

Habilitation Staffing Schedule Requirements and Annual Review

1 **CHAPTER 52 HABILITATION STAFFING SCHEDULE**  
2 **REQUIREMENTS AND ANNUAL REVIEW**

3  
4 REVISION DATE: XX/XX/XX, 8/10/22

5 REVIEW DATE: 5/9/2023

6 EFFECTIVE DATE: April 3, 2019

7 REFERENCES: RFQVA DDD-2024; Division Medical Policy 1620-C

8  
9 **PURPOSE**

10  
11 To establish the duties and responsibilities of Qualified Vendors for preparing  
12 and submitting regarding the preparation and submission of daily  
13 Habilitation Staffing Schedules for Group Homes and Individually Designed  
14 Living Arrangements/Supported Living sites. (IDLA) unless otherwise noted.

15 DEFINITIONS

16 1. "Capacity" means the maximum number of Members that a  
17 Group Home or Supported Living site may support.

18 2. "Enhanced Staffing Ratio" or "ESR" means the number of paid  
19 supports greater than currently provided to the Member in the  
20 service setting and ensures the Member's health, safety, and  
21 emotional, spiritual, and physical well-being.

22 3. "Group Home" means the same as defined in A.R.S. § 36-551.  
23

Habilitation Staffing Schedule Requirements and Annual Review

---

- 24 4. "Habilitation Staffing Schedule" means the number of direct  
25 service hours that are authorized by the Division to be provided  
26 by the Qualified Vendor at a particular Group Home or Supported  
27 Living site during a week.
- 28 5. "Home" means, for the purposes of this policy, a Group Home or  
29 Supported Living site.
- 30 6. "Master Staffing Schedule" means the primary Habilitation  
31 Staffing Schedule outlining Member needs and the amount of  
32 paid staff required to support all Members at the site. This  
33 schedule is considered active in the absence of a Temporary  
34 Staffing Schedule.
- 35 7. "Member" means the same as "client" as defined in A.R.S. § 36-  
36 551.
- 37 8. "Occupancy" means the number of Members or other individuals  
38 with developmental disabilities who currently live in a Group  
39 Home or Supported Living site.
- 40 9. "Planning Document" means a written plan developed through  
41 an assessment of functional needs that reflects the services and  
42 supports, paid and unpaid, that are important for and important

43 to the Member in meeting the identified needs and preferences  
44 for the delivery of such services and supports.

45 10. "Qualified Vendor" means a provider of community  
46 developmental disability services that has applied for Qualified  
47 Vendor status, meets the criteria for Qualified Vendor status,  
48 and has entered into a Qualified Vendor Agreement with the  
49 Department.

50 11. "Supported Living" means a house, apartment, condominium, or  
51 similar property in the community, that an adult Member(s)  
52 rents or owns, and where they receive teaching support or  
53 habilitation and personal care based on the collective support  
54 needs of the Member(s) who live there.

55 12. "Temporary Staffing Schedule" means any modifications to the  
56 Habilitation Staffing Schedule for less than 30 days resulting in a  
57 change to the habilitation range as outlined in the Division's Rate  
58 Book.

59 **POLICY**

60 **A. REQUIREMENTS CRITERIA**

61 1. Qualified Vendors operating Group Homes and Supported Living

Habilitation Staffing Schedule Requirements and Annual Review

---

62 sites in which Members reside shall~~are responsible for the~~  
63 following:

64 a. Create and maintain Habilitation Staffing Schedules  
65 for the collective needs of the residents living in the  
66 Group Home or Supported Living site as outlined in  
67 the Planning Document;

68 b. Adhere to~~Maintaining~~ the staffing level as indicated  
69 in the approved Habilitation Staffing Schedule of  
70 the Group Home or Supported Living Site; ~~and~~

71 c. Submitting all daily Habilitation Staffing  
72 schedules to the Division for review and approval  
73 through the Program Staffing Application in Focus;

74 d. Maintain a current, approved Master Staffing  
75 Schedule of the service site; and

76 a.e. Submit a Temporary Staffing Schedule for the  
77 service site, when required.

78 **B. CREATING AND SUBMITTING STAFFING SCHEDULES FOR**  
79 **GROUP HOMES AND SUPPORTED LIVING SITES**

80 2.1. Qualified Vendors shall~~are responsible for creat~~ing and

- 81 submitting all Master or Temporary Habilitation Staffing  
82 Sschedules to the Division that are determined based on the  
83 collective needs of all Mmembers at that site as follows:
- 84 a. Five business days prior to all known or planned  
85 events, including Members moving in or out, school  
86 breaks, and holidays; and (e.g., Mmembers moving  
87 in/out, school breaks, holidays).
- 88 ~~b.a.~~ Within two business days of all unplanned events,  
89 including Member hospitalizations or illness. (e.g.,  
90 member hospitalized, illness, or vacation).
- 91 2. **Qualified Vendors shall S**submit a new Master Schedule to the  
92 Division for the following: changes in:
- 93 a. Changes in Occupancy: ~~The number of Division~~  
94 ~~members or other individuals with developmental~~  
95 ~~disabilities who currently live in the home.~~
- 96 b. Changes in Capacity: ~~(requires Network pre-approval) for~~  
97 ~~group homes only.~~
- 98 c. Site Code and/or address.

Habilitation Staffing Schedule Requirements and Annual Review

---

- 99 ~~d.c.~~ Any modifications to the Habilitation Staffing Schedule  
100 ~~exceeding 30 days~~ resulting in a change to the  
101 habilitation range exceeding 30 days as outlined in the  
102 Division's Rate Book;~~:-~~
- 103 d. Home closure; ~~and~~:-
- 104 e. Any other event that changes the habilitation range with an  
105 unknown end date.
- 106 3. The Qualified Vendor shall request and receive prior approval  
107 from Network for any changes in Capacity.
- 108 3.4. The Qualified Vendor shall submit a new Temporary Staffing  
109 Schedule for any modifications to the Habilitation Staffing  
110 Schedule for less than 30 days resulting in a change to the  
111 habilitation range as outlined in the Division's Rate Book,  
112 caused by events to include: including but not limited to:
- 113 a. Changes in the Acute behavioral health need(s) of a  
114 Member residing in the Home;:-
- 115 b. Changes in the Acute physical health need(s) of a  
116 Member residing in the Home;:-

Habilitation Staffing Schedule Requirements and Annual Review

117 c. School ~~or~~ holiday breaks that result in a change in staffing  
118 of the Home;

119 d. A Member's Sshort-term absence from a day or work  
120 program;

121 e. A Member's Sscheduled or unscheduled short-term  
122 absence from the Hhome;

123 f. Any temporary relocation of a Member to another setting;  
124 and;

125 e. Any other event that changes the habilitation range with a  
126 known end date.

127 5. In an emergency, the Qualified Vendor shall ~~If there is an~~  
128 ~~emergency:~~ Sstaff the Group Hhome or Supported Living site as  
129 appropriate for the immediate circumstance.

130 4.6. The Qualified Vendor shall notify the following individuals when  
131 an emergency event modifies the staffing range:

132 a. ~~When the emergency event modifies the staffing~~  
133 ~~range notify:~~

134 i.a. The Network Residential Manager ~~and~~/or designee by  
135 the next business day and submit a revised Habilitation

Habilitation Staffing Schedule Requirements and Annual Review

136 ~~S~~staffing ~~S~~chedule with a detailed explanation; ~~and~~.

137 ~~ii.b.~~ The Member's support coordinator as soon as possible,

138 but no later than the next business day.

139 ~~5.7.~~ The Qualified Vendor shall ~~C~~complete ~~s~~Summary ~~c~~Comments

140 for each Habilitation Staffing Schedule in the Program Staffing

141 Application in Focus with the following information:

142 a. ~~Identify the member(s) by~~ first name and the last initial

143 of the last name of each Member; ~~name;~~

144 a.b. Description of each Member's staffing supports and needs

145 including:

146 b.c. Indicate member(s) who:

147 ~~i.iii.~~ i. Have a ~~An~~ approved behavior plan;

148 ii. Have a ~~A~~ work and/or day program schedule;

149 ~~ii.iv.~~ iii. An approved Enhanced Staffing Ratio

150 ~~(ESR)Need additional staffing supports,~~ as outlined

151 in the Members' Planning Documents, ~~for needs~~

152 including a description of the approved parameters,

153 location, and times the ESR is needed. ~~but not~~



Habilitation Staffing Schedule Requirements and Annual Review

154  
155  
156  
157  
158  
159  
160  
161  
162  
163  
164  
165  
166  
167  
168  
169  
170  
171

~~limited to:~~

~~Behavioral Health;~~

~~Physical Health;~~

~~Community~~

~~Overnight~~

~~e. d. Explanation of the reason for the schedule change;~~

~~and~~

~~d. Provide specific details regarding the members' staffing needs.~~

**C. ANNUAL RESIDENTIAL REVIEW**

1. Annually, the Qualified Vendor shall, ~~upon invitation,~~ meet with the Division Network to review ~~daily habilitation staffing schedules and includes~~ the following:

~~a. Daily Habilitation Staffing Schedules;~~

~~a.b. Vacancies and Member Placement Profiles;~~

~~b.c. Review information regarding potential housemates;~~

~~c.d. Additional staffing supports:~~

Habilitation Staffing Schedule Requirements and Annual Review

---

172 i. ~~\_\_\_\_\_~~ ~~Comparisone~~ ~~of the~~ census to the ~~Habilitation~~

173 ~~Staffing Ss~~ schedule to ensure it is accurate; ~~:-~~

174 i. ~~ii. \_\_\_\_\_~~ Review ~~of~~ the information in the ~~summary~~

175 ~~comments~~ section regarding additional staffing

176 ~~supports;:-and~~

177 ii. ~~iii. \_\_\_\_\_~~ Verification ~~of~~ documentsation that ~~indicate~~

178 ~~the~~ additional staffing supports are approved by

179 the planning team, including any behavioral health

180 ~~supports;:-~~

181 ~~d.e. \_\_\_\_\_~~ Capacity; ~~:-~~

182 ~~e.f. \_\_\_\_\_~~ Residents not funded through the Division, including

183 individuals who are involved with the Department of

184 Child Services; ~~:-~~

185 ~~f. \_\_\_\_\_~~ Cost effectiveness; ~~and;:-The review should result in~~

186 ~~mutually agreed upon appropriate and cost effective~~

187 ~~supports that meets the physical health, functional,~~

188 ~~social, and behavioral health needs of the member in the~~

189 ~~most integrated and least restrictive setting; and~~

Habilitation Staffing Schedule Requirements and Annual Review

- 190 g. Any other pertinent information upon the Division's  
191 request.~~Summary comments.~~

192 2. The Qualified Vendor and Division shall agree on appropriate  
193 cost effective supports that meet the physical, functional,  
194 social, and behavioral health needs of the Member in the most  
195 integrated and least restrictive setting.

196 2.3. The Qualified Vendor shall, ~~W~~within 14 calendar days following  
197 the annual review, submit any required changes to Habilitation  
198 Staffing Schedules ~~all agreed upon updates~~ to the Division.

199 ~~Maintain all approved staffing schedules.~~

200 **SUPPLEMENTAL INFORMATION**

201 **D. ~~C.A. DIVISION~~**NETWORK REVIEW APPROVAL OF HABILITATION****  
202 **STAFFING SCHEDULES**

203 1. The ~~Division~~**Network** ~~shall~~~~is~~ responsible for the following:

204 a. ~~Create or revise a staffing schedule.~~

205 b. Review Habilitation sStaffing Sschedules submitted by the  
206 Qualified Vendor;~~;~~

207 c. Approve each Habilitation sStaffing Sschedule as  
208 appropriate.~~;~~

Habilitation Staffing Schedule Requirements and Annual Review

---

- 209 d. Return the Habilitation Staffing Schedule to the Qualified  
210 Vendor for adjustments or additional information, if  
211 necessary; and  
212 e.e. Provide technical assistance to the Qualified Vendor as  
213 needed.
- ~~214 d. Upon approval of an IDLA – HID Staffing Schedule:~~  
~~215 i. Keep the signed documents with original signatures,~~  
216 ~~and~~  
217 ~~ii.i. Provide a copy to the Qualified Vendor.~~