HABILITATION, NURSING SUPPORTED GROUP HOME

Service Description

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.

The focus of this residential service is to meet the needs of consumers that require continuous nursing intervention and/or nursing oversight. Nursing support is included to be scheduled in this group home on a 24/7 basis. The need for this level of nursing intervention will be determined by an assessment by the Division’s Health Care Services Manager/designee. Direct service staff that does not possess nursing credentials will have primary responsibility for carrying out habilitative responsibilities that do not require nursing.

Service Requirements and Limitations

1. This service is provided to consumers in a residential setting that typically serves four (4) to six (6) consumers who require regular nursing intervention and/or oversight, each of whom has a 24 hour planned and defined schedule of nursing responsibilities. In addition, all supplies and equipment in support of nursing intervention and/or oversight must be on hand at the setting.

2. This service is not appropriate for consumers who have only an unplanned intermittent need for nursing.

3. This service shall not be provided when the consumer is hospitalized.

4. This Qualified Vendor providing this service must also be awarded Room and Board, All Group Homes.

5. 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 that calendar day.

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.

7. Provide room and board services.

Service Goals and Objectives

Service Goals
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.

**Service Objectives**

The Qualified Vendor shall ensure that the following objectives/outcomes are met:

1. In accordance with each resident consumer’s Individual Support Plan (ISP) processes, develop an individualized support plan, including:
   
   1.1 Establishing habilitation-related service objectives/functional outcomes based on assessment data and input from the consumer and the consumer’s representative(s) that will allow the consumer to achieve his/her long term vision.

   1.2 Developing a specific training/teaching strategy for each objective/outcome, e.g., schedule for implementation, frequency of services, teaching strategies, data collection methods, etc.

   1.3 Based upon the presence or absence of measurable progress, making changes to objectives/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, physical therapy and assisting consumers in following special diets, exercise routines, or other therapeutic regimes.

2.5 Mobility training, alternative or adaptive communication training, as needed.

2.6 General supervision to the consumer.

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, etc.

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.

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 consumer 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 consumer’s direct input into the schedule. Daily activities and schedules are based on consumer choice, 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 complementary with other involved entities, including day treatment and training providers, health care providers, and schools and are coordinated to meet the needs of the consumers served.

9. Ensure that needs which require nursing support are appropriately prescribed by a qualified, licensed physician and that all professional nursing tasks are provided in accordance with the Arizona Nurse Practice Act, including the required supervision of Licensed Practical Nurses (LPNs). The Nurse Practice Act is comprised of both statutes and rules (Arizona Administrative Code). A.R.S. § 32-1602 et seq.; A.A.C. Title 4, Chapter 19.

Service Utilization Information

1. Utilization and authorization for this service will be determined based on the consumer’s need for this particular service. The service may be revised as needs change. The Qualified Vendor is expected to reach an agreement as to the full direct service (including nursing support) supporting the site based upon the collective needs of all the residents. This process shall be a collaborative one that includes input from the Qualified Vendor, District Program Management, and the Division’s Health Care Services. Significant changes should be noticed to all parties.

2. Prior to initiation of this service and at least annually thereafter (and more frequently if required by the Division), a nursing support assessment shall be performed by the Division’s Health Care Services unit. Initial authorization and/or continuation of this service may also depend on the Arizona Health Care Cost Containment System’s (AHCCCS) approval of the cost-effectiveness plan.

Rate Basis

Published. The published rate is based on one (1) day of direct service.

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

1. Non professional Direct service staff must:

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

1.2 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;
1.3 Perform three (3) months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation as described above.

2. Professional Direct service staff must:

   2.1 Be licensed in accordance with Arizona law and rules (Nurse Practice Act) to perform the skilled tasks and duties necessary to provide nursing support;

   2.2 Be supervised as required by Arizona law and rules (Nurse Practice Act); and

   2.3 Obtain and maintain necessary physician prescriptions and orders.

**Recordkeeping and Reporting Requirements**

1. The Qualified Vendor shall maintain a copy of the ISP 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 objectives/outcomes, within ten (10) business days of 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 timesheets.

4. The Qualified Vendor shall provide monthly reports of all health care appointments and results to the consumer’s representative.

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 documentation that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.