

HABILITATION, GROUP HOME

Service Description (*All Group Homes*)

HP16-00

Services provide a variety of interventions designed to maximize the functioning of persons with developmental disabilities. Services may include, but are not limited to: habilitative therapies, special developmental skills, behavior intervention and sensorimotor development.

Additional Service Description for Community Protection and Treatment

For group home consumers who are determined by the Division to need Community Protection and Treatment supports, the group home shall also be able to provide the following:

1. A variety of interventions designed to maximize the functioning of consumers with intensive behavioral support needs.
2. Measures to be designed to protect Community Protection and Treatment consumers as well as the general public from possible harm.
3. Treatments and related supports as determined by the Individual Support Plan (ISP) team to be implemented and followed to ameliorate symptoms, disorders or behaviors that have interfered with the consumer's full inclusion in the community.
4. Assumption of responsibility for assuring continuous responsible supervision of Community Protection and Treatment consumers.
5. Ensure that service delivery captures community strengths and resources and be implemented designed with clear and therapeutic measurable outcomes.
6. Recognition that Community Protection and Treatment supports are intended to be time-limited based on the needs and progress of the person.
7. Service delivery will emphasize positive behavioral supports and high level supervision.
8. The consumer will voluntarily, or as directed by the court, participate and abide by agreed upon restrictions stated in the consumer's ISP.

Service Requirements and Limitations (*All Group Homes*)

1. This service is provided to consumers in a residential setting who have a variety of needs, including behavioral, physical and medical challenges. These settings typically serve two to six (6) consumers with supervision needs ranging from minimal to intense. Consumers may have intense behavioral challenges or may be dually diagnosed; thus requiring highly trained staff.

2. This service shall not be provided when the consumer is hospitalized.
3. Provide room and board services. The Qualified Vendor providing this service must also be awarded Room and Board, All Group Homes.
4. This service is authorized for the day. A day begins at 12:00 a.m. (midnight) and ends at 11:59 p.m. on the same calendar day. An individual who is present at 11:59 p.m. may be billed for on that calendar day.
5. The Qualified Vendor is not relieved of their obligation to continue to serve a consumer if the needs of that individual change. If the needs of the consumer change, the Qualified Vendor is obligated to initiate a cooperative planning process with the ISP team to update and change the consumer's ISP plan, if appropriate. The ISP team will immediately engage Division Health Care Services staff if the consumer's needs are medical in nature.
6. Transportation to school, day programs, and employment services are the responsibility of the residential habilitation provider. Other reasonable transportation within the community is also the responsibility of the residential habilitation provider.

Service Goals and Objectives

Service Goals (All Group Homes)

1. To provide a broad array of support services to promote the physical, emotional, and mental well-being of the consumer.
2. To enable the consumer to acquire knowledge and skills and be a valued member of his/her community based on his/her own choices.
3. To provide training and supervision for the consumer to increase or maintain his/her self-help, socialization, and adaptive skills to reside and participate successfully in his/her own community.
4. To develop positive relationships for consumers and their families.
5. To provide opportunities for consumers to interact socially with family, friends and the community at large, including providing information regarding and facilitating access to community resources.
6. To assist the consumer in achieving and maintaining a quality of life that promotes the consumer's vision of the future.
7. To assure the health and safety of all resident consumers.

Additional Service Goals for Community Protection and Treatment Group Home Supports for consumers shall include:

8. Implementing and monitoring a person-centered plan that will minimally consist of the following focuses: a common understanding of the person from a strengths/needs perspective, developing a shared vision of the future that reflects a shared commitment for a quality life for the person, a listing of the opportunities and obstacles for reaching that vision, and a review process for checking progress over time.
9. To provide group home service that incorporates treatment with interventions designed to:
 - 9.1 Provide integrated treatment goals, functional outcomes, and therapeutic interventions that assist Community Protection and Treatment consumer to function safely in society and avoid offending or re-offending.
 - 9.2 Provide training, therapy and supervision, whether voluntary or court-ordered, for Community Protection and Treatment consumer to increase or maintain their self-help, socialization, and adaptive skills to better live successfully in the community and continue to remain out of prison or psychiatric settings.
 - 9.3 Assist the Community Protection and Treatment consumer in defining, achieving and maintaining a quality of life that corresponds to the consumer's vision of the future.
 - 9.4 Inclusion of the consumer in both development and implementation of supports in a manner which is respectful to the consumer, with positive supports and collaboration with both the consumer and team members.
10. To provide group home service and support that are designed to protect the consumer and the community by:
 - 10.1 Providing environmental and programmatic safeguards and structures that protect the Community Protection and Treatment consumer as well as other residents, neighbors and community members from those behaviors that endanger the Community Protection and Treatment consumer, other people or property and/or interfere with the rights of others. The Qualified Vendor shall assume the responsibility for assuring continuous responsible supervision of Community Protection and Treatment consumer(s).
 - 10.2 Supporting the consumer to make positive choices to resolve or contain the behaviors that require intensive intervention and supervision, thus reducing the need for protective measures.

- 10.3 Respecting the consumer with positive supports and collaboration with both the consumer and team members.

Service Objectives (*All Group Homes*)

The Qualified Vendor shall:

1. In accordance with each resident consumer's ISP processes, assist in developing an individualized support plan, including:
 - 1.1 Establish habilitation-related service functional outcomes based on assessment data and input from the consumer and the consumer's representative(s) which will allow the consumer to achieve his/her long term vision.
 - 1.2 Develop a specific training/teaching strategy for each functional outcome, e.g., schedule for implementation, frequency of services, teaching strategies, data collection methods.
 - 1.3 Based upon the presence or absence of measurable progress, make changes to functional outcome(s) and/or strategies, as agreed upon by the ISP team.
2. As identified in each resident consumer's ISP, provide a broad array of support services such as:
 - 2.1 Assistance and training related to personal and physical needs and routine daily living skills;
 - 2.2 Implementing strategies to address behavioral concerns, developing behavior intervention programs, and coordinating with behavioral health programs to ensure proper review of medication treatment plans;
 - 2.3 Ensuring that the health needs of the consumer are being met, including providing follow up as requested by the consumer's primary care physician or medical specialist;
 - 2.4 Implementing all therapeutic recommendations including speech, occupational, and physical therapy and assisting consumers in following special diets, exercise routines, or other therapeutic regimes;
 - 2.5 Mobility training, alternative or adaptive communication training;
 - 2.6 Providing general supervision to the consumer; and

- 2.7. Opportunities for training and/or practice in basic consumer skills such as shopping, banking, money management, access and use of community resources, and community survival skills.
3. Develop, maintain, or enhance independent functioning skills for each resident consumer in sensorimotor areas, cognition, personal grooming, hygiene, dressing, eating, toileting, self-medication and first aid, recognizing symptoms of illness, and preventing accidents and illnesses. In order fulfill this mandate, basic hygiene, grooming, and first aid supplies shall be available.
4. Assist each consumer in developing methods of starting and maintaining friendships of his/her choice, as well as appropriate assertiveness, social skills, and problem solving abilities for use in daily interactions.
5. Provide opportunities for consumers to participate in community activities and facilitate consumer utilization of community resources.
6. Arrange and plan for transportation to support each resident consumers in all daily living activities, e.g., day treatment and training, employment situations, medical appointments, visits with family and friends and other community activities, etc. Promote, as appropriate, the acquisition of skills necessary to access community transportation resources.
7. Develop, at a minimum, a monthly on-site/community integrated schedule of daily activities and document consumers direct input into the schedule. Daily activities and schedules are based on consumer choice and preferences, developmental level, ISP goals, and enrichment of life experiences. Allow for reasonable choice in activity participation and offer alternative activities. This schedule shall be available to consumers, consumer representatives, or others upon request.
8. Play an active role in ensuring that services are complimentary with other involved entities, including day treatment and training providers, health care providers, and schools, are coordinated to meet the needs of the consumers served.

Additional Service Objectives for Community Protection and Treatment Group Homes
The Qualified Vendor shall:

9. Assist the consumer's ISP team in the development of the Emergency Contact Plan, Risk Assessment and the Discharge/Transition Checklist. Files reviewed during monthly administrative visits at each home shall document the availability of the Emergency Contact Plan and that all other requirements are met at each home.
10. Provide on-site monthly administrative supervision and monitoring to each home.
11. Provide security precautions for protection of neighbors and other community citizens to the extent possible.

12. Provide a structured, specialized environment for consumer.
13. Provide collaboration and coordination with appropriate community resources, such as local government, parole officers, and law enforcement agencies.

Service Utilization Information (*All Group Homes*)

1. Utilization and authorization of services for each site will be determined based on the collective needs of all of the consumers at that site and will be revised as needs change. The Qualified Vendor is expected to assist the Division in the process for determining the support level to be authorized for the consumers living in the home. This process should be a cooperative process that includes input from the Qualified Vendor.
2. The amount of direct care staffing authorized for each residence is determined by assessing the collective needs of all consumer residents. The authorized staffing for each residence is documented in the “Hab Matrix”. If the needs of the consumers change, the Qualified Vendor is obligated to initiate the cooperative planning process with the District Program Manager/designee to revise the “Hab Matrix” as appropriate.
3. The DDD District Program Administrator/Manager or designee shall approve any authorized hours in excess of Range 8 on the Daily Rates schedule for Habilitation, Group Home.

Rate Basis (*All Group Homes*)

1. Published. The published rate is based on one (1) hour of direct service.
2. The Qualified Vendor shall invoice for payment for each consumer the *per diem* rate that reflects the number of residents in the group home and the range of hours provided in a week that reflect the lesser of 1) the authorized direct service hours documented on the approved “Hab Matrix”, or b) the actual direct service hours delivered. The Qualified Vendor may calculate the weekly, or may calculate the monthly average of weekly direct service hours at the end of the month for that month.

Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division’s Policies and Procedures Manual, Billing Manual, RateBook, and/or other provider resources made available by the Division.

Direct Service Staff Qualifications (*All Group Homes*)

Direct service staff must:

1. Have at least three (3) months experience implementing and documenting performance in individual programs (specific training strategies);

2. Have both three (3) months experience in providing either respite or personal care and have received training, approved by the Division, in implementing and documenting performance; or
3. Perform three (3) months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation as described above.

Additional Direct Service Staff Qualifications for Community Protection and Treatment Group Homes

Direct service staff must:

4. Have access to either direct or consultative staff resources who have been trained and or possess skills in the following:
 - 4.1 Defining both challenging and desired behaviors in observable and measurable terms;
 - 4.2 Describing several strengths of consumers as well as needs and how these relate to challenging behaviors;
 - 4.3 Describing the values of the consumer and how they might contribute to the challenging behaviors;
 - 4.4 Identifying the consumer's most effective learning style;
 - 4.5 Involving the consumer's family and supportive others in identifying strengths/needs;
 - 4.6 Identifying the need for the consumer to have an assessment/reassessment to determine if behavioral health needs are being met;
 - 4.7 Staff and/or victim grooming and manipulation techniques;
 - 4.8 The therapy "triangle relationship" that can occur;
 - 4.9 Recognizing emotional responses;
 - 4.10 Offense patterns;
 - 4.11 Ways to develop mutually respectful and trusting relationships while guarding against potentially manipulative behaviors of program participants;
 - 4.12 Awareness of power and control over individuals in a subordinate role; and
 - 4.13 Principles of positive behavior support and person centered planning.

5. The Qualified Vendor shall ensure that appropriate staff participate in a Division supported forums designed to assist providers in the areas of person centered planning reviews, ongoing staff training aimed at developing competencies in positive behavioral supports and other therapeutic modalities, clinical oversight and other supportive ventures.

Recordkeeping and Reporting Requirements (*All Group Homes*)

1. The Qualified Vendor shall maintain a copy of the ISP and the consumer's risk assessment on file and make it available to the consumer/family/consumer's representative and/or Division upon request.
2. The Qualified Vendor shall submit monthly progress reports, including a written summary describing the specific service activities and the performance data that identifies the consumer's progress toward achievement of the established functional outcomes, within ten (30) days after the close of the month to the consumer's support coordinator and the consumer/family/consumer's representative.
3. The Qualified Vendor must maintain on file consumer attendance reports and proof of hours worked by their direct service staff, e.g., staff time sheets.
4. The Qualified Vendor shall provide monthly reports of all health care appointments and results to the responsible party.
5. The Qualified Vendor shall ensure a log of personal belongings of consumers served is maintained and continually updated. The Qualified Vendor will also submit to the consumer's representative a monthly accounting of expenditures per the individual spending plan.
6. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division .