

Program Staffing Application – Vendor Internet User Reference Guide

Document ID:

DDD-PSA_VendorInternet_SvcCode_VendorCall
changes_UG-040-010

Version 2.1

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DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona

sabilities



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Table of Contents

| | | |
|-----------------|--|-----------|
| 1 | Introduction | 4 |
| 2 | Process Guidelines | 4 |
| 2.1 | Access the Program Staffing Application | 4 |
| 2.2 | Homepage | 6 |
| 2.3 | Notifications | 6 |
| 2.4 | Notification Assignments | 8 |
| 2.5 | Queue | 9 |
| 3 | Schedules | 9 |
| 4 | Vendor Calls | 10 |
| 4.1 | Respond to Vendor Call | 12 |
| 4.2 | View Residential Assessment Profile | 13 |
| 4.3 | Print Residential Assessment Profile | 15 |
| 4.4 | Close Residential Assessment Profile | 18 |
| 4.5 | Emergency Check Box | 18 |
| 4.6 | Request Additional Information | 19 |
| 4.6.1 | View Responses from DDD | 22 |
| 4.6.2 | Document Ability to Meet Needs | 25 |
| 4.7 | Non-Expansion Vendor Call | 25 |
| 4.8 | Expansion Vendor Call | 30 |
| 4.8.1.1 | Print Response for Ability to Meet Needs | 33 |
| 4.9 | Staffing Schedules | 35 |
| 4.9.1 | Select a Site | 35 |
| 4.10 | Vendor Site Information | 36 |
| 4.10.1 | Occupancy Summary | 36 |
| 4.10.2 | Special Accessibility Features/Cultural & Linguistic Capabilities | 36 |
| 4.10.3 | DDD Members | 37 |
| 4.10.3.1 | View DDD Member Data | 38 |



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

| | | |
|----------|---|----|
| 4.10.3.2 | Non-DDD Members | 38 |
| 4.10.3.3 | Add Non-DDD Member | 38 |
| 4.10.3.4 | Edit Non-DDD Member Data | 39 |
| 4.10.3.5 | Delete Non-DDD Member Record | 40 |
| 4.11 | Fire Risk Profile | 40 |
| 4.12 | Contact Information | 41 |
| 5 | Staffing Schedule | 41 |
| 5.1 | Add New Schedule | 42 |
| 5.1.1 | Master Schedule | 42 |
| 5.1.2 | Temporary Schedule | 43 |
| 5.1.3 | Enter Proposed Scenario Changes | 45 |
| 5.1.4 | Enter Hours in Staffing Matrix | 46 |
| 5.1.5 | Copy Schedule | 46 |
| 5.1.6 | Submit Staffing Matrix for Review | 49 |
| 5.1.7 | Add Note | 50 |
| 5.1.8 | View Notes | 51 |
| 5.1.9 | View History | 52 |
| 5.1.10 | Delete Schedule | 53 |
| 5.1.11 | View and Modify Staffing Matrix | 54 |
| 5.1.11.1 | Access Staffing Matrix from the Queue | 54 |
| 5.1.11.2 | Access Staffing Matrix from Site Search | 54 |
| 5.1.12 | Print Staffing Matrix | 57 |
| 6 | Rate Books | 58 |
| 7 | Reports | 59 |
| 7.1 | Vacancy/Census Report | 60 |
| 7.2 | Vendor Call Response History Report | 61 |
| 8 | Glossary | 62 |



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

1 Introduction

Phase II Service Pack 3 of the Program Staffing application provides all the staffing schedule functionality and updates to the following Vendor Call functions:

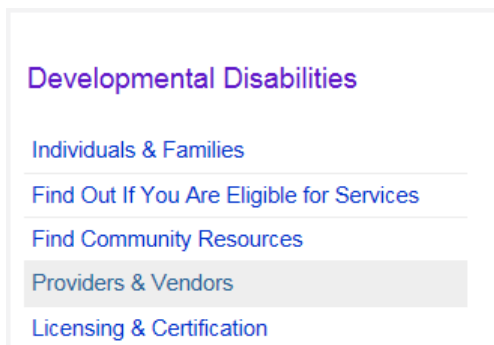
- Vendor Calls queue – changes to advanced search filters, queue columns and Placement Request info dialog
- Vendor Call page – changes to request for additional information and Expansion vendor call response processes

2 Process Guidelines

2.1 Access the Program Staffing Application

You must have permission to access the Program Staffing Application (check with your organization's Administrator of DDD FOCUS applications).

1. Log onto a computer using your unique username and password.
2. Open Windows Internet Explorer and access the DDD Internet Homepage using the following path: <https://des.az.gov/services/disabilities/developmental-disabilities>.



3. Click on the Providers & Vendors link.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Qualified Vendors & Providers

- [Login to Focus or Create an Account](#)
- [Service Specifications in the Qualified Vendor Agreement](#)
- [Training for Vendors and Providers](#)
- [Rates & Billing](#)
- [Search for a DDD Provider](#)
- [File a Claim Dispute](#)
- [File a Grievance with DDD](#)
- [Report Fraud and Abuse Online](#) or by calling 877-822-5799
- [Report an Incident](#)
- [Resources](#)
- [Qualified Vendor Announcements](#)

4. Click on the [Login to Focus or Create an Account](#) link.
5. Log into FOCUS using your user name and password.

The screenshot shows the FOCUS login interface. On the left is the Great Seal of the State of Arizona with the motto 'DITAT DEUS' and the year '1912'. On the right, the text 'Sign in to FOCUS' is displayed above two input fields: 'Username' and 'Password'. Below these fields is a dark blue 'Login' button. At the bottom of the login area are two links: 'Forgot Password?' and 'Signup As New User'.

The FOCUS Main Menu displays.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010



6. Click on the [Program Staffing](#) link.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

2.2 Homepage

The Program Staffing Application homepage displays.

Links take you to the Queue, Schedules/Census Logs, Rates, Reports and Notification Assignments.

Notifications display at the bottom of the homepage.

2.3 Notifications

Notifications will be generated when staffing schedules are submitted, approved, denied and deleted; when Vendor Calls are sent.

NOTE: Only users that have been assigned to receive notifications will receive them via email and on the Program Staffing homepage. See Section 2.4 for instructions on Notification Assignments. If no users are designated as notification recipients, the vendor notifications will be emailed to the designated Notice to Contact from the Qualified Vendor Agreement.

| Subject | Site | Received Date | From | Read | Delete |
|-------------------------------------|------|------------------------|--------|--------------------------|--------------------------|
| Standard Placement Vendor Call Sent | | 11/15/2023 12:21:18 PM | R2 DES | <input type="checkbox"/> | <input type="checkbox"/> |
| Standard Placement Vendor Call Sent | | 8/26/2022 1:48:50 PM | R2 DES | <input type="checkbox"/> | <input type="checkbox"/> |

Notifications on the homepage can be opened by clicking on the subject line. The View Message window displays.



Version 1.0

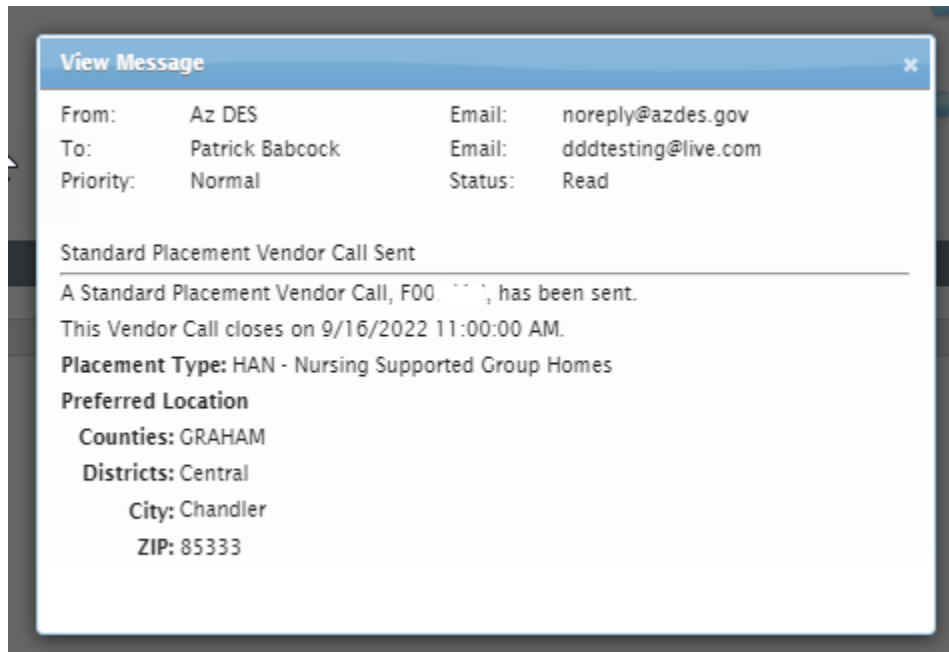
Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010



Close the window by clicking the X in the upper right corner.

When you open a notification a checkmark displays in the Read box.

To delete a notification record, click on the Delete box so that a checkmark displays. The record is removed from the list after navigating away from the Homepage.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

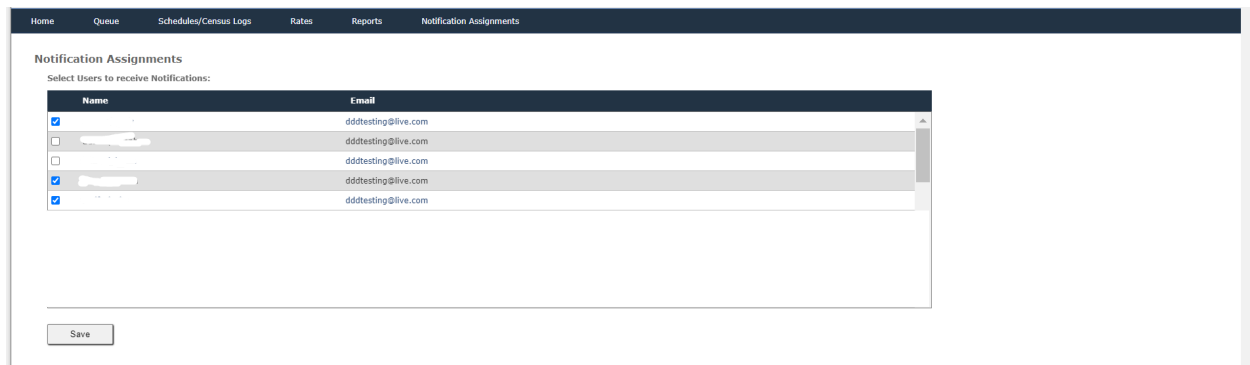
2.4 Notification Assignments

The Notification Assignments function allows users with the Vendor Admin role to select which Program Staffing Application users should receive notifications via email and the Program Staffing homepage.



Click on the Notification Assignments option in the toolbar.

The Notification Assignments page displays names with the email address of users in your organization that have access to the Program Staffing Application. Users that have the notification assignment will receive all Program Staffing Notifications. Users may update their email address through the FOCUS Main Menu, after the email has been verified it will display the updated email address.



Click the checkbox for each user that should receive notifications. A checkmark displays.

To deselect a user, click on the checkbox again to remove the checkmark.

After selecting users, click the [Save] button.

A confirmation dialog displays Saved successfully.

Click [Ok] to close the confirmation dialog.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

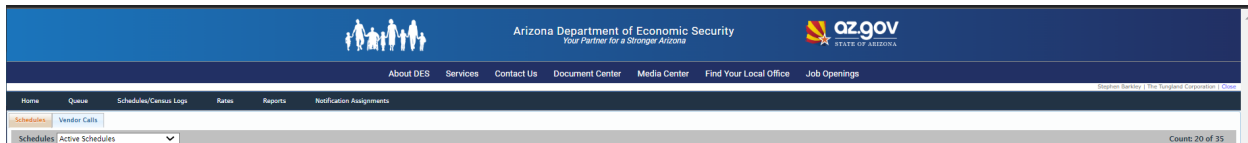
Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

2.5 Queue

Select Queue from the main menu or toolbar to view lists of Schedules and Vendor Calls.



3 Schedules

The Schedules queue defaults to Active Schedules, which displays all Pending and Initiated schedules. The dropdown allows you to view Active, Inactive and both Active and Inactive schedules.

The Active Schedules filter displays all the Initiated, Pending Network and Pending Vendor schedules.

The Inactive Schedules filter displays all Approved, Approved Active, Deleted and Expired schedules.

The Active and Inactive Schedules filter displays all schedules (Initiated, Pending Network, Pending Vendor, Approved, Approved Active, Deleted and Expired schedules).

| Status | Assigned To | Schedule | Service | Vendor | Site | Code | District | Create Date |
|-----------------|---------------|-------------------------------------|---------|----------------------|---------------|------|----------------|-------------|
| PENDING NETWORK | unassigned | Vogel [7/31/2022 -] Master | HAB | The Tungland Company | VOGEL - CK | CK | District West | 8/15/2022 |
| PENDING VENDOR | KRISTIN CLARK | pinnacle pass [8/14/2022 -] Master | HAB | The Tungland Company | Pinnacle Pass | TQ | District North | 8/16/2022 |

| Status | Assigned To | Schedule | Service | Vendor | Site | Code | District | Create Date |
|-----------------|---------------|-------------------------------------|---------|----------------------|---------------|------|----------------|-------------|
| PENDING NETWORK | unassigned | Avengers [7/17/2022 -] Master | HAB | The Tungland Company | AVENGERS - IK | IK | District West | 8/17/2022 |
| PENDING NETWORK | unassigned | Vogel [7/31/2022 -] Master | HAB | The Tungland Company | VOGEL - CK | CK | District West | 8/15/2022 |
| PENDING VENDOR | KRISTIN CLARK | pinnacle pass [8/14/2022 -] Master | HAB | The Tungland Company | Pinnacle Pass | TQ | District North | 8/16/2022 |

By default, the schedules are sorted by Create Date in ascending order (oldest to latest date).

Schedules can be sorted in ascending or descending order by Status, Assigned To, Schedule, Vendor, Site, (Site) Code, District, and Create Date by clicking on the column title.

Click on an Assigned To name to view the DDD staff member's name, phone, and email.

Click on a Schedule name to access the schedule.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

4 Vendor Calls

Vendors are informed of Vendor Calls through notifications on the Program Staffing homepage and emails. Once notified, vendors must go to the Vendor Calls queue to select and respond to vendor calls.

| Funding ID | Vendor Call Type | Placement Type | Vendor Call Sent | Vendor Call Closed | Preferred District | Preferred Location | Requested | Info sent | Responded |
|------------|--------------------|----------------|------------------|--------------------|-----------------------------------|---|-------------------------------------|--------------------------|--------------------------|
| FOC ... | Standard Placement | HSA | 08/17/2022 | | East | MARICOPA | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 08/08/2022 | | Central, East, West | MARICOPA | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 08/03/2022 | | South | PIMA, Tucson/Vali | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 07/28/2022 | | Central, West | MARICOPA, West Valley | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 06/17/2022 | | Central, East, North, South, West | ARIZONA, COCHISE, COCONINO, GILA, GRAHAM, GREENLEE, LA PAZ, MARICOPA, MOHAVE, NAUVAO, PIMA, PINAL, SANTA CRUZ, YAVAPAI, YUMA, Statewide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 05/23/2022 | | Central | MARICOPA, Phoenix | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FOC ... | Standard Placement | HSA | 05/23/2022 | | Central | MARICOPA, Phoenix | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

By default, the Active Requests filter displays Vendor Calls that are currently open (Vendor Call Close date is later than the current date) or for which the vendor has requested additional information and/or responded to even if Vendor Call Close date is later than the current date. The records are sorted by Vendor Call Sent date in descending order (latest to earliest date).

The Inactive Requests filter displays Vendor Calls that have been cancelled, set to closed status or have a Vendor Call Close date prior to current date and vendor has not requested additional info or has not responded.

Click on [+] Advanced Search, enter one of the following criteria (or a combination thereof) and click [Search]:

- Vendor Call Type (only one option from the dropdown at a time)
- Funding Request ID
- Preferred District (only one option from the dropdown at a time)
- Info Requested
- Responded
- Placement Type

The results display in the queue grid.

| Funding ID | Vendor Call Type | Placement Type | Vendor Call Sent | Vendor Call Closed | Preferred District | Preferred Location | Requested | Info sent | Responded |
|------------|--------------------|----------------|------------------|--------------------|--------------------|--------------------|-------------------------------------|--------------------------|--------------------------|
| FOC ... | Standard Placement | HSA | 08/17/2022 | | East | MARICOPA | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Vendor Calls can be sorted in ascending or descending order by Funding ID, Vendor Call Type, Placement Type, Vendor Call Sent (date), Vendor Call Closed (date) by clicking on the column title.

Click on the Vendor Call Type (Network Expansion, Standard Placement) to view member Placement Request information. Preferred Location Counties/City/ZIP fields will be displayed only if a preference has been specified.

Placement Request(s)✕

Funding Request ID: F000001 Request Type: Unknown

Placement Type: UNK - Unknown

Preferred Location: Statewide Network Assignment:

Counties: All Counties Name: BETTY JOHN

Phone:

Email:

Placement Request(s)

| | | |
|-------------------------------|-----------|---------|
| Placement Request ID: P000001 | Gender: F | Age: 49 |
| Placement Request ID: P000002 | Gender: F | Age: 30 |
| Placement Request ID: P000003 | Gender: M | Age: 29 |
| Placement Request ID: P000004 | Gender: M | Age: 21 |
| Placement Request ID: P000005 | Gender: F | Age: 33 |
| Placement Request ID: P000006 | Gender: M | Age: 21 |
| Placement Request ID: P000007 | Gender: F | Age: 23 |
| Placement Request ID: P000009 | Gender: F | Age: 44 |
| Placement Request ID: P000010 | Gender: F | Age: 32 |
| Placement Request ID: P000011 | Gender: M | Age: 66 |

Click the [X] or press [Esc] to close the Placement Request(s) dialog window.

Respond to a Vendor Call by clicking on the Funding ID.

Go to Section 2.6 for instructions on responding to a Vendor Call.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.1 Respond to Vendor Call

Click on a Funding ID in the Queue.

| Funding ID | Vendor Call Type | Placement Type | Vendor Call Sent | Vendor Call Closed | Preferred District | Preferred Location | Requested | Info sent | Responded |
|------------|--------------------|----------------|------------------|--------------------|--------------------|-------------------------|--------------------------|--------------------------|--------------------------|
| FG... | Standard Placement | HBC | 10/03/2022 | | North | COCHISE, Phoenix, 77777 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

The Placement Request – Vendor Call page displays.

Arizona Department of Economic Security
Your Partner for a Stronger Arizona

Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Placement Request - F005507 (Vendor Call)

| | | | |
|------------------------------|--------------------------------------|---|-------------------------------------|
| Preferred Location: MARICOPA | Vendor Call Start: 01/14/2022 | Placement Request - F005507 (Vendor Call) | Type of Request: Standard Placement |
| Counties: MARICOPA | Vendor Call End: 01/19/2022 12:27 PM | Emergency: No | Type of Placement: Group Home |
| Districts: Central | | | |
| City: No Preference | | | |
| Zip: No Preference | | | |

Members

Request Additional Information View Your Response

To view information for a member, click on the member placement section.

Arizona Department of Economic Security
Your Partner for a Stronger Arizona

Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Placement Request - F005507 (Vendor Call)

| | | | |
|------------------------------|--------------------------------------|---|-------------------------------------|
| Preferred Location: MARICOPA | Vendor Call Start: 01/14/2022 | Placement Request - F005507 (Vendor Call) | Type of Request: Standard Placement |
| Counties: MARICOPA | Vendor Call End: 01/19/2022 12:27 PM | Emergency: No | Type of Placement: Group Home |
| Districts: Central | | | |
| City: No Preference | | | |
| Zip: No Preference | | | |

Members

Placement Request Number: P005733 Member: 15 year old Male

| | |
|----------------|------------------|
| Gender: Male | Vision: Unknown |
| Age: 15 | Hearing: Unknown |
| Citizenship: N | |

Request Additional Information View Your Response



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

View Residential Assessment Profile

Clicking on the [View Residential Assessment Profile] button opens the Residential Assessment Profile dialog to view the member profile. Click on each expandable/collapsible domain to view Member Profile or Current Services.

Addition of Vision/Hearing to header

Residential Assessment Profile

Placement Id: P00 Gender: Male Age: 16
Vision: UNKNOWN Hearing: UNKNOWN

▶ Member Profile
▶ Current Services

Print Ok



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Residential Assessment Profile

Placement Id: P00 [redacted] Gender: Male Age: 37
Vision: Uses glasses to correct vision Hearing: UNKNOWN

Member Profile

Purpose: Use to assess the most appropriate residential setting that may meet the needs of the member. Please answer all questions.

Does the member have skilled nursing needs? Yes No

If the member has a skilled nursing need, refer to the Nursing Needs Matrix and complete a referral for a Nursing Assessment. A higher level of care (nursing supported group home, skilled nursing facility) may be most appropriate. If you are unsure whether your member has a skilled nursing need, refer to the Nursing Needs matrix referenced in the Division's Medical policy manual Exhibit 1240G-1

[Expand All](#) [Collapse All](#)

- Overnight Support
- Activities of Daily Living
- Mobility
- Medical Support
- Day Time Support Needs
- Behavioral Challenges**

| | Never | Sometimes | Often |
|--|----------------------------------|----------------------------------|-----------------------|
| The member exhibits physical aggression | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| The member exhibits property destruction | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| The member leaves required supervision without telling others | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The member exhibits verbal aggression/threats towards themselves or others | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| The member exhibits self-harming behaviors | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The member exhibits suicidal ideation / attempts | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |

[Print](#) [Ok](#)



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Addition of Electronic Surveillance

Does the member Prefer:

Below are the options:

- The Vendor to provide electronic surveillance at the site
- The members to provide electronic surveillance at the site
- No electronic surveillance at the site
- No preference

Residential Assessment Profile

Non Scoring Section (Residential Assessment Profile)

Current Residential Setting: Group Home
Requested Residential Setting: Group Home

Explain in detail why a change in residential placement is needed at this time.
Member is wanting to move closer to his family and move closer to his tribe in Flagstaff

Preferred Geographical Area(s):
District North

Does the member Prefer: The Vendor to provide electronic surveillance at the site

Member Cannot Live With: Children
Females

Print Ok

4.2 Print Residential Assessment Profile

To generate a printable copy of the profile, click the [Print] button in the Residential Assessment Profile dialog.

A file download dialog window displays.

Click [Open].

The member details display in PDF format.



Version 1.0

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| <p>Department of Economic Security</p> <p>Division of Developmental Disabilities</p> |
| <p>Project: Program Staffing Application Phase II SP3 – Vendor Internet</p> <p>Subject: User Reference Guide</p> <p>Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010</p> |

Vendor Side Print Report

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
 Division of Developmental Disabilities
RESIDENTIAL ASSESSMENT PROFILE

Residential Assessment Profile – Vendor Call ID: F00 [REDACTED]

Residential Assessment Profile

| | |
|----------------|-------------------------|
| Eligibility: | LTC |
| Gender: | M |
| Age: | 19 |
| Vision: | UNKNOWN |
| Hearing: | UNKNOWN |
| Ethnicity: | WHITE NOT HISPANIC |
| DDD Diagnosis: | Intellectual Disability |
| | Autism |
| Language: | ENGLISH |

Member Profile

Does the member have skilled nursing needs? No



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Member Profile

Does the member have skilled nursing needs? No

If the member has a skilled nursing need, refer to the Nursing Needs Matrix and complete a referral for a Nursing Assessment. A higher level of care (nursing supported group home, skilled nursing facility) may be most appropriate. If you are unsure whether your member has a skilled nursing need, refer to the Nursing Needs matrix referenced in the Divisions Medical policy manual Exhibit 12400 -1.

Current Residential Setting:

FH - Family Home

Requested Residential Setting:

HAB - Group Home

Explain in detail why a change in residential placement is needed at this time.

Mom has been handling member his entire life but member's violence in the home now poses a threat to mom and member's siblings. Mom has worked with member through all of his traumas and member still handles his fecal matter on a regular basis, sometimes to the point of masturbation. Mom has stated she is now afraid of member due to recent attacks, attacks in the car, and mom feels member needs medical attention but she is unable to transport him.

Preferred Geographical Area(s):

Phoenix

Does the member Prefer:

The members to provide electronic surveillance at the site

Member Cannot Live With: Females

Member, according to mom, is highly sexual.

Member Works, Attends School or Day Program: Yes

Days and Hours per Week: Mon-Fri-9:00 am-2:30 pm. Mom stated member does really well in school if he believes there is a reward.

Individual Open to Relocating: Yes



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

The member needs support with toileting: Often
The member needs support with bathing: Often
The member needs support with planning and cooking meals: Often

The member does require assistance with cleaning after using the toilet, requires hands-on assistance with bathing, and lacks safety skills in the kitchen and preparing food.

Mobility

The member needs support from 1 or 2 for lifting/transferring: Never
The member needs support from the use of medical equipment for lifting/transferring: Never
The member needs support to ambulate such as a gait belt, wheelchair, walker, etc: Never
The member needs transportation in a wheelchair accessible vehicle: Never

Medical Support

The member needs support with specific dietary needs such as diabetes or a special diet: Often
The member needs support with seizures: Never
The member needs support with wound care/skin integrity: Never
The member was hospitalized for medical needs within the past 12 months: Never
Member suffers from constipation if not if not having a healthy diet and water

Day Time Support Needs

The member needs supervision in the home during awake hours: Often
The member needs individual support to access their community with supervision: Often
Member lacks stranger danger skills, not safe in the community alone, family and staff keep the member at arm's length at all times. Supervision needs to know where the member is at all times with check-in, the member lacks safety skills.

Behavioral Challenges

The member exhibits physical aggression: Often
The member exhibits property destruction: Never
The member leaves required supervision without telling anyone: Often
The member exhibits verbal aggression/threats towards themselves or others: Often
The member exhibits self-harming behaviors: Often
The member exhibits suicidal ideation/attempts: Never
The member exhibits sexual behaviors which are inappropriate to others: Never
The member was hospitalized for psychiatric support or had crisis team intervention in the past 12 months: Never
Member has physical aggression when he becomes frustrated or emotional, has a tendency to wander if left alone, will hit, slap and punch himself in the face when having an emotional outburst, and will bang his head on the walls. Member cannot express his wants or needs. The member does best with one-on-one supervision when out in the community.

Current DDD Services

4.3 Close Residential Assessment Profile

Click the [Ok] button to close the Residential Assessment Profile dialog.

4.4 Emergency Check Box

If the request is an emergency, the emergency field value will display as "Yes". This will be read-only.



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Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

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Placement Request - F06... (Vendor Call)

| | | | | | |
|------------|-----------------------------|--------------------|---------------------|--------------------|---|
| Counties: | Preferred Location: COCHISE | Vendor Call Start: | 10/03/2022 | Type of Request: | Standard Placement |
| Districts: | North | Vendor Call End: | 10/21/2022 12:00 PM | Type of Placement: | Vendor Supported Developmental Home - Child |
| City: | Phoenix | Emergency: | Yes | | |
| Zip: | 77777 | | | | |

Members

If the request is not an emergency, the emergency field value will display as “No”. This will be read-only.

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Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Placement Request - F00... (Vendor Call)

| | | | | | |
|------------|------------------------------|--------------------|---------------------|--------------------|---|
| Counties: | Preferred Location: MARICOPA | Vendor Call Start: | 09/12/2022 | Type of Request: | Standard Placement |
| Districts: | Central | Vendor Call End: | 09/16/2022 03:00 PM | Type of Placement: | Vendor Supported Developmental Home - Adult |
| City: | East | Emergency: | No | | |
| Zip: | West | | | | |
| | No Preference | | | | |
| | No Preference | | | | |

Members

4.5 Request Additional Information

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Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Placement Request - F00... (Vendor Call)

| | | | | | |
|------------|----------------------------|--------------------|---------------------|--------------------|--------------------|
| Counties: | Preferred Location: GRAHAM | Vendor Call Start: | 09/22/2022 | Type of Request: | Standard Placement |
| Districts: | East | Vendor Call End: | 09/29/2022 06:00 PM | Type of Placement: | Group Home |
| City: | Gilbert | Emergency: | No | | |
| Zip: | 82826 | | | | |

Members

8 year old Male - POC...

Placement Request Number: POC... Member: 8 year old Male

| | | | |
|---------------|------|----------|---------|
| Gender: | Male | Vision: | Unknown |
| Age: | 8 | Hearing: | Unknown |
| Guardianship: | N | | |

View Residential Assessment Profile

Request Additional Information

Respond to Vendor Call

Clicking on the [Request Additional Information] button opens the Request Additional Information dialog.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Request Additional Information

Funding Request ID: F00

Person Requesting Information *(Name, Email and Phone are required)

Name: Email: Phone:

Submit Request Cancel

NOTE: All contact info fields are required in order for the request to be submitted; if any field is blank when [Submit Request] is clicked, an error dialog displays, indicating which field(s) must be populated.

Request Additional Information

Funding Request ID: F00

Person Requesting Information *(Name, Email and Phone are required)

Name: Email: Phone:

Invalid selection

Please enter name
Please enter email
Please enter phone number

Ok

Submit Request Cancel

Enter the Name, Email and Phone number of the person requesting additional information and click [Submit Request].

Request Additional Information

Funding Request ID: F008298

Person Requesting Information *(Name, Email and Phone are required)

Name: Email: Phone:

Submit Request Cancel



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Department of Economic Security

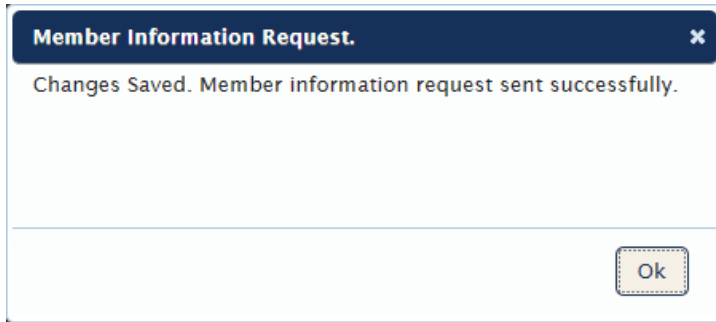
Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

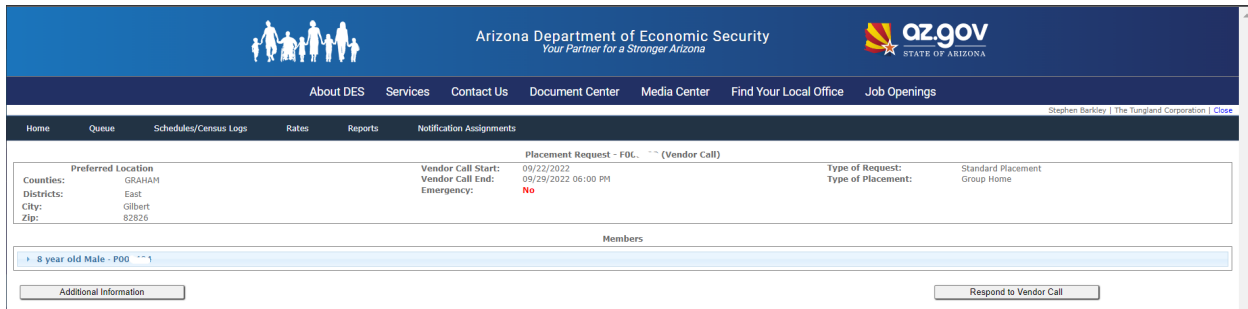
Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

If all required fields have valid entries, Member Information Request confirmation dialog displays.



Click the [Ok] button to continue.

The request is sent to DDD Network staff. The Vendor Call page displays, with the [Request Additional Information] button re-labeled [Additional Information].





Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

The Vendor Calls Queue indicates that Information was Requested.

Arizona Department of Economic Security
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About DES Services Contact Us Document Center Media Center Find Your Local Office Job Openings

Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Schedules Vendor Calls

Vendor Calls Active Requests Advanced Search Search Clear Count: 6 of 6

| Funding ID | Vendor Call Type | Placement Type | Vendor Call Sent | Vendor Call Closed | Preferred District | Preferred Location | Info | | |
|------------|----------------------------|----------------|------------------|--------------------|---------------------|-------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| | | | | | | | Requested | Info sent | Responded |
| F01 | Standard Placement | HBC | 10/03/2022 | | North | COCHISE, Phoenix, 77777 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F02 | Negotiated Rate - Standard | HID/HAI | 10/03/2022 | | North | GILA, Chandler, 66666 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| F00 | Standard Placement | HBA | 09/12/2022 | | Central, East, West | MARICOPA | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4.5.1 View Responses from DDD

The Vendor Calls Queue indicates when DDD sends requested information.

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About DES Services Contact Us Document Center Media Center Find Your Local Office Job Openings

Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Schedules Vendor Calls

Vendor Calls Active Requests Advanced Search Search Clear Count: 6 of 6

| Funding ID | Vendor Call Type | Placement Type | Vendor Call Sent | Vendor Call Closed | Preferred District | Preferred Location | Info | | |
|------------|----------------------------|----------------|------------------|--------------------|---------------------|-------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| | | | | | | | Requested | Info sent | Responded |
| F01 | Standard Placement | HBC | 10/03/2022 | | North | COCHISE, Phoenix, 77777 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F02 | Negotiated Rate - Standard | HID/HAI | 10/03/2022 | | North | GILA, Chandler, 66666 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| F00 | Standard Placement | HBA | 09/12/2022 | | Central, East, West | MARICOPA | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Click on a Funding ID in the Queue.

The Placement Request – Vendor Call page displays.

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About DES Services Contact Us Document Center Media Center Find Your Local Office Job Openings

Home Queue Schedules/Census Logs Rates Reports Notification Assignments

Placement Request - F01... (Vendor Call)

Preferred Location: COCHISE, Phoenix, 77777

Counties: COCHISE
Districts: North
City: Phoenix
Zip: 77777

Vendor Call Start: 10/03/2022
Vendor Call End: 10/21/2022 12:00 PM
Emergency: Yes

Type of Request: Standard Placement
Type of Placement: Vendor Supported Developmental Home - Child

Members

6 year old Male - P01...

Additional Information View Your Response

Click [Additional Information].



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Additional Information dialog displays. Until a Network Coordinator responds to the additional information request, the dialog displays blank checkboxes, blank Date Responded field and a message in red text prompting the user to wait for a response.

Additional Information ✕

Date of Request: 09/27/2022
Date Responded:

Person Requesting Information
Name: Santa Claus Email: santaclaus@gmail.com Phone: (888) 123-4567

No information sent yet. Please wait for the response.

| | |
|--|--------------------------|
| MEMBER INFORMATION | 8 year old Male |
| | POB: |
| ISP | <input type="checkbox"/> |
| Risk Assessment | <input type="checkbox"/> |
| Behavioral Treatment Plan (BTP) | <input type="checkbox"/> |
| Serious Incident Reports | <input type="checkbox"/> |
| QBHP Progress Notes | <input type="checkbox"/> |
| Nursing Assessment | <input type="checkbox"/> |
| Individualized Education Plan (IEP) | <input type="checkbox"/> |
| Evaluations | <input type="checkbox"/> |
| Additional Member-Specific Information | <input type="checkbox"/> |

Cancel



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

When a Network Coordinator has responded by sending all available information for members attached to a funding request, the dialog indicates with checked boxes which information items were available for each member, when they were sent and by whom (Network Coordinator's name.)

Additional Information ✕

Date of Request: 07/17/2018
Date Responded: 07/17/2018

Person Requesting Information

Name: John Doe **Email:** jdoe@gmail.com **Phone:** (602) 555-1212

The following information was sent via email to the provider above on 07/17/2018 by MEGAN MOTZ:

| | |
|---|-------------------------------------|
| MEMBER INFORMATION | 25 year old Male |
| | POC |
| ISP | <input checked="" type="checkbox"/> |
| Risk Assessment | <input checked="" type="checkbox"/> |
| Behavioral Treatment Plan (BTP) | <input checked="" type="checkbox"/> |
| Serious Incident Reports | <input type="checkbox"/> |
| QBHP Progress Notes | <input type="checkbox"/> |
| Nursing Assessment | <input checked="" type="checkbox"/> |
| Individualized Education Plan (IEP) | <input type="checkbox"/> |
| Evaluations | <input checked="" type="checkbox"/> |
| Additional Member-Specific Information | <input type="checkbox"/> |

Cancel

Click [Cancel] to close the dialog and return to the Placement Request – Vendor Call page.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.5.2 Document Ability to Meet Needs

4.6 Non-Expansion Vendor Call

Clicking the [Respond to Vendor Call] button opens the Ability to Meet Needs window.

Ability to Meet Needs

Your response must be submitted before the vendor call end date and time to be considered for this vendor call. Go to the bottom of this page to check the Acknowledge checkbox and then click the [Submit] button.

Placement Request ID: F00
Type of Placement: HAB

The Qualified Vendor shall submit a written response to the extent requested that outlines:

The experience and background to provide the requested services*

- The number of years your agency has provided services or if your agency has not provided services, other pertinent experience.
- The number and type of homes your agency currently operates for DDD or other state agencies (if applicable).

5000 characters remaining

A written plan to meet identified needs described in the Member's Planning Document*

- A description of how your agency will provide necessary and member specific training to staff.
- A description of how any cultural or linguistic needs will be met. (i.e.: sign language, Spanish speaking)

5000 characters remaining

A description of how any special accommodations will be met*

- A description of how complex support needs including medical and/or behavioral accommodations will be met (i.e., arranging durable medical equipment, experience writing/developing behavior Treatment Plans, including assurances that the provider will work collaboratively with the member's Health Plan to incorporate any required Functional Behavioral Assessment (FBA) recommendations.)
- A description of any environmental modifications needed (i.e.: plexiglass, alarms or wheelchair accessibility.)

5000 characters remaining

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.

Print Save Cancel



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Ability to Meet Needs

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.
- For Residential Setting expansions, include a description of all required inspection timeframes including AZDHS, Monitoring, Office of Licensure, Certification and Registration (OLCR) , and site code issuance not to exceed 90 days.

5000 characters remaining

Any additional information responsive to the vendor call for services*

- The date by which the vendor will offer the member/responsible person a copy of the Vendor's Policy Manual.
- A description of how your agency will involve members in the daily planned activities of the home.

5000 characters remaining

| Site Name | Placement Contact Name | Email | Primary Contact Phone Number |
|---|------------------------|-------|------------------------------|
| <input type="checkbox"/> 16102 - JC | | | |
| <input type="checkbox"/> 4103 - JB | | | |
| <input type="checkbox"/> Acapulco Lane - WJ | | | |
| <input type="checkbox"/> Alex Way - AW | | | |
| <input type="checkbox"/> Cactus Road - WN | | | |
| <input type="checkbox"/> Calle Citano - JA | | | |
| <input type="checkbox"/> Camina Plata - WV | | | |
| <input type="checkbox"/> Carmen - WO | | | |
| <input type="checkbox"/> Casa Alegre - OI | | | |

We acknowledge we have reviewed all of the Member's information and may be able to provide for this Member's needs. Failure to provide a complete response may result in disqualification for consideration of this residential service opportunity.

Response Submitted Date:

Print Save Cancel

All text fields are required to be filled in before submitting a response to a Vendor Call. Each textbox allows up to 2000 characters. Contact info will be entered on a per-site basis. For legacy responses, data that was entered in the last textbox will display in the Placement Contact Name field.

A Site Name listing is appended to the dialog for HBA, HBC, HAB, HAN and HPD services. Site names do not display for HID/HAI services.

Note: While entering responses, it is suggested that you save the Ability to Meet Needs details by clicking the [Save] button and click [OK] in the confirmation dialog box.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Ability to Meet Needs

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.
- For Residential Setting expansions, include a description of all required inspection timeframes including AZDHS, Monitoring, Office of Licensure, Certification and Registration (OLCR), and site code issuance not to exceed 90 days.

5000 characters remaining

Any additional information responsive to the vendor call for services*

- The date by which the vendor will offer the member/responsible person a copy of the Vendor's Policy Manual.
- A description of how your agency will involve members in the daily planned activities of the home.

5000 characters remaining

| Site Name | Placement Contact Name | Email | Primary Contact Phone Number |
|--|------------------------|----------------------|------------------------------|
| <input checked="" type="checkbox"/> 16102 - JC | Santa Claus | santaclaus@gmail.com | (888) 123-4567 |
| <input type="checkbox"/> 4103 - JB | | | |
| <input type="checkbox"/> Acapulco Lane - WJ | | | |
| <input type="checkbox"/> Alex Way - AW | | | |
| <input type="checkbox"/> Cactus Road - WN | | | |
| <input type="checkbox"/> Calle Citano - JA | | | |
| <input type="checkbox"/> Camina Plata - WV | | | |
| <input type="checkbox"/> Carmen - WO | | | |
| <input type="checkbox"/> Casa Alegre - OI | | | |

We acknowledge we have reviewed all of the Member's information and may be able to provide for this Member's needs. Failure to provide a complete response may result in disqualification for consideration of this residential service opportunity.

Response Submitted Date:

Print Submit Save Cancel

Under Site Name, select or recommend one or more available sites to receive the member. You can recommend as many sites as are available within a region or a vicinity being requested. Provide contact information for each site recommended - vendor contact name and email in the textbox and phone number in the field next to the selected site(s).

After filling in all the ability to meet needs for a member(s), recommending a site(s) and providing placement contact information, click the checkbox by "We acknowledge we have reviewed all of the Member's information and may be able to provide for this Member's needs." to activate the [Submit] button.

Once the [Submit] button is active you can respond to the Vendor Call; no updates can be made after you have responded to a Vendor Call.

NOTE: All text fields are required to be filled in before submitting a response to a Vendor Call.

If all fields are not completed when clicking the [Submit] button, a dialog will display.



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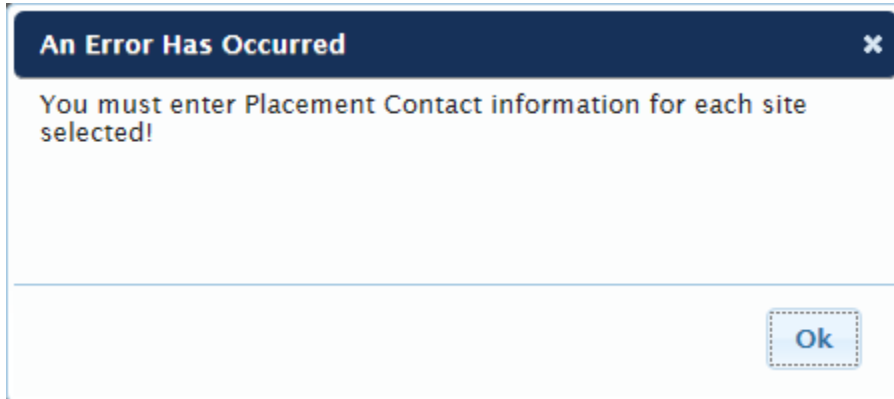
Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010



Click [Ok] to close the dialog.

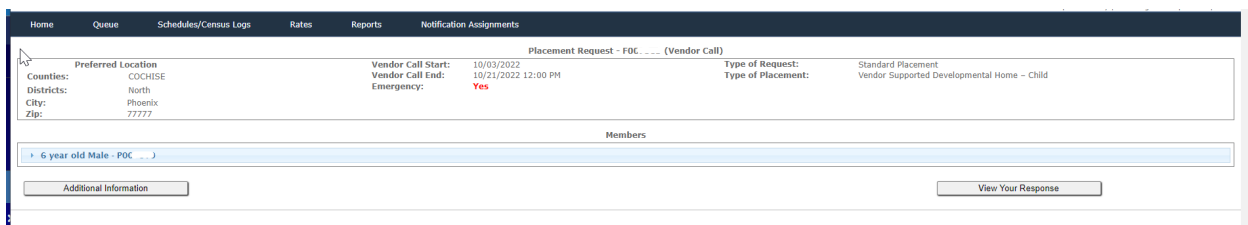
Complete all fields and click [Submit].

A confirmation dialog box display.



Click [Ok] to close the dialog.

The Placement Request – Vendor Call page displays.



You can review your response by clicking the [View Your Response] button.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

The Ability to Meet Needs window displays.

Ability to Meet Needs

Placement Request ID: F00
Type of Placement: HAB

The Qualified Vendor shall submit a written response to the extent requested that outlines:

The experience and background to provide the requested services*

- The number of years your agency has provided services or if your agency has not provided services, other pertinent experience.
- The number and type of homes your agency currently operates for DDD or other state agencies (if applicable).

TEST AMB

A written plan to meet identified needs described in the Member's Planning Document*

- A description of how your agency will provide necessary and member specific training to staff.
- A description of how any cultural or linguistic needs will be met. (i.e.: sign language, Spanish speaking)

TEST AMB

A description of how any special accommodations will be met*

- A description of how complex support needs including medical and/or behavioral accommodations will be met (i.e., arranging durable medical equipment, experience writing/developing Behavior Treatment Plans, including assurances that the provider will work collaboratively with the member's Health Plan to incorporate any required Functional Behavioral Assessment (FBA) recommendations.)
- A description of any environmental modifications needed (i.e.: plexiglass, alarms or wheelchair accessibility.)

TEST AMB

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.
- For Residential Setting expansions, include a description of all required inspection timeframes including AZDHS, Monitoring, Office of Licensure, Certification and Registration (OLCR), and site code issuance not to exceed 90 days.

TEST AMB

Print Ok

All information is read-only, no updates can be made.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.7 Expansion Vendor Call

Note: A vendor with no sites can respond to Expansion vendor calls (Network, Direct Referral, Adult and DCS.) The vendor call process is like that for vendors with sites, except that sites are not listed under Site Name and Contact information. “Expansion” displays without a checkbox to check, and the Placement Contact Name, Phone and Email fields are activated automatically and must be filled in before vendor can submit the response.

When responding to an Expansion Vendor Call the Expansion Information text box will now reflect if there is a link provided.

Clicking the [Respond to Vendor Call] button opens the Ability to Meet Needs window.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Ability to Meet Needs

Your response must be submitted before the vendor call end date and time to be considered for this vendor call. Go to the bottom of this page to check the Acknowledge checkbox and then click the [Submit] button.

Placement Request ID: F00
Type of Placement: HAB

The Qualified Vendor shall submit a written response to the extent requested that outlines:

The experience and background to provide the requested services*

- The number of years your agency has provided services or if your agency has not provided services, other pertinent experience.
- The number and type of homes your agency currently operates for DDD or other state agencies (if applicable).

5000 characters remaining

A written plan to meet identified needs described in the Member's Planning Document*

- A description of how your agency will provide necessary and member specific training to staff.
- A description of how any cultural or linguistic needs will be met. (i.e.: sign language, Spanish speaking)

5000 characters remaining

A description of how any special accommodations will be met*

- A description of how complex support needs including medical and/or behavioral accommodations will be met (i.e., arranging durable medical equipment, experience writing/developing Behavior Treatment Plans, including assurances that the provider will work collaboratively with the member's Health Plan to incorporate any required Functional Behavioral Assessment (FBA) recommendations.)
- A description of any environmental modifications needed (i.e.: plexiglass, alarms or wheelchair accessibility.)

5000 characters remaining

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.

Print Save Cancel

All text fields are required to be filled in before submitting a response to a Vendor Call. Each textbox allows up to 2000 characters. The last textbox for contact info has been removed. Contact info will be entered on a per-site basis. For legacy responses, data that was entered in the last textbox will display in the Placement Contact Name field.

Note: While entering responses, it is suggested that you save the Ability to Meet Needs details by clicking the [Save] button and click [OK] in the confirmation dialog box.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

After filling in all the ability to meet needs for a member(s), recommending a site(s) and providing placement contact information, click the checkbox by “We acknowledge we have reviewed all the Member’s information and may be able to provide for this Member’s needs. Failure to provide a complete response may result in disqualification for consideration of this residential service opportunity.” to activate the [Submit] button.

Once the [Submit] button is active you can respond to the Vendor Call; no updates can be made after you have responded to a Vendor Call.

NOTE: All text fields are required to be filled in before submitting a response to a Vendor Call.



Department of Economic Security

Division of Developmental Disabilities

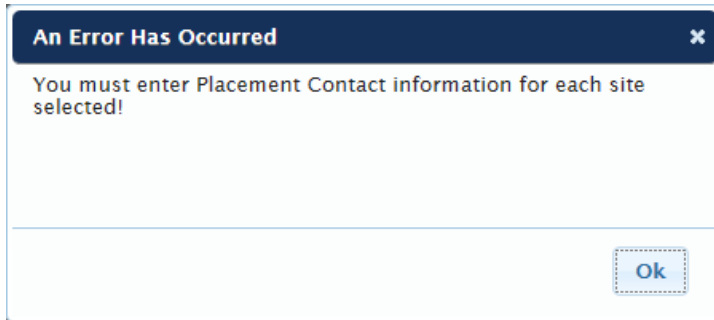
Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

If all fields are not completed when clicking the [Submit] button, a dialog will display.



Click [Ok] to close the dialog.

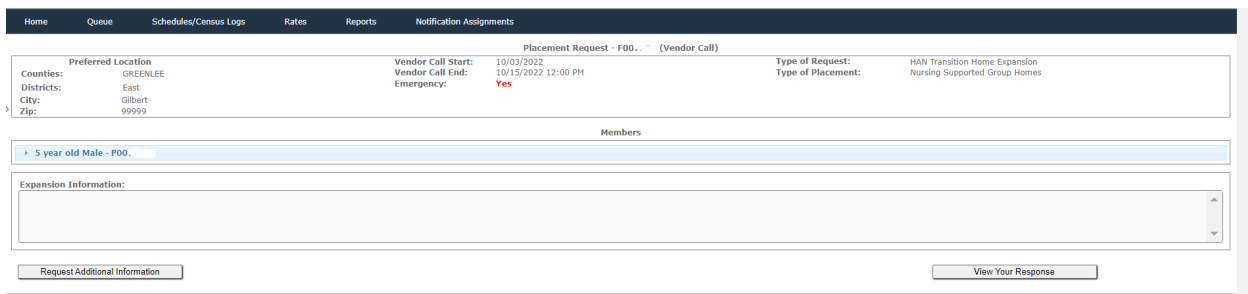
Complete all fields and click [Submit].

A confirmation dialog box display.



Click [Ok] to close the dialog.

The Placement Request – Vendor Call page displays.



You can review your response by clicking the [View Your Response] button.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

The Ability to Meet Needs window displays.

Ability to Meet Needs

TEST AMB

A time frame by which the service(s) will be delivered*

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.
- For Residential Setting expansions, include a description of all required inspection timeframes including AZDHS, Monitoring, Office of Licensure, Certification and Registration (OLCR) , and site code issuance not to exceed 90 days.

TEST AMB

Any additional information responsive to the vendor call for services*

- The date by which the vendor will offer the member/responsible person a copy of the Vendor's Policy Manual.
- A description of how your agency will involve members in the daily planned activities of the home.

TEST AMB

| Site Name | Placement Contact Name | Email | Primary Contact Phone Number |
|-----------|------------------------|----------------------|------------------------------|
| Expansion | Santa Claus | santaclaus@gmail.com | (888) 123-4567 |

We acknowledge we have reviewed all of the Member's information and may be able to provide for this Member's needs. Failure to provide a complete response may result in disqualification for consideration of this residential service opportunity.

Response Submitted Date: 05/16/2023

Print Ok

All information is read-only, no updates can be made.

4.7.1.1 Print Response for Ability to Meet Needs

To view and print the response, click on [Print].

Select [Open] in the print dialog box.

The Vendor Call Response displays in PDF format.

Click [Ok] to close the Ability to Meet Needs window.

After Network Staff reviews a vendor's response and selects, a notification is sent to the selected vendor.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

| | | | |
|----------------------------|-------------------|---------------------------------|------------|
| Type of Placement: | HAB | Vendor Call ID: | F00 |
| Type of Request: | Network Expansion | Placement Request ID(s): | P00 |
| Network Assignment: | Charlette Bishop | Vendor Call Start: | 05/16/2023 |
| Preferred Location | | Vendor Call End: | 05/26/2023 |
| Counties: | No Preference | | |
| Districts: | North | | |
| City: | Flagstaff | | |
| ZIP: | No Preference | | |

| Proverbs Group Home | Contact Name | Email | Primary Contact Phone Number |
|---------------------|--------------|----------------------|------------------------------|
| Expansion | Santa Claus | santaclaus@gmail.com | (888) 123-4567 |

The Qualified Vendor shall submit a written response to the extent requested that outlines:

The experience and background to provide the requested service(s)

- The number of years your agency has provided services or if your agency has not provided services, other pertinent experience.
- The number and type of homes your agency currently operates for DDD or other state agencies (if applicable).

TEST AMB

A written plan to meet identified needs described in the member's Planning Document

- A description of how your agency will provide necessary and member specific training to staff.
- A description of how any cultural or linguistic needs will be met. i.e.: sign language, Spanish speaking.

TEST AMB

A description of how any special accommodations will be met

- A description of how complex support needs including medical and/or behavioral accommodations will be met (i.e., arranging durable medical equipment, experience writing/developing Behavior Treatment Plans, including assurances that the provider will work collaboratively with the member's Health Plan to incorporate any required Functional Behavioral Assessment (FBA) recommendations.)
- A description of any environmental modifications needed i.e.: plexiglass, alarms or wheelchair accessibility.

TEST AMB

A timeframe by which the service will be delivered

- A description of the timeframe that service delivery will begin, which will include the member/responsible person visiting the home in their preferred geographic location.
- For Residential Setting expansions, include a description of all required inspection timeframes including AZDHS, Monitoring, Office of Licensure, Certification and Registration (OLCR), and site code issuance not to exceed 90 days.

TEST AMB

Any additional information responsive to the vendor call for services

- The date by which the vendor will offer the member/responsible person a copy of the Vendor's Policy Manual.
- A description of how your agency will involve members in the daily planned activities of the home.

TEST AMB



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

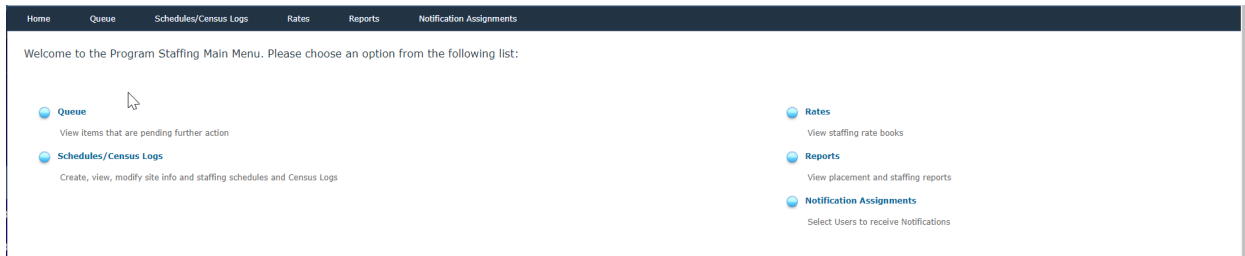
Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

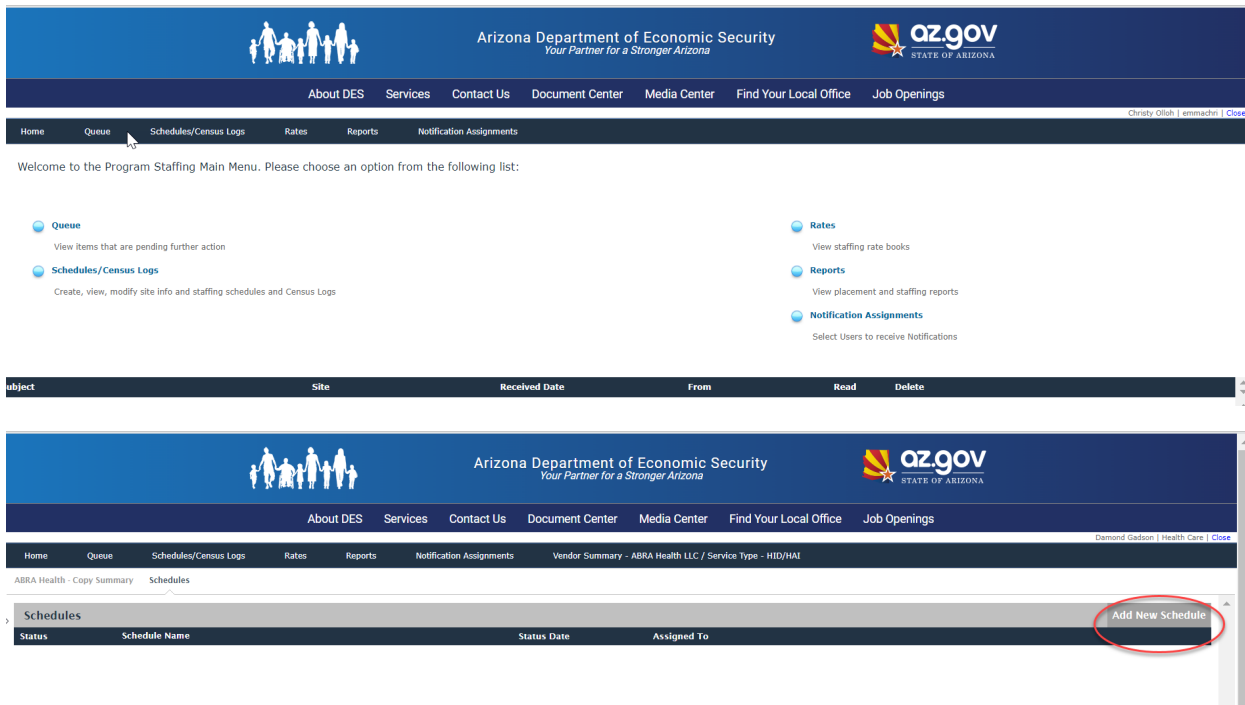
Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.8 Staffing Schedules

From the Program Staffing homepage or toolbar, select Staffing Schedules.



A Vendor that has suspended services will now be able to see the Schedules/Census Logs as well as have the ability to Add a New Schedule.



4.9.1 Select a Site

You will select a Service Type then click on the [Search] button. The sites available for that service will populate, or you can search for a site from the toolbar, and it will list sites providing HAB, HAN, HBA/HBC, HID/HAI or HPD services. Vendor info is using data from the QVADS application.

Enter a site name (or partial name) in the Site field.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

You can filter the search results to show Open Sites, Closed Sites or both Open and Closed Sites.

Click on the [Search] button.

The page displays results of the search criteria entered.

The screenshot shows a web application interface with a navigation menu at the top: Home, Queue, Schedules/Census Logs, Rates, Reports, Notification Assignments. Below the menu is a search bar with a dropdown for 'Service Type' (HAB) and a 'Search Sites By Name' input field. The search results show 'Saguaro Foundation' with details for '94972 / Service Type - HAB'. The details include contact information for Adrianna Arellano and Edwardo Castro. Below the details is a table of search results.

| Site Name | Site Code | Active Schedule | Address | District |
|------------------------|-----------|---------------------------|----------------------------------|----------------|
| 14TH STREET GROUP HOME | CB | 14TH STREET GROUP HOME | 3571 W 14th St, Yuma AZ853644184 | District South |
| 22nd Street Group Home | OF | 22ND STREET GROUP HOME OF | 2751 W 22nd St, Yuma AZ853646055 | District South |
| 2ND STREET | OW | 2ND STREET GROUP HOME OW | 1226 W 2nd St, Yuma AZ853641903 | District South |

Click on a site name in the list of results.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.9 Vendor Site Information

The Site Summary page displays information for the site selected. The information includes the Occupancy Summary, Special Accessibility Features/Cultural & Linguistic Capabilities, Member info, Non-member info, Fire risk profile, and Vendor contact information. Each will be detailed below.

The screenshot displays the '24th Street - FD - Occupancy Summary' page. It includes a navigation bar at the top with options like Home, Queue, Schedules/Census Logs, Rates, Reports, Notification Assignments, and Vendor Summary. The main content area shows site details such as address (8457 E 24th St, Tucson AZ 857106507), site start date (6/20/2003), and occupancy statistics (Total Occupancy: 3, Bedrooms: 4, Maximum Capacity: 4). Below this is a section for 'Special Accessibility Features/Cultural & Linguistic Capabilities' with checkboxes for Pool, Fence, Pet, Stairs, and Busy Intersection. The 'Members' section contains two tables: one for 'Authorized DDD Member' and another for 'Non DDD Funded Member'. The 'Fire Risk Profile' section shows ADHS Fire Risk Level (0), ADHS License # (DDH554), FRP Score (0), and Last Fire Inspection (02/28/2015). The 'Contact Information' section is partially visible at the bottom.

4.9.1 Occupancy Summary

Information in the site occupancy summary section includes:

Address, Location/Site Code, AHCCCS ID, District, County, Site Start Date and End Date which auto populate from vendor data in the QVADS.

DDD Funded Count is auto populated using member authorizations to sites or the approved schedule. Non-DDD Funded Count is auto populated for each non-DDD Consumer added in Consumers section of the Site Summary page.

Total occupancy is based on number of DDD Funded Members plus the number of non-DDD Funded Members.

Maximum capacity is auto populated from vendor data in the QVADS. The number of Bedrooms, and Maximum Capacity can be updated through a new schedule.

Vacancy is calculated by the application (Maximum Capacity minus Total Occupancy)

4.9.2 Special Accessibility Features/Cultural & Linguistic Capabilities

Information in the Site Details section includes:

Occupant Age Range (Minimum – Maximum Age)

Site attributes include Pool, Fence, Pet, Stairs, and Busy Intersection

Select (Edit) and a dialog window displays.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

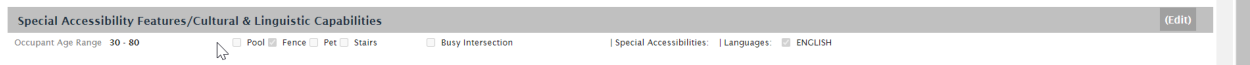
Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Select minimum age and maximum age from dropdowns.

Select site attributes by clicking the checkboxes so that checkmarks display.

Click [Save].

The Site Details section displays attributes selected.



4.9.3 DDD Members

DDD Members auto populate based on HAB and HPD service authorization start and end dates. The following data display for each member in the list:

ASSISTS ID, Date of Birth, Age, Gender

Service (HAB or HPD), Service Authorization Start and End Dates

Incontinence, Nutrition and BTP indicators (Yes or No)



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide


Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.9.3.1 View DDD Member Data

| Members | | | | | | | | | |
|-----------------------|------------|------------|-----|--------|----------|-----------------|-----|--------------|----------|
| Authorized DDD Member | Assists ID | DOB | Age | Gender | Services | Power Dependent | BTP | DCS Involved | Siblings |
| | 0006... | 12/28/1969 | 52 | Female | HAB | No | No | No | |
| | 0006... | 08/18/1945 | 77 | Male | HAB | No | No | No | |
| | 0006... | 08/28/1990 | 32 | Female | HAB | No | No | No | |


Select the Member Profile section to view the data.

4.9.3.2 Non-DDD Members

|  Non DDD Member | DOB | Age | Gender | Move-In | Move-Out | Referral Source |
|--|-----|-----|--------|---------|----------|-----------------|
| There are no non DDD Members for this site | | | | | | |

Non-DDD Consumers must be manually added by following the instructions below.

4.9.3.3 Add Non-DDD Member

Select the  icon to add a new non-DDD member.

The Add New Member dialog window displays. Select an eligibility.

Add/Edit Non DDD-Funded Member

Eligibility select eligibility ▼

- select eligibility
- DDD-only
- TSC
- Likely
- None

And an Add New Member dialog box will pop up.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Add/Edit Non DDD-Funded Member
✕

Eligibility DDD-only ▼

Assists ID

First Name* Last Name*

Date of Birth* Gender* Male Female

Move In Date* Move Out Date

Funding Source select source ▼ DCS Involved

Siblings

Enter data for the Non-DDD Member.

Required fields are First Initial, Last Initial, Date of Birth, Gender, and Move-In Date. The Move-Out Date is not required; however, you can enter the move-out date if it is known.

Click [Save].

A record for the Non-DDD Member displays on the Site Summary page.

| | Non DDD Member | DOB | Age | Gender | Move-In | Move-Out | Referral Source |
|---|----------------|------------|-----|--------|------------|---------------|-------------------|
| ✕ | A B | 02/01/1975 | 40 | Male | 03/02/2015 | Not Available | BEHAVIORAL HEALTH |

4.9.3.4 Edit Non-DDD Member Data

Click on the edit icon to open the dialog window and make any changes.

Add/Edit Non DDD-Funded Member
✕

Eligibility DDD-only ▼

Assists ID

First Name* Last Name*

Date of Birth* Gender* Male Female

Move In Date* Move Out Date

Funding Source select source ▼ DCS Involved

Siblings



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Click [Save].



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

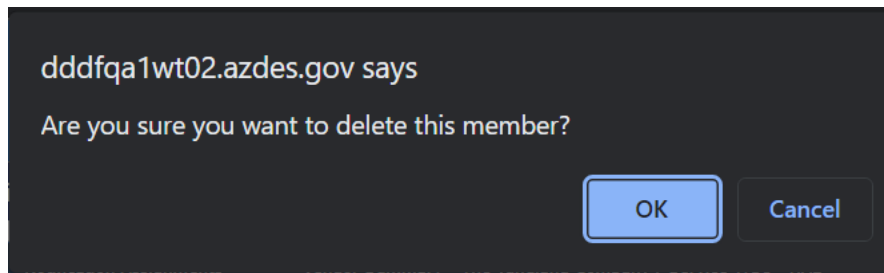
Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.9.3.5 Delete Non-DDD Member Record

Click on the delete icon  to delete the Non-DDD Member record.

A dialog window displays for you to confirm the delete action.



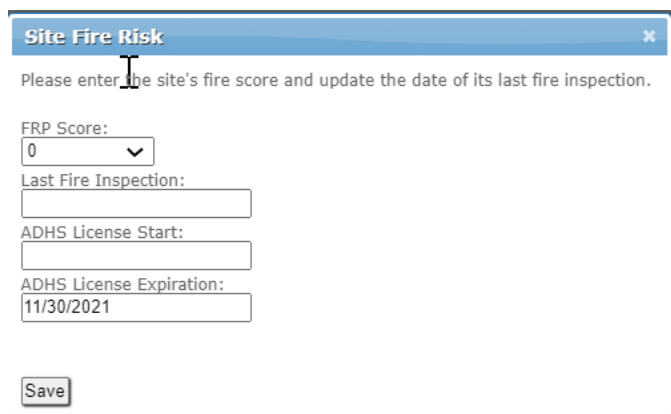
To delete the member record, click [OK].

Click [Cancel] to exit the dialog window without deleting the member record.

4.10 Fire Risk Profile



Select (Edit) and a dialog window displays.



Enter the Fire Risk Profile (FRP) Score (0-300+) and Last Annual Fire Inspection Date, then click [Save].

The Site Summary page displays the data entered and the date and time of the entry.



The ADHS Fire Risk Level auto populates based on the FRP Score entered (0 = 0, 1-300+).



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

4.11 Contact Information

| Contact Information | | | |
|------------------------|---------------------|----------------------------|---------------------|
| Primary Contact: | Adrianna Arellano | After Hours Contact: | Adrianna Arellano |
| Primary Contact Phone: | 928.783.0950 | After Hours Contact Phone: | 928.246.6319 |
| Primary Contact Email: | DDDTesting@Live.com | After Hours Contact Email: | DDDTesting@Live.com |

Vendor Site Primary Contact Name, Phone and Email, Secondary Contact Name, Phone and Email auto populate from data in QVADS. This data must be updated in the QVADS application.

5 Staffing Schedule

The screenshot shows the 'Schedules' tab highlighted in the navigation menu. The main content area displays the following information:

- Site:** 14TH STREET GROUP HOME - Occupancy Summary
- Address:** 3571 W 14th St, Yuma AZ 853644184
- Site Code:** CB | **District:** South | **County:** YUMA
- Site Start Date:** 2/12/2018
- Occupancy Statistics:** Vacancy: 0, DDD Funded Count: 4, Non-DDD Funded Count: 0, Total Occupancy: 4, Bedrooms: 4, Maximum Capacity: 4, AHCCCS ID: 359491
- Special Accessibility Features/Cultural & Linguistic Capabilities:** Includes checkboxes for Pool, Fence, Pet, Stairs, Busy Intersection, and Languages (ENGLISH).
- Members Table:**

| Authorized DDD Member | Assists ID | DOB | Age | Gender | Services | Power Dependent | BTP | DCS Involved | Siblings |
|-----------------------|------------|-----|-----|--------|----------|-----------------|-----|--------------|----------|
| | 00 | | 62 | Female | HAB | No | No | No | |
| | 00 | | 54 | Male | HAB | Yes | No | No | |
| | 00 | | 27 | Male | HAB | No | No | No | |
| | 00 | | 74 | Male | HAB | Yes | No | No | |
- Fire Risk Profile:** ADHS Fire Risk Level: 1, ADHS License #: DDH2825, FRP Last Updated: 10/4/2022 2:08:28 PM, ADHS License Start: 9/1/2022, FRP Score: 7, ADHS License Expiration: 4/30/2023, Last Fire Inspection: 10/04/2022
- Contact Information:** Primary Contact: Adrianna Arellano, After Hours Contact: Adrianna Arellano

Select the Schedules tab will be displayed only for HAB, HPD, and HID services.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

The Schedules page displays a list of schedules that have been added along with their status (Initiated, Pending Network, Pending Vendor, Approved, and Expired).

| Schedules | | | | Add New Schedule |
|-----------------|--|----------------------|---------------|------------------|
| Status | Schedule Name | Status Date | Assigned To | |
| APPROVED ACTIVE | Master [12/10/2014 -] | 2/4/2015 7:01:49 AM | NETWORK STAFF | |
| APPROVED | Temp 2 [3/25/2015 - 03/31/2015] Temporary | 3/27/2015 1:25:07 PM | NETWORK STAFF | |
| PENDING NETWORK | Master [3/28/2015 -] | 3/27/2015 1:25:04 PM | NETWORK STAFF | |
| EXPIRED | winter break [12/21/2014 - 01/03/2015] Temporary | 1/3/2015 12:30:00 AM | NETWORK STAFF | |

Each color has a specific meaning.

Green = Approved and Active

Grey = Approved but not Active

Yellow = Pending Approval

Red = Approval Expired

5.1 Add New Schedule

5.1.1 Master Schedule

Select [Add New Schedule]. A dialog window displays.

Each site will have a Master Schedule. Enter the schedule name and effective date (required fields).

Master Schedules are end dated automatically when a new master schedule is approved.

Select the schedule type and one or more change types (required fields).



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.2 Temporary Schedule

Add New Schedule

Name: Effective Date: 5/16/2023

Schedule Type: Master Temporary End Date:

- AGING MEMBER NO LONGER WANTS TO ATTEND A DAY OR WORK PROGRAM
- CHANGE IN CAPACITY
- CHANGE IN MEMBER BEHAVIORAL OR MEDICAL STATUS
- CHANGE IN OCCUPANCY
- CHANGE OF ADDRESS
- CLOSURE OF A HOME
- OTHER
- RATE BOOK CHANGE
- SCHOOL/HOLIDAY BREAKS
- SHORT TERM ILLNESS - MEMBER CANNOT GO TO DAY OR WORK PROGRAM
- SPECIAL RATE CHANGE
- TEMPORARY INCREASED CARE AFTER SURGERY OR ILLNESS

A Temporary schedule may be necessary if your Master Schedule has not been approved or if there are temporary changes that are needed. If you create a “Temporary” schedule, an end date is required. When the temporary schedule expires the system automatically reverts to the Master Schedule that has already been created.

Click [Save] at the end of your selections to save the schedule.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

The schedule is created with a status of "Pending Vendor".

The screenshot displays a software interface for configuring a schedule. The status is 'PENDING VENDOR'. The interface includes a 'Summary Comments' section, a 'Rates Basis' table, and a 'Staff Hours' matrix.

| Current State | Proposed Scenario |
|---------------------------|---------------------------------------|
| DDD Funded Members: 4 | DDD Funded Members: 4 (No Change) |
| RRB Members: 4 | RRB Members: 4 (No Change) |
| Non DDD Funded Members: 0 | Non DDD Funded Members: 0 (No Change) |
| Total Occupants: 4 | Bedrooms: 4 (No Change) |
| Bedrooms: 4 | Beds: 4 (No Change) |
| Beds: 4 | Capacity: 4 (No Change) |
| Capacity: 4 | |

| Region | (Statewide) | Hours | Rate |
|--------------------------------|-------------|--|---------------|
| DDD Funded Members: | 4 | Based on inputs, there is no rate available for this schedule. If your staff hours are correct you will need a special rate. | |
| RRB Members: | 4 | Insulation Rate Range: | |
| Non DDD Funded Members: | 0 | Network Mgmt Approval Required: | N |
| Total Occupants: | 4 | HAB Base Rate: | \$0.00 |
| Bedrooms: | 4 | Room & Board Base Rate: | \$18.38 |
| DDD Funded Members: | | | |
| | | HAB Base Rate: | \$0.00 / Day |
| | | Room & Board Base Rate: | \$73.52 / Day |
| Non DDD Funded Members: | | | |
| | | HAB Base Rate: | \$0.00 / Day |
| | | Room & Board Base Rate: | \$73.52 / Day |

| Staff Hours | SUN | MON | TUE | WED | THU | FRI | SAT | TOT |
|---------------|-----|-----|-----|-----|-----|-----|-----|-----|
| 12 AM - 1 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 AM - 2 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 AM - 3 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 AM - 4 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 AM - 5 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5 AM - 6 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 AM - 7 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7 AM - 8 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 AM - 9 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9 AM - 10 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 AM - 11 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 AM - 12 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12 PM - 1 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 PM - 2 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 PM - 3 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 PM - 4 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 PM - 5 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5 PM - 6 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 PM - 7 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7 PM - 8 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 PM - 9 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9 PM - 10 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 PM - 11 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 PM - 12 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Daily Totals | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE Calc | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Status = PENDING VENDOR

Current State = Current schedule with approved values or data from QVADS (What ever is most recent).

Proposed Scenario = Enter proposed scenarios to be approved.

Rates Basis = Based on Proposed changes selected.

Rates = Calculated from Rates Basis data and number of hours in the staff matrix

Staff Hours can be entered in increments of .25, .50, .75, and/or whole numbers up to 10.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

5.1.3 Enter Proposed Scenario Changes

14TH STREET GROUP HOME Summary Schedules TEST Master

Status : PENDING VENDOR

Name: TEST Master Effective Date: 10/5/2022

Schedule Type: Master

Service: HAB

ChangeType: [Dropdown]

| Current State | Proposed Scenario |
|---------------------------|--|
| DDD Funded Members: 4 | DDD Funded Members: 4 (No Change) [Dropdown] |
| RRB Members: 4 | RRB Members: 4 (No Change) [Dropdown] |
| Non DDD Funded Members: 0 | Non DDD Funded Members: 0 (No Change) [Dropdown] |
| Total Occupants: 4 | Bedrooms: 4 (No Change) [Dropdown] |
| Bedrooms: 4 | Beds: 4 (No Change) [Dropdown] |
| Beds: 4 | Capacity: 4 [Dropdown] |
| Capacity: 4 | |

Rates Basis

Region: (Statewide) Hours: 4 (No Change) [Dropdown] 0

Based on inputs, there is no rate available for this schedule. If your staff hours are correct you will need a special rate

| | | |
|---------------------------|---------------------------------|---------|
| DDD Funded Members: 4 | Habilitation Rate Range: | |
| RRB Members: 4 | Network Mgmt Approval Required: | N |
| Non DDD Funded Members: 0 | HAB Base Rate: | \$0.00 |
| Total Occupants: 4 | Room & Board Base Rate: | \$18.38 |
| Bedrooms: 4 | | |

DDD Funded Members:

| | |
|-------------------------|---------------|
| HAB Base Rate: | \$0.00 / Day |
| Room & Board Base Rate: | \$73.52 / Day |
| | \$73.52 / Day |

Non-DDD Funded Members:

| | |
|----------------|---------------|
| HAB Base Rate: | \$0.00 / Day |
| | \$73.52 / Day |

Select proposed changes from the dropdowns. Selecting “No Change” keeps the current selection.

The number of bedrooms may need to be changed since the data may not exist in CAS.

Selecting a new value will display in “Rates Basis” and used to calculate rates.

The schedule will validate the info listed comparing selections such as the number of beds to the listed capacity. If there are discrepancies, alerts will display when saving the schedule.

Save

Bed count is greater than bedrooms



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

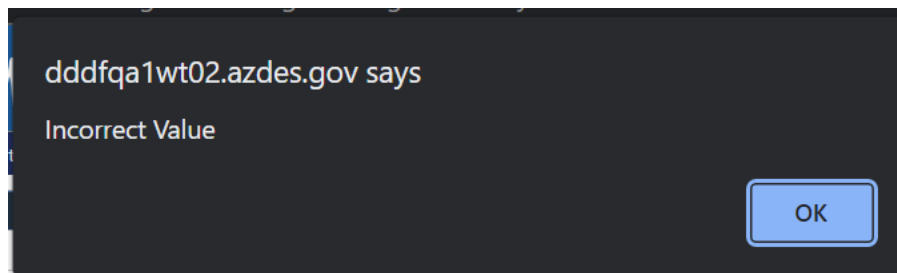
When no hours for staff have been entered a message will display in **RED** requesting the hours or a special rate.

5.1.4 Enter Hours in Staffing Matrix

| Staff Hours | SUN | MON | TUE | WED | THU | FRI | SAT | TOT |
|---------------|-----|-----|-----|-----|-----|-----|-----|-----|
| 12 AM - 1 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 AM - 2 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 AM - 3 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 AM - 4 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 AM - 5 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5 AM - 6 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 AM - 7 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7 AM - 8 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 AM - 9 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9 AM - 10 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 AM - 11 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 AM - 12 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12 PM - 1 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 PM - 2 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 PM - 3 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 PM - 4 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 PM - 5 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5 PM - 6 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 PM - 7 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7 PM - 8 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 PM - 9 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9 PM - 10 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 PM - 11 PM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 PM - 12 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Daily Totals | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE Calc | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Enter the number of staff per hour per day of the week for the site.

The program will not allow you to enter a number higher than 10. If a higher number is entered, a dialog box displays when moving out of the data field.



Click [OK] to close the dialog box and change the number in the field.

Click [Save].



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

5.1.5 Copy Schedule

You can save time entering staff hours by selecting to copy an existing schedule to move the staff hours to the new schedule.

The screenshot shows a software interface for managing schedules. At the top, there are navigation tabs: Home, Queue, Schedules/Current Logs, Rates, Reports, Notification Assignments, Vendor Summary, Signers Foundation / Service Type - HAB. Below the tabs, the status is 'PENDING VENDOR'. A search bar contains '14TH STREET GROUP HOME Summary Schedules TEST Master'. On the right, there are buttons: 'Submit For Network Review', 'Delete Schedule', 'Copy Schedule' (circled in red), 'Add Note', 'Notes', 'History', and 'Print'. The main area is divided into 'Summary Comments' and a grid of staff hours. The grid has columns for days of the week (SUN, MON, TUE, WED, THU, FRI, SAT, TOT) and rows for time slots (e.g., 12 AM - 1 AM, 1 AM - 2 AM, etc.). The 'Copy Schedule' button is highlighted with a red circle.

You must create an empty schedule before copying in a schedule to obtain the staff hours. The copy schedule option will not copy over Current State, Proposed Scenario's, Rates Basis, or Rates.

Click on "Copy Schedule" and a listing of the schedules that have been created for the site will display.

The screenshot shows a 'Choose a Schedule' dialog box with a list of schedules. The list includes:

- TEST Master [10/5/2022 -]
- 14TH STREET GROUP HOME [10/1/2022 -]
- 14TH STREET GROUP HOME [8/28/2022 - 09/03/2022] Temporary
- 14TH STREET GROUP HOME [8/21/2022 - 08/27/2022] Temporary
- 14TH STREET GROUP HOME [8/14/2022 - 08/20/2022] Temporary
- 14TH STREET GROUP HOME [8/7/2022 - 08/13/2022] Temporary
- 14TH STREET GROUP HOME [8/1/2022 - 08/06/2022] Temporary
- 14TH STREET GROUP HOME [7/24/2022 - 07/30/2022] Temporary
- 14TH STREET GROUP HOME [7/10/2022 - 07/16/2022] Temporary

Select a schedule that closely matches the schedule you are trying to create. Staff hours from the schedule selected will populate the new schedule and you will have the ability to make the necessary adjustments.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

The number of hours and rates display based on the proposed scenario and the current Rate Book for HAB, HPD, HID/HAI or RRB.

The screenshot displays the 'TEST Master' configuration page. On the left, there are sections for 'Current State' and 'Proposed Scenario' with dropdown menus for '4 (No Change)'. Below these are 'Rates Basis' and 'Rates' tables. The 'Rates' table shows various rates such as 'Hour: \$2.00', 'HAB Base Rate: \$78.28', and 'Room & Board Base Rate: \$18.38'. On the right, a 'Staff Hours' grid shows hours for each day of the week (SUN-SAT) and a 'TOT' column. The grid shows 2 hours for Monday through Saturday and 0 hours for Sunday. A 'Daily Totals' row at the bottom of the grid shows 10 hours for Sunday, 12 for Monday through Saturday, and 82 for the total. The 'FTE Calc' row shows 2 for Sunday, 2 for Monday through Saturday, and 14 for the total.

You can make changes to the schedule name, change type, effective and end date, and proposed scenario before submitting it for review.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

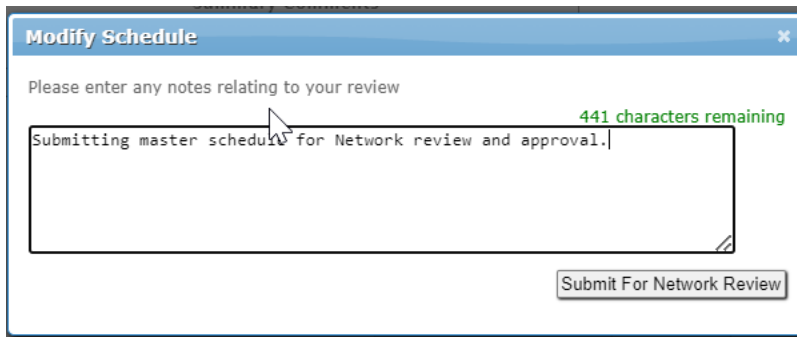
Version 1.0

5.1.6 Submit Staffing Matrix for Review

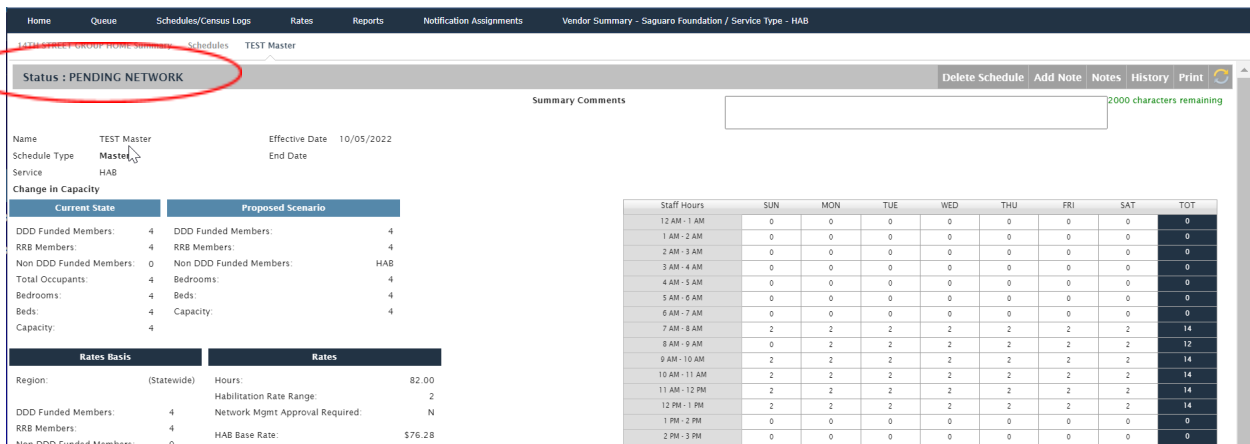
Click on [Submit for Network Review].



A dialog window displays to enter notes before submitting for review.



Click [Submit for Network Review] after entering notes.



The schedule displays the status of Pending Network.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.7 Add Note

Click [Add Note] at the top of the schedule. Notes can be added to communicate changes between network and vendor users.

The screenshot shows a web application interface for managing schedules. At the top, there is a navigation bar with options like Home, Queue, Schedules/Census Logs, Rates, Reports, Notification Assignments, and Vendor Summary. Below this, the current page is titled '14TH STREET GROUP HOME Summary' and 'TEST Master'. A status bar indicates 'Status: PENDING NETWORK'. A toolbar contains buttons for 'Delete', 'Schedule', 'Add Note', 'Notes', 'History', and 'Print'. The 'Add Note' button is circled in red. Below the toolbar, there is a 'Summary Comments' section with a text input field and a '2000 characters remaining' indicator. To the left, there is a table with columns for 'Current State' and 'Proposed Scenario', showing member counts for DDD Funded, RRB, and Non DDD Funded members. To the right, there is a 'Staff Hours' table with columns for days of the week (SUN to SAT) and a 'TOT' column, showing zero hours for all categories.

Window will open for note entry.

The screenshot shows a dialog window titled 'Add Note'. It has a blue header bar with a close button (X) in the top right corner. The main area contains a text input field with the placeholder text 'Additional note entered about the schedule'. At the bottom right of the dialog, there is a 'Save' button.

Enter comments in the dialog window and click [Save].

Close the window by clicking on the X in the upper right corner.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.8 View Notes

Click [Notes] at the top of the schedule.

The screenshot shows a software interface with a navigation bar at the top containing 'Home', 'Queue', 'Schedules/Census Logs', 'Rates', 'Reports', 'Notification Assignments', and 'Vendor Summary - Saguaro Foundation / Service Type - HAB'. Below the navigation bar, the page title is '14TH STREET GROUP HOME Summary Schedules TEST Master'. The main content area shows 'Status : PENDING NETWORK' and a 'Summary Comments' field. A toolbar contains 'Delete Schedule', 'Add Note', 'Notes', 'History', and 'Print'. The 'Notes' button is circled in red. Below the toolbar, there is a table for 'Change in Capacity' and a 'Staff Hours' table.

| Current State | Proposed Scenario |
|-----------------------|-----------------------|
| DDD Funded Members: 4 | DDD Funded Members: 4 |
| RRB Members: 4 | RRB Members: 4 |

| Staff Hours | SUN | MON | TUE | WED | THU | FRI | SAT | TOT |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|
| 12 AM - 1 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 AM - 2 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 AM - 3 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

A list displays date, time, and each note in descending order with latest note at the top.

The screenshot shows a 'Schedule Notes' window with a close button (X) in the upper right corner. The window contains two notes:

- 10/4/2022 3:32:42 PM Additional note entered about the schedule.
- 10/4/2022 3:30:48 PM Submitting master schedule for Network review and approval.

Close the window by clicking on the X in the upper right corner.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.9 View History

Click [History] at the top of the schedule.

14TH STREET GROUP HOME Summary Schedules TEST Master

Status : PENDING NETWORK

Summary Comments

Name TEST Master Effective Date 10/05/2022
 Schedule Type Master End Date
 Service HAB

Change in Capacity

| Current State | Proposed Scenario |
|-----------------------|-----------------------|
| DDD Funded Members: 4 | DDD Funded Members: 4 |
| RRB Members: 4 | RRB Members: 4 |

| Staff Hours | SUN | MON | TUE | WED | THU | FRI | SAT | TOT |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|
| 12 AM - 1 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 AM - 2 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 AM - 3 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Buttons: Delete Schedule, Add Note, **Notes**, **History**, Print

A list displays date and time for schedule changes and notes in descending order with latest change and note at the top.

Schedule History [X]

10/4/2022 3:32:42 PM Manny Sotelo
 Note: Additional note entered about the schedule.

10/4/2022 3:30:48 PM Manny Sotelo
 Note: Submitting master schedule for Network review and approval.

10/4/2022 3:30:48 PM Manny Sotelo
 Changed Status To PENDING NETWORK

10/4/2022 2:12:24 PM Manny Sotelo
 Changed Status To PENDING VENDOR

Close the window by clicking on the X in the upper right corner.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.10 Delete Schedule

Prior to approval, a schedule can be deleted.

The screenshot shows a web application interface for managing schedules. The top navigation bar includes links for Home, Queue, Schedules/Census Logs, Rates, Reports, Notification Assignments, and Vendor Summary. The current page is titled '14TH STREET GROUP HOME Summary' and 'TEST Master'. The status is 'PENDING NETWORK'. A 'Delete Schedule' button is circled in red. Below the status bar, there is a 'Summary Comments' section with a text input field. The main content area displays schedule details: Name (TEST Master), Effective Date (10/05/2022), Schedule Type (Master), End Date, and Service (HAB). A 'Change in Capacity' table compares 'Current State' and 'Proposed Scenario' for DDD Funded Members and RRB Members. A 'Staff Hours' table shows staffing levels for different time slots across the days of the week.

| Staff Hours | SUN | MON | TUE | WED | THU | FRI | SAT | TOT |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|
| 12 AM - 1 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 AM - 2 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 AM - 3 AM | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Click [Delete Schedule] at the top of the schedule page.

A dialog window displays for you to confirm the delete action.

The dialog window has a dark background and contains the text 'dddfqa1wt02.azdes.gov says' and 'Are you sure you want to delete this schedule?'. At the bottom, there are two buttons: 'OK' and 'Cancel'.

To delete the schedule, click [OK].

Click [Cancel] to exit the dialog window without deleting the schedule.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

5.1.11 View and Modify Staffing Matrix

After submitting a site staffing matrix/schedule for review, Vendor and Network staff must access the matrix/schedule, review it and make any modifications before final approval by Network staff.

5.1.11.1 Access Staffing Matrix from the Queue

From the Program Staffing Application homepage or toolbar, select Queue.

The Queue page displays.

| Status | Assigned To | Schedule | Service | Vendor | Site | Code | District | Create Date |
|-----------------|---------------|---|---------|--------------------|------------------------|------|----------------|-------------|
| PENDING VENDOR | KRISTIN CLARK | 33RD DRIVE GROUP HOME CA [8/21/2022 - 09/20/2022] Temporary | HAB | Saguaro Foundation | 33rd Drive | CA | District South | 9/12/2022 |
| PENDING NETWORK | Unassigned | TEST Master [10/5/2022 -] Master | HAB | Saguaro Foundation | 14TH STREET GROUP HOME | CB | District South | 10/4/2022 |

Click on a schedule name link.

The schedule displays.

5.1.11.2 Access Staffing Matrix from Site Search

Select Staffing Schedules on the Program Staffing homepage or toolbar.

The Search page displays. Select a Service Type and Click [Search]. The site for the service selected will appear.

Saguro Foundation AHCCCS ID: 494972

| | | | |
|----------------------|--------------------|------------------------|----------------|
| Primary Contact: | Adrianna Arellano | Primary Contact Title: | |
| Vendor Phone: | 928.783.6069 | Emergency Contact: | Edwardo Castro |
| Address: | 1495 S 4th Ave | Emergency Phone: | 928.941.3221 |
| City, State ZipCode: | Yuma, AZ 853644603 | | |

| Site Name | Site Code | Active Schedule | Address | District |
|-----------|-----------|-----------------|---------|----------|
|-----------|-----------|-----------------|---------|----------|

Scroll down to view all sites or you can search for a specific site.

Saguro Foundation AHCCCS ID: 494972

| | | | |
|----------------------|--------------------|------------------------|----------------|
| Primary Contact: | Adrianna Arellano | Primary Contact Title: | |
| Vendor Phone: | 928.783.6069 | Emergency Contact: | Edwardo Castro |
| Address: | 1495 S 4th Ave | Emergency Phone: | 928.941.3221 |
| City, State ZipCode: | Yuma, AZ 853644603 | | |

| Site Name | Site Code | Active Schedule | Address | District |
|-----------|-----------|-----------------|---------|----------|
|-----------|-----------|-----------------|---------|----------|



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Click on a site name in the list of results.

You can then enter a few letters of the Site name and Click [Search]

| Home | Queue | Schedules/Census Logs | Rates | Reports | Notification Assignments |
|--|-----------|--------------------------|---------------------------------------|------------------------|--------------------------|
| Service Type HAB Search Sites By Name pal Show Open Sites Search | | | | | |
| Saguaro Foundation AHCCCS ID: 494972 / Service Type - HAB | | | | | |
| Primary Contact: | | Adrianna Arellano | | Primary Contact Title: | |
| Vendor Phone: | | 928.783.6069 | | Emergency Contact: | |
| Address: | | 1495 S 4th Ave | | Edwardo Castro | |
| City, State ZipCode: | | Yuma, AZ 853644603 | | Emergency Phone: | |
| | | | | 928.941.3221 | |
| Site Name | Site Code | Active Schedule | Address | District | |
| Palmcroft Group Home | OA | PALMCRIFT GROUP HOME OA | 1020 W Palmcroft Dr, Yuma AZ853647920 | District South | |
| Palo Verde Group Home | OE | PALO VERDE GROUP HOME OE | 301 Palo Verde, Yuma AZ853647314 | District South | |



Department of Economic Security Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet
Subject: User Reference Guide
Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

The page displays summary information for the site selected.

Click on the Schedules tab.

The Schedules page displays all schedules that have been created and approved for the site.

| Schedules | | | | Add New Schedule |
|-----------------|--|----------------------|-------------|------------------|
| Status | Schedule Name | Status Date | Assigned To | |
| PENDING VENDOR | Temp Schedule [3/30/2015 - 04/18/2015] Temporary | 3/26/2015 3:25:28 PM | N/A | |
| PENDING NETWORK | Master Schedule [3/27/2015 -] | 3/26/2015 5:32:19 PM | N/A | |

Click on a schedule name link and the schedule displays.



Department of Economic Security
Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet
Subject: User Reference Guide
Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

5.1.12 Print Staffing Matrix

You can print a HAB Staffing Matrix that has been accessed and is displayed on your PCs' monitor.

The screenshot shows the 'TEST Master' interface. On the left, there are summary statistics for 'TEST Master' as of 10/05/2022, including counts for DDD and RRB members, total occupants, and room/bed capacity. The main area is a grid showing staffing hours for various time slots (e.g., 12 AM - 1 AM, 1 AM - 2 AM, etc.) across the days of the week (SUN to SAT). A 'Print' button is highlighted in the top right corner of the interface.

Select [Print] to open in a printable format, the print pop up will open.

The print preview window displays the 'HAB Staffing Master Schedule' for Tuesday, October 4, 2022. The header includes details for the Vendor (Saguaro Foundation), Occupant (DUNCAN JANET), and Billing information. Below the header is a detailed staffing grid with columns for days of the week and time slots, and rows for each time slot. A sidebar on the right contains print settings: 'Print' (1 page), 'Destination' (Save as PDF), 'Pages' (All), 'Layout' (Portrait), and 'More settings'. At the bottom right, there are 'Save' and 'Cancel' buttons.

Make any adjustments to your printing location and click on print.



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

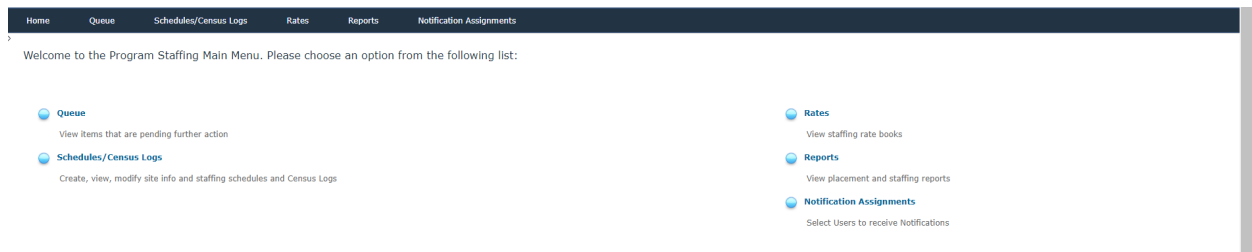
Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

6 Rate Books

Select the Rates option in the toolbar or homepage of the Program Staffing Application.



The Rate Book page displays with tabs to view the HAB, HPD and RRB rate books.

The rate books display data based on the date displayed in the **Show Rate book As Of** field. By default, the current date displays. You can enter a date from the previous fiscal year in the **Show Rate book As Of** field and click [Update] to view previous rate books.

Select a Rate Book tab. The Rate Book displays.

| Low Hours | High Hours | Residents | Range | Adopted Rate | Requires Approval | Start Date | End Date |
|-----------|------------|-----------|-------|--------------|-------------------|------------|------------|
| 10:00 | 20:00 | 1 | 1a | 67.25 | NO | 10/01/2022 | 12/31/2022 |
| 10:00 | 20:00 | 2 | 1a | 35.18 | NO | 10/01/2022 | 12/31/2022 |
| 10:00 | 20:00 | 3 | 1a | 25.42 | NO | 10/01/2022 | 12/31/2022 |
| 10:00 | 20:00 | 4 | 1a | 19.67 | NO | 10/01/2022 | 12/31/2022 |
| 10:00 | 20:00 | 5 | 1a | 15.25 | NO | 10/01/2022 | 12/31/2022 |
| 10:00 | 20:00 | 6 | 1a | 12.71 | NO | 10/01/2022 | 12/31/2022 |
| 30:00 | 40:00 | 1 | 1b | 134.51 | NO | 10/01/2022 | 12/31/2022 |
| 30:00 | 40:00 | 2 | 1b | 70.37 | NO | 10/01/2022 | 12/31/2022 |

HAB Rate Book details; Low hours, High hours, Number of Residents, Range, Adopted Rate, Requires Approval, Start and End dates.

HPD Rate Book details; Low hours, High hours, Number of Residents, Range, Adopted Rate, Requires Approval, Start and End dates.

HID/HAI Rate Book details; Low hours, High hours, Number of Residents, Range, Adopted Rate, Requires Approval, Start and End dates.

RRB Rate Book details; County, Number of Residents, Bedrooms, Benchmark Rate, Adopted Rate, Start and End dates.

When new Rate Books are issued, the system will automatically update the rates and create a new schedule with the new rates. The prior schedule will expire, however, the expired schedule will still be available to view or copy from the schedules listing.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

7 Reports

Click on the Reports option from the toolbar or homepage.

The Management Reports page displays.

Click on a report link to access the parameters window and generate the report.



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

7.1 Vacancy/Census Report

The Vacancy/Census Report provides census data for sites in various districts.

The screenshot shows a web application window titled "Census Report". At the top left, there is a mouse cursor. Below it is a date field labeled "*Date:" containing "10/4/2022". Underneath the date field are several checkboxes: "Select All", "District Central", "District East", "District North", "District South", and "District West". At the bottom left, there are two "View Report" buttons: one with a green Excel icon and one with a red PDF icon. At the bottom right, there is a blue "Close" button.

The Date field defaults to the current date. You may change the date by clicking on the field and selecting a previous or future date in the pop-up calendar.

You may select one or multiple districts to view results.

To view the report in PDF, click on  View Report or click on  View Report to view it in Excel.

A prompt to open the file, save the file, or cancel the request displays.

The Census report contains the total number of occupants and their information for sites located in the selected district(s).



Version 1.0

Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

7.2 Vendor Call Response History Report

The Vendor Call Response History Report provides data on responses to vendor calls.

Vendor Call Response History Report

Enter Report Parameters

*Start Date: *End Date:

Funding Request ID:

View Report View Report

Close

The Start Date and End Date fields are required. Enter the dates by clicking on the fields and selecting a date in the pop-up calendar.

To view data for a specific Funding Request ID, enter the ID (e.g., F000001) in the field.

To view the report in PDF, click on View Report or click on View Report to view it in Excel.

A prompt to open the file, save the file, or cancel the request displays.

The report contains information on vendor call responses for the parameters selected.



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

8 Glossary

| Term | Definition |
|------------------------------------|--|
| AHCCCS | Arizona Health Care Cost Containment System |
| ALTCS | Arizona Long Term Care System |
| Annual PSCP Meeting Completed Date | The date an Annual PSCP meeting was completed. |
| Annual PSCP Task | Hold meeting to create a new Planning Document/PSCP for a new PSCP year. |
| APM | Area Program Manager |
| ASSISTS | The mainframe system replaced by Focus |
| Available Capacity | The difference between the established utilized existing capacity and the current occupancy (also called vacancy). |
| BTP | Behavioral Treatment Plan |
| CAP | Corrective Action Plan |
| Capacity | The total of DDD Approved Capacity and non-DDD Approved Capacity |
| CBA | Cost Benefit Analysis |
| Percentage of CES Cost | $\% \text{ Of CES} = \text{Total Projected Cost} / (\text{Institutional Cost} - \text{Consumer Share of Cost})$ |
| CES | Cost Effectiveness Study |
| CMS | Centers for Medicare & Medicaid Services |
| Consumer Needs Summary | A written summary of the Consumer's needs that is published to allow vendors to evaluate their ability to meet the consumer's placement needs and to respond with interest in the placement. In response to the Needs Summary, Vendors request 'More Information'. When More Information is requested, the interested vendor is provided with the Consumer's PSCP. |
| CPS | Child Protective Services |
| DD-090 | The name of the current form used to initiate or change Client Billing |
| DDD | Division of Developmental Disabilities |
| DDD Capacity | DDD Capacity is the approved Capacity for DDD Consumers. It is determined at Network Expansion. |
| DDD Occupancy | Number of DDD consumers in residence |
| Direct Referral | The process of directly selecting a vendor for potential placement of one or more consumers. |
| DPM | District Program Manager |
| EXCOR | Expenditure Correction |



Department of Economic Security

Division of Developmental Disabilities

Version 1.0

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

| Term | Definition |
|----------------------------|---|
| Existing Capacity | Capacity that has already been approved. |
| FMCS | Financial Management Control System |
| FOCUS | FOCUS is a suite of application programs which support the process of delivering ALTCS and state-only funded services to eligible consumers/members. |
| FOCUS PSCP Date | The date an initial PSCP Team Meeting was completed. This date never changes. |
| Fund Source (Eligibility) | Long Term Care (LTC) Division of Development Disabilities (DDD) Targeted Support Group (TSG) |
| Help for Providers | https://www.azdes.gov/developmental_disabilities/providers.aspx |
| HIPAA | Health Insurance Portability and Accountability Act |
| Institutional Rate | The cost of caring for an individual in an institution for one month |
| PSCP(ISP) | PSCP/Planning Document (Individualized Support Plan) |
| LTC | Long Term Care |
| MS | Microsoft |
| Net Institutional Cost | The Total Projected Cost – the Shared Cost = The Net Institutional Cost |
| Network Expansion | Network expansion is the process of increasing network capacity. |
| Network Expansion Request | A Network Expansion Request includes multiple consumers, (normally 3-4) consumers. The Network Expansion Request includes the request for Approval of increased Capacity. |
| Network Management | Organizationally, this is the business group responsible for aiding in the selection of potential vendors for member placement, managing Network capacity and occupancy, and maintaining the Habilitation Matrices. |
| New Capacity | Used to describe the addition of Network Capacity. Has the same meaning as Network Expansion. |
| Non-DDD Capacity | Approved Non-DDD Capacity is the approved capacity for non-DDD consumers. |
| Non-DDD Consumer | Independent Consumer (non-DDD) in residence at the Vendor site. |
| Non-DDD Occupancy | Non-DDD consumers / Private Payers not funded through Title XIX or State funding |
| Occupancy | The total of DDD occupancy and non-DDD Occupancy |
| Occupancy with no capacity | Occupancy with no capacity occurs when there has been placement in the home, but no Habilitation Matrix was created to define the site capacity. The division has not approved the placement space for permanent placement. |



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

| Term | Definition |
|-----------------------------|--|
| OLCR | Office of Licensing, Certification, and Regulation |
| OCR | Office of Compliance and Review |
| Personnel Hierarchy | Identifies who reports to whom within the business organization. This information is used in security (role-based function) processing. |
| Placement Request | A request to locate a placement for a single consumer |
| Potential Vendors List | Vendors who may meet the consumer’s residential need |
| Potential Vendors List | A list of Vendors who have responded to the Direct Call (a single vendor) or the Vendor Call (one or more vendors) |
| PTS | Personnel Tracking System |
| QA | Quality Assurance |
| Queues | Work queues are lists of work in process. They identify the type and status of the work. Users with assigned work are allowed to alter the view of their queues by Accepting filters to the list and by hiding and un-hiding completed work as needed. |
| QVADS | Qualified Vendor Application and Directory System |
| QVAS | Qualified Vendor Application System |
| Rate Range | Vendors submit claims for consumer services provided. The claim includes the number of service units provided (may be daily, hourly monthly or other according to the service type), and the monetary rate used to compute the claim amount. Payments reject in the payments process if the vendor has not submitted the claim using a rate that falls within the approved rate range. Certain services (those defined within the scope of this project) use a Staffing methodology to determine the valid rate range for a site. |
| RBHA | Regional Behavioral Health Authority |
| Readiness Reviews | A readiness review is a review by a group outside of Network Management Division staff (QA, Contracts) to determine whether a site is ready for placement. |
| Review Completed Date | The date a review was completed. |
| Review PSCP Task | Conduct PSCP review 90 or 180 days from the Annual PSCP or placement date. |
| SC | Support Coordinator |
| SCS | Support Coordinator Supervisor |
| Share of Institutional Cost | This is the amount of cost that will be recovered from the Consumer |
| SME | Subject Matter Expert |
| SOGH | State Operated Group Homes |



Department of Economic Security

Division of Developmental Disabilities

Project: Program Staffing Application Phase II SP3 – Vendor Internet

Subject: User Reference Guide

Doc ID: DDD-PSA_VendorInternetPhaseII_SP3_UG-040-010

Version 1.0

| Term | Definition |
|--------------------------|---|
| Staffing Methodology | <p>The staffing methodology determines the valid rate range for a site based on two factors:</p> <ul style="list-style-type: none"> • the number of staff required to support the consumers in residence • modifiers that account for increased cost of supplies related to care for specific conditions <p>There are several factors that may impact the number of staff required to support the consumers in the home: Some examples are:"</p> <ul style="list-style-type: none"> • Out of home instances, both scheduled and unscheduled • Increases or decreases in care needs • Increases or decreases in the number of consumers in residence <p>Network Management uses the Habilitation Matrix, a tool, to help the vendors determine their staffing needs. Vendors enter the consumers in residence, the number of staff required to support the consumers (by time of day and day of week), and the modifiers for each consumer.</p> |
| TBD | To Be Determined |
| TITLE XIX | Federal Funds authorized for Medicaid consumers under the Social Security Act. |
| TOTAL PROJECTED COST | On the CES Worksheet, this is the total of the services provided to the consumer for the projected time |
| TSC | Targeted Support Coordination |
| Vendor Call | The Process of issuing a vendor requisition notice for placement of one or more consumers. Vendor calls can be issued for Standard Placement Requests and Network Expansion Requests. |
| Vendor Selection Cycle | Within the Vendor Selection Process, there may be one or more iterative occurrences of identifying vendors for selection. For each cycle, there will be an identified outcome, no vendor selected, or vendor selected. |
| Vendor Selection Method | There are two methods of vendor selection: Direct Referral and Issuing a Vendor Call |
| Vendor Selection Process | The end-to-end process of selecting a vendor for the placement. |



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| Term | Definition |
|------------------------------|---|
| Vendor Site Readiness Review | A Vendor Site Readiness Review includes visit and review by Monitoring Staff to determine whether a site is ready to receive placements. The Readiness Review is performed after contract completion, when the vendor site has been selected for Placement. |
| Vendors Not Selected | Vendors who: <ul style="list-style-type: none">• Responded to the Vendor Call,• Requested additional information on the consumer,• Responded with a positive ability to meet the consumer’s residential needs, yet were not selected to fulfill the need. |
| Wait List | Pending Placement list maintained through the FOCUS Client application |