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August 5, 2022

Tribute to an IA Legend

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A rare picture of Holly Randall enjoying herself away from work with her family. Seen here (L-R) with her son Ben, daughter Emma and husband Jeff.

Late, on the evening of July 29, 2022, I was viewing a piece of Independence Association's history as she stood on the threshold of my office door. Holly Randall, who has worked at Independence Association since October of 1990, was literally bidding me farewell as she advances to the next chapter of her life, retirement. We both shared an awkward moment of silence, me sitting at my desk, and Holly leaning on the door until I finally said, "I will not say goodbye, and I will not hug you." Holly said, "fine let's settle for see ya later. You know I will be around." Then she stood another moment before leaving my office.

Life without Holly at Independence will be very challenging. She is the heart and soul of our agency. Not one to take credit or brag about her accomplishments, she was often the mastermind of the achievements accomplished by the organization. I am not sure whose idea it was, (most likely it was Holly's idea) but I still remember looking at the Parkway

building with Holly in 2014, and fantasizing a united Independence Association, all under one roof. Little did we realize that on May 8<sup>th</sup>, 2018, that fantasy became a reality when we purchased that building and consolidated everyone under one roof.

Holly is well-known as a skilled negotiator and can always find common ground between two entities having differing opinions. Most of all, Holly is a strong advocate of people with disabilities. She worked tirelessly to ensure people's needs were met and was always willing to support even the most challenging of people. Holly touched the lives of hundreds if not thousands of people with disabilities.

Holly created the famous "slide show" which is the most popular event at every annual dinner. Literally, 30-years ago starting with slides on a carousel, and a projector, Holly made a point to ensure that at least one picture of every person served was included in the slide show. The technical quality of Holly's slide shows improved over the three decades she worked here, ending with video shows timed to favorite pop-tunes.

I am fortunate enough to have met both of Holly's parents, Christopher and Holly Hock Dumaine. As I got to know them, it is easy to see where Holly got her work-ethic, morals, and capacity to serve others.

On behalf of everyone at Independence Association, the staff, people served, and people no longer with us, thank you for everything you did to make Independence Association a better place, and for ensuring everyone has a seat at the table.

Ray Nagel, MBA, Executive Director



Holly and Ray laughing at the 55th Anniversary celebration of Independence Association as Ray invited everyone to sing *Happy Birthday* to Holly, whose birthday was the next day.

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### Get Your Copy of Our 55th Anniversary History!

You'll love this professionally written story about how local families created and sustained a home- and community-based alternative to institutionalization for their children.

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# HCBS SETTINGS RULE

We understand that many families are not aware of the widespread changes in the system of delivery required of providers by both the federal and state overseers of Medicaid. Moreover, families may not be aware of the mandated service changes due to the adoption of the HCBS Global Waiver rules in January 2022. This has placed a significant amount of scrutiny, and federal pressure on Maine, as well as all providers of I/DD services to comport with this rule. The process began in earnest right before the pandemic and had obvious setbacks due to COVID. But we must be in full compliance on or before March 30, 2023, or risk the removal of MaineCare funding for failure to comply.

The process has been rigorous. We are in the middle of the process and expect further challenges as we attempt to comply through March 30, 2023, and beyond. Writing policies, providing evidence of practices, training staff to new standards, providing evidence of the training, implementing a lease for each person residing in our homes or in a shared living environment, and creating individualized calendars has taken as much energy to complete as the actual day-to-day operations. All of this evidence is uploaded to a portal and reviewed by a company contracted by DHHS who reviews our submissions and determines if the evidence meets the requirements. If it does not, it is rejected, and we must resubmit. All of this is happening while we are still fighting COVID, and we are experiencing a 25% staffing shortage.

## *What is the HCBS settings rule?*

The federal Centers for Medicare and Medicaid Services (CMS) released a rule regarding home and community-based services which took effect March 17, 2014. The rule requires that people who receive home and community-based services and supports *funded through Medicaid* must receive those services and supports in settings that meet specific standards. The standards are designed to ensure the settings are truly home and community based. After failing to address the rule for several years, Maine began its quest to meet the rule in earnest in November, 2019 and adopted the HCBS settings rule in January 2022.

## *Okay. What does that exactly mean?*

**All settings receiving Medicaid funding for the provision of MaineCare HCBS must:**

- Be integrated in, and support access to, the greater community.
- Provide opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.
- Ensure the individual receives services in the community to the same degree of access as individuals not receiving Medicaid home and community-based services.
- Be selected by the individual from different setting options offered, including non-disability specific settings and an option for a private unit if the individual lives in a provider-owned or controlled residential. The person-centered service plan must document the setting options offered based on the individual's needs, and preferences; and for residential settings, the individual's resources.

- Ensure an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint.
- Optimize individual initiative, autonomy, and independence in making life choices.
- Facilitate individual choice regarding services and supports, and who provides them.

### **Standards that Apply to All Provider-Owned or Controlled HCBS Settings (Residential and Non-Residential)**

- Individuals should have freedom and support to control their schedules and activities.
- Individuals should have access to food any time
- Individuals may have visitors of their choosing at any time.
- Be physically accessible to all individual participants.

### **Standards that Apply Only to Provider-Owned or Controlled HCBS Residential Settings**

- Provider-owned or controlled residential settings must meet an additional set of standards.
- The member must have a legally enforceable agreement with the same responsibilities and protections from eviction as all tenants have.
- Each individual has privacy in their sleeping or living unit (entrances, bedrooms and bathrooms) with appropriate staff having keys to doors as needed.
- Individuals sharing units have a choice of roommates.
- Individuals have the freedom to furnish and decorate their sleeping or living units.

### ***Enough of the jargon, what should I expect?***

Everything listed above with a bullet point (and much more) must be proven with documented evidence that we are providing that specific action for each adult we serve who receives Section 21 or Section 29 Services. Basically that includes anyone who lives in our group homes, anyone who attends Spindleworks, EnvisionME, or anyone receiving Shared Living services is subject to the settings rules.

We must provide documented evidence in our service delivery notes proving that the requirement for all bullet points and far more, was rendered for each person across a span of three separate months. The documentation must meet specific standards to meet the evidentiary compliance, and we must provide at least one piece of evidence per month, per person for three separate months. The standards of compliance require that we meet the standards written below.

## **Residential Settings**



Unless **YOU** or the **Resident** submits a rights modification-waiver or indicate in the PCP specific plans that deviate from the full implementation of the below listed rights, our staff must comply with these rules.

**Allow** residents access to food at all times of the day and night.

**Allow** residents to eat any type of food they want and eat it wherever they choose.

**Allow** residents to entertain visitors when they choose.

**Allow** residents to invite visitors into their bedrooms.

**Visitors** do not have to sign into a visitor log or have staff permission to visit.

**Visitors** may spend the night with the resident.

**Residents** may come and go into and out of the home without staff approval.

**Residents** may choose to have access into the community when they want, and staff are required to demonstrate the flexibility to allow for this to happen.

**Encourage** residents to seek employment of their choice.

**Provide** a lock and key to their bedroom and the home.

**Allow** residents to have unaccompanied access to their money.

**Allow** residents to participate in the staff interview process.

**Allow** residents to screen new residents to determine a good match.

**Allow** residents to pick the staff they want to work with.

**Homes** must be free of any barriers to exit the building.

**Behavior** or safety plans for any one resident, may not impede any of the rights indicated above for their housemates.

**Residents** must be given the flexibility to change their schedules spontaneously and staff must be flexible to support those changes.

**Offer** opportunities for residents to live in less restrictive environments such as their own apartments, and demonstrate what those options are at least on an annual basis.

**Residential** settings ideally should be within walking distance of the broader community, and if it is not, then more evidence is required to demonstrate access to community amenities such as church, libraries, parks, retail stores, museums, colleges/universities, job centers, restaurants and shops.

# Day Programs & Community Supports



Unless **YOU or the Participant** submits a rights modification-waiver or indicate in the PCP specific plans that deviate from the full implementation of the below listed rights, our staff must comply with these rules.

**Allow** participants access to food at all times of the day and night.

**Allow** participants to eat any type of food they want and eat it wherever they choose.

**Participants** may come and go into and out of the program without staff approval.

**Encourage** participants to seek employment of their choice.

**Create** a listing of participants who are employed and those who are not employed.

**For** those who do not work, create a listing of barriers preventing them from working

**Develop** goals for those individuals to overcome those barriers and obtain employment.

**Allow** participants unaccompanied access to their money.

**Provide** participants with a means to secure their cash or finances

**Allow** participants to participate in the staff interview process.

**Allow** participants to pick the staff they want to work with.

**Programs** must be free of any barriers to exit the building.

**Behavior** or safety plans for any one participant, may not impede any rights for their fellow participants.

**Programs** must demonstrate that they have the ability to provide the services to enable participants to maintain competitive integrated employment.

**Programs** must have formal goals to increase the amount of participants in competitive integrated employment and maintain data to track these goals.

**All activities** must be age appropriate.

**Participants** should be allowed to eat and associate with whomever they choose and for as long as they desire.

**Programs** are required to focus on opportunities for new growth, new hobbies, and interpersonal relationships outside of the program.

**Center-based activities** are not encouraged. Rather than activities in a center, programs should identify venues in the community that offer similar activities.

**At least three** community-based options must be offered each week.



### Goodlife Model

In order to accommodate these requirements, Independence Association has adopted the “Goodlife” scheduling paradigm. This paradigm is based on a scheduling model that focuses on a 12-hour shift perspective. This allows staff the opportunity to provide the flexibility in a resident’s schedule and allows a consistent staff member across venues. Hence, the same staff member can provide home supports and work supports as well as community supports to the same individual. Continuity of care is a best practice shared across the medical and assisted living industries.

The model, championed by Dr. Michael Strouse who is on the faculty at the University of Kansas and is the CEO of Goodlife Innovations is spreading across the country as a solution to staffing shortages, increased rates of pay for staff, and as a means to comply with the HCBS settings rule.

Independence Association will fully support the HCBS settings rules. Guardians, and family members may learn more about the requirements from their respective Case Manager or can access

<https://www.maine.gov/dhhs/oms/about-us/policies-rules/proposed-and-recently-adopted/statewide-hcbs-transition-plan> to learn more about the rule.

To review our policies and how we intend to support the settings rules, please feel free to access our policies at <https://www.independenceassociation.org/hcbs-at-ia>



## Independence Association

Caring, Commitment  
and Community



**spindleworks**

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*Our mission: To assist adults and children with disabilities in obtaining full and inclusive lives in their chosen communities.*

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