally express whether or not they want to live here. However, this individual and another here have been roommates for years. They are comfortable and know each other well. If at any time there was speculation the individual was unhappy with the living arrangements there would be a meeting to discuss it and to find alternatives. As it stands, there is no issue and the person seems very happy. Both of the other individuals have guardians who chose this home. The guardians of the newest individual to move in choose this home after looking at a variety of providers. They visited twice and asked questions of the DSP's and manager. They visited other agencies and ultimately chose AKC and this home. The process was similar with the other individual who lives at this home.

**Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:**

All Kerr homes focus on inclusion and ensuring that people are integral, contributing parts of their communities. First and foremost it is the HOME of the people who live there, so they drive what happens (decorating, activities, visitors, menus, etc.). Staff are trained to focus on the person first and to assist each person to live as independently as possible, including having full access to their communities.

**List any supporting documents in addition to this form being submitted as part of the evidence package:**

Please let us know if additional evidence is desired/required.

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Albertina Kerr Centers

Date of Submission:

Agency Address: 424 NE 22<sup>nd</sup> Ave Portland, Or. 97232

Name/Site Location: .

Gresham, OR. 97080

Capacity of Home: 3

Number of individuals residing in the home: 3

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks

Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

**Describe the physical location of the home: (Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)**

*is located in a quiet residential area that is residentially zoned. All the neighbors are very friendly and wave and say hello when we the people who live at the home are walking around the neighborhood. The closest store/service station is about half a mile away. There is also a small shopping enter approximately 1 mile from the home.*

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)*

Three people live at \_\_\_\_\_ and each one likes to be active and out in their community. They enjoy a variety of activities like going out for coffee or food, shopping, walks, movies, and concerts to name a few. They each really enjoy 1:1 activities with staff, but enjoy going out with their housemates as well. One person receives Community Inclusion services that Albertina Kerr provides for 25 hours per week, in addition to their usual activities. The other two folks recently moved to the home and are still trying to find an appropriate Day or Employment Services provider. In the meantime, they are both offered a variety of community activities on a daily basis as they desire.

Describe the nature and frequency of visitation by others to home: *(Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)*

Family members and friends are always welcome to visit as often as they can. One individual has a sister that lives in Seattle. She calls 2 to 3 times a week to talk to him and visits about once a month or as more often if she can. Another has a sister that lives close by and likes to stop by often to say hi and take him to dinner, get his hair cut or various other activities. Family and friends are welcome to visit at any time.

**Describe the typical source and utilization of transportation by the residents of the home: (Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)**

This home has a mini bus that transports all of the people who live at \_\_\_\_\_ wherever they need or want to go. It is has a barrier for one individual that needs it based on her BSP and to keep the driver safe. It also has a lift system in it for one of the individuals that uses a wheelchair. Currently, none of the three ride public transportation or are able to use door-to-door transportation due to their behavioral support needs.

**Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: (Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)**

All staff are trained in First Aid/CPR, OIS, Drivers, Med Class, Mandatory Abuse, HIPAA etc. Majority of trainings are done on an annual basis. All staff are required to get their trainings done in a timely manner. DSP's are all trained on each individual support plan, Core Comps medical plans, Dining plans and Behavior support plans. In addition, each DSP is trained on the National Alliance Code of Ethics and held to these standards. This code focuses on person-centered thinking.

**Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)***

All staff are trained to encourage each person's independence. Everyone who lives in this home has a Behavioral support plan specific to their needs, interests and how to best support them while out in the community or in the home. Staff are trained to encourage each person to direct their own care and schedule as much as possible.

Prior to their move into the home, a behavior specialist came to train our staff on specific ways each one communicates. We receive ongoing support around each person's communication/needs and the Behavior Specialist comes to our monthly staff meeting for continual training.

All three know and understand specific sign language techniques to communicate some of their needs. When one individual wants to go out to get her soda she will show the sign for shoes and money and point to the door. Another will take you to the locked cupboard where his money is kept and point to it then show the sign for coffee and walking. The other individual likes to have snacks at his disposal and will show the sign for a snack and take you to his fridge that we keep stocked with snacks in it just for him.

All three have various signs they use on a continual basis to help communicate their needs and all staff are trained to understand these signs. Each individual has a team of staff, family members and a Services Coordinator that meets with them to help determine their wants and needs. We are continually trying new activities with them to help peak their interests and to help them be as independent as they desire.

**Describe how the home was selected by the individual: (Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)**

*Each individual including their family members had the opportunity to visit this home before moving in. Few modifications were made to better suit one of the individual's needs. Two people moved here together from a home in           County. They have lived together most of their lives and get along very well. Before the move they came up together to visit and explore the surroundings. A staff went down to their home to get to know them and learn their everyday life. The other individual came to visit before his move from           County. All three are doing well and are getting along in their new home.*

*The people who live at this program and their families were offered other options and worked with their County Services Coordinator to explore what various Providers had to offer. In the end, they chose to live in this home and be served by Albertina Kerr Centers.*

**Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:**

All Kerr homes focus on inclusion and ensuring that people are integral, contributing parts of their communities. First and foremost it is the HOME of the people who live there, so they drive what happens (decorating, activities, visitors, menus, etc.). Staff are trained to focus on the person first and to assist each person to live as independently as possible, including having full access to their communities.

**List any supporting documents in addition to this form being submitted as part of the evidence package:**

Please let us know if you require/desire any additional documentation.

## HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Albertina Kerr Centers  
of Submission: 5/9/16

Date

Agency Address: : Milwaukie Oregon, 97222

Name/Site Location:

Capacity of Home: 3                      Number of individuals residing in the home: 3

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks                       Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

**Describe the physical location of the home: (Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.)**

The home is located in a residentially zoned neighborhood. The neighborhood is fairly characteristic of most East Side urban neighborhoods. It has mostly homes built from the 1910's to the 1970's on standard size urban lots.

The neighborhood is very friendly and local residents are often seen walking or waiting to pick up their kids from school by the nearby bus stop.

There is an assortment of community services close by on 99 E. There is a library, parks, movie theater and shopping. The residents often walk there to go shopping or get something to eat.

**Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)***

The individuals at \_\_\_\_\_ access the community almost daily. They do so in a variety of ways. They utilize agency vans, Trimet, the orange line light rail, and walk as modes of transportation. They are always accompanied by a staff member and take their wheel chairs. 2 of the individuals participate in KERR's community inclusion program which operates from the home. Mostly they go out Monday through Friday for this service, but it is available on the weekend as needed. One individual goes to \_\_\_\_\_ every Thursday to volunteer. Many of the Community Inclusion activities are small group with 2 or 3 individuals, with some one-on-one activities provided each week as well.

They love to go to the local movie theater, parks, downtown via the orange line, to festivals on the waterfront, produce shopping, local malls and restaurants. They also like to do more nature based activities, like visiting local parks or going fishing. They go on medical appointments every few months on average.

The individuals are always encouraged to participate in choosing the activity, including when and where, and for how long they go.

**Describe the nature and frequency of visitation by others to home: *(Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)***

The home is very welcoming of visitors, especially family members. Family members are encouraged to stop by anytime to visit. One woman has a sister and mom who stop by a few times a year, usually around the holidays. Another man does not have a lot of family contact as his father lives in Montana. His brother occasionally visits. Another man's mother will visit

several times a year and will help him decorate his room, go shopping or just hang out. His father also will stop by a few times a year in addition, usually when he picks him up to go to his house for a visit.

Sometimes the individuals will have a friend from another group home stop by. A massage therapist occasionally comes to the home to do massages. In the past we also had a local musician come and play on a monthly basis.

**Describe the typical source and utilization of transportation by the residents of the home: (Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)**

The most typical sources of transportation from the home are agency vans and Trimet lift. The individuals utilize the agency vans for many types of activities, both near the group home and longer trips, like to the beach. If an agency van is unavailable they will use Trimet lift. They also use both of these modes of transportation for medical appointments.

The most typical length of commute for all activities is around 20 minutes. This is consistent with others in the local community.

They also walk to the closest stores often and/or just take a walk around the neighborhood.

Less frequently they use the light rail-picking it up on \_\_\_\_\_ and taking it into the city, sometimes connecting to go to the zoo.

There are two bus lines that are fairly close by, one on \_\_\_\_\_ and one on \_\_\_\_\_

**Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: (Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)**

All staff are trained on Core Competencies which cover person centered thinking. They are trained on the National Alliance of Direct Support Professionals (DSP) Code of Ethics and held to these standards. These ethical standards focus on person-centered thinking. They also are trained on all of the person's specific plans, including Individual Support Plans and Support

documents and Supplemental Core Competencies, which inform them on specific information about the individual.

**Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)***

Staff are trained to encourage and assist people to direct their own support as much as possible, given the person's support needs. The individuals choices about their preferences for their daily routines and other preferences are what drive the ISP process and the development of their plans. Staff are trained to respect and support the individuals preferences.

**Describe how the home was selected by the individual: *(Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)***

The individuals living at the current home moved here from a 5 bed home. This provided them with a more spacious and less crowded home environment that they preferred and their representing teams also supported.

The individual's expression of change in their preference to live here would be communicated to their ISP team and to their Services Coordinator.

**Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:**

The home blends into the neighborhood and community. There are very wide streets which are not busy to take walks on. Neighbors are out and about and people have frequent opportunities to interact with other members of their communities. There's great access to stores that are very close which provide the individuals the opportunity to frequently visit them. People have a variety of transportation options for visiting other areas of the city and beyond.

All Kerr homes focus on inclusion and ensuring that people are integral, contributing parts of their communities. First and foremost it is the HOME of the people who live there, so they drive what happens (decorating, activities, visitors, menus, etc.). Staff are trained to focus on the person first and to assist each person to live as independently as possible, including having full access to their communities.

**List any supporting documents in addition to this form being submitted as part of the evidence package:**

Please let us know if additional evidence is desired/required.

HCBS Heightened Scrutiny Evidence Worksheet

Licensed Agency: Albertina Kerr Centers

Date of Submission: 5/16/2016

Agency Address: 424 NE 22<sup>nd</sup> Avenue, Portland, OR 97232

Name/Site Location: Albertina Kerr Centers

Capacity of Home: 3

Number of individuals residing in the home: 3

Type of secure measures utilized by the site: (Check any that apply)

Magnetic Locks       Secure fencing

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You are being asked to provide a package of evidence demonstrating how the home meets Home and Community-Based setting requirements. Please provide information requested below. You may include or attach any relevant information that supports the demonstration that the home is Home and Community-Based. This information may include narrative descriptions, citation of program policies or protocols, and supporting documents. Please do not include personally identifying or protected information of individuals. Any supporting documents attached should have personal identifiers and protected information redacted before submission.

Describe the physical location of the home: *(Include a description of the physical characteristics of where the home is located including zoning, proximity to neighbors and community services, etc.*

**\*The home is located at \_\_\_\_\_ in Keizer, OR 97303, zoned for residential properties. Keizer is a suburban community and is part of the Salem Metropolitan area. It is about 1.5 miles away from the freeway access and Keizer Station- a large shopping district which is also home to the primary public transit system (city bus depot). The home is also close by several city parks, which are routinely accessed for purposes of sport, walking, picnics, etc.**

Describe how the setting supports individuals in accessing community activities and locations, including the frequency and nature of community activities accessed by individuals residing in the home: *(Include a description of how often individuals are engaging in activities or using*

*services outside the home. Where are individuals going? For what purpose- employment, recreation, medical care, grocery shopping (IADL's), etc.? Are the activities individual, small group, or include the whole household? Are individuals involved in or encouraged in choosing the activities, including where, when, and with whom an activity occurs? Are individuals encouraged to work or seek day service activities outside of the home? Do individuals have customized personal schedules that reflect their preferences and opportunities for community access?)*

**\*The first individual is supported in day services with an external agency and has started exploring Discovery and Vocational Rehabilitation services. The second person is receiving out of the home day service support with Albertina Kerr Centers. The third individual is actively employed and is supported by a Vocational Rehabilitation services with an external agency. Residential support is built-in to these obligations in the form of team meetings, collaborations, and transportation.**

**The individuals have ready and daily access to their communities and areas beyond their immediate communities. Activities and access are shared or individualized, per preference of each individual. The Activities are planned and supported with the input of each individual, and each person has their own calendar to aid in scheduling and achieving activity goals. They are also encouraged to write entries on their calendars with or without staff support, as needed and/or preferred. Visible calendars help both staff and people supported to remember and track activity goals and other plans, such as appointments.**

**Each person is offered opportunities to assist with grocery shopping, in turns. There are also short shopping trips for specific needs or ingredients, and those are offered as well, as some people do not favor long trips to the grocery store.**

**staff also assists in family/guardian plans and events, and transport as needed, in collaboration with family and guardians.**

*Describe the nature and frequency of visitation by others to home: (Describe the typical patterns for visitors to the home. This includes community members such as family, friends, or other non-staff persons visiting the home. How does the home encourage or welcome visitors?)*

**\*Family and guardians of all residents call ahead or drop by for a variety of reasons. They are welcome into the public areas of the house as well as the family member's bedroom/private space, as per the supported resident's choice. Most often, the family/guardian will have a short, cordial visit with staff and perhaps other supported people who happen to be there, and then leave with their family member, but occasionally**

they will have been stopping by for a short visit; bigger plans tend to take people away from the house for longer periods of time. There are no specific restrictions on visitors, and staff facilitates interactions and communication between people served and families, if needed, but in most cases the guys prefer to get out of the house and into nature, particularly in the warmer, dryer months. Camping, fishing, sports, bicycling, Kroc Center, etc. are preferred activities, whether with family, friends, or staff.

Describe the typical source and utilization of transportation by the residents of the home: *(Include a description of accessible public transportation specific to the home's location such as bus lines, dial-a-ride services, light rail, etc. Describe how individuals in the home typically get to and from community locations. What is the typical length and nature of commute for individuals residing in the home to get to work or day services, and is this consistent with the experience of members of the local community?)*

**\*The home has a van, the city bus depot is nearby; bus stops are in easy walking distance. Bicycles are also utilized for short trips or are loaded into the van for rides on bikeways or parks. Day service transportation is per provider. One resident has a paying job and is transported from school to work; residential staff provide transportation from work, which is only a few minutes away. Local community areas of interest (parks, shopping, dining) are within a half-hour's drive, at most, and trips out of town might be planned and/or coordinated with other interested parties in other group homes—and their vehicles—in order to expand on vehicle access and individual preferred timelines.**

Describe qualifications and training for agency staff related to the requirements of HCBS and philosophies of community-based living: *(Describe agency policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to agency resources or efforts to support person-centered practices and HCBS concepts.)*

**\*All Kerr staff have training expectations and maintenance thereof in the areas of health, safety, ethics, person-centered planning, Behavior Support Plans, Oregon Intervention System, First Aid/CPR, 911 Emergency Training, Medical Administration, Ethics, Mandatory Abuse Reporting and Driver Training.**

**Staff are expected to have at least 12 hours of training each year, most exceed the minimum required. In addition, all staff have access to optional and/or external trainings geared toward more specific issues in need of support or clarification, or just curiosity. Staff are also**

encouraged and required to be part of the ISP process as well as giving input and updates throughout the ISP year.

Describe how the self-direction and independence of individuals is encouraged and supported in the home: *(Include a description of strategies utilized to encourage individuals to self-direct their routines and activities and how independence is supported. Describe how program resources are structured or utilized to allow for flexibility based on individual needs and preferences. Do staffing and the delivery of ADL support function in a manner that allow an individual optimal flexibility in their daily lives and support opportunities outside of the home?)*

**\*People served drive their calendars and schedules, with or without staff encouragement and involvement, as needed or preferred. Staff help by offering ideas and by finding the best way to researching and planning, based on need and choice. Staffing hours and support is built around this concept and practice, so the great majority of plans and dreams are realized through collaboration or guidance, or simply reassurance and execution. Staff encourage those supported to help themselves, but lend support as needed. It is sometimes easier and faster to just do for others, but more important is to give the support and so that people may have the confidence and the tools to be successful independently. Minds change and plans change, so if something new is introduced or becomes more important, we are used to adapting and starting the process all over again. Staff are happy when those they support are happy, and accomplishments are recognized and celebrated.**

Describe how the home was selected by the individual: *(Include a description of how the individual exercised choice in selecting the site, such as if the individual or their representative had the opportunity to visit the site prior to entry. Were any other sites visited or offered for touring as well? Describe how individuals in the home or their representatives are informed about other service setting options. What is the protocol or standard practice for the home when individuals or their representative express dissatisfaction with the environment or a desire to move?)*

**\*All people residing at \_\_\_\_\_ toured the home prior to moving in, as did their families/guardians, and their Service Coordinators. At the time of the tours for no other Kerr homes had rooms available, however, other agency's homes were toured and \_\_\_\_\_ was chosen because it was a good fit for the people served. If dissatisfaction, concerns, or suggestions are put forth, the agency will collaborate and work for change, if indicated or if safely possible, adapting and growing with the people we support. If a person**

supported expresses the desire to move, the ISP team is notified and the Service coordinator follows up with the team to make a final decision. To respect and honor the person supported, the initial statements are passed on and the choices are made plain presented with neutrality so as not to sway thoughts in one direction or another.

Provide any additional information that is relevant to demonstrating the home is Home and Community-based, supporting integration and full access to the greater community:

**\* We believe in providing the best care for the individuals we support and making sure that the people we support have the right to lead a self-determined lives and realize their full potential. We also believe that community integration, and person-centered planning are imperative for the success of the individuals we support.**

List any supporting documents in addition to this form being submitted as part of the evidence package: