

RCEB Procedures - Case Management Coordination Supported Living Services

Procedure Number: 7913

Date Approved: 12/17/2019

Prepared by: Director, Community Services

I. Purpose:

In order to meet the legal requirements set forth in W&I Code 4689 and 4689.05, and to assist clients served by the agency with obtaining the support they need to safely live in a home that they own or lease in the community of their choice, RCEB has established the following procedures:

II. Goal:

To ensure adults entering into supported living arrangements have appropriate supports in place in accordance with their needs, preferences, and regulatory statutes.

III. Procedure:

SLS Committee

The RCEB Supported Living Services Committee (SLS Committee) is available for case manager to consult with at any of the subsequently noted steps of the SLS procedure. Case manager, supervisor, or SLS Coordinator may recommend scheduling of SLS Committee appointment (as necessary) if case manager is needing additional clarity on these steps or if the documentation received from SLS agency is incomplete or does not accurately address the support needs of client. It is also recommended that case manager consult with the SLS Committee if the justification for the proposed volume of SLS support is not properly reflected in the documentation provided.

In summary, the SLS Committee is a resource for case managers to assist them in the initial SLS planning process. The committee also serves the purpose of assisting case managers in determining if a requested increase in SLS supports is justified per information and documentation provided.

Case manager can schedule consultation with SLS Committee by contacting the Community Services Administrative Assistant who will forward the required referral document to be completed prior to scheduled appointment.

Initial SLS Purchases

When a change for living arrangement is requested, the Planning Team must meet to discuss the individual's preferences and needs and consider all living options available to the individual. If the planning team chooses to pursue SLS as the living option of choice, the following steps should be taken to assess the feasibility of SLS:

1. The CM contacts and sends a referral packet to potential SLS providers, from the list of SLS vendors, that could provide training and support to the individual in the areas identified by the Planning Team.
2. Once the Planning Team has identified a provider that may be a good fit for the individual, and the provider and individual have met and agreed to proceed with an assessment, the CM shall submit a POS for a one-time SLS assessment.
3. The provider submits to RCEB an assessment report that clearly identifies the individual's abilities/skills/strengths, support needs, natural and generic supports in place and anticipated, and a summary of the services the individual will receive from the provider. The provider will also submit a proposed support schedule. These documents need to reflect any of the following natural and generic resources/supports:
 - Shared SLS and IHSS with roommate(s) – also submit roommate(s) schedule and budget;
 - Trusts, settlements, or other financial resources;
 - IHSS – current and projected hours (provider submits NOA if available)
Provider needs to assist client in completing IHSS application within 5 business days of service starting.
 - Natural supports (family, friends, church, etc...)
 - Personal time;
 - Day Program, employment, or school schedule;
 - Away from home visits and vacations;

- Any other supports the client receives.

If the initial purchase is based on a transitional need (such as when an individual is not yet living in a home of their own), the provider must submit a transition budget and schedule along with a projected ongoing schedule and budget.

4. The Case Manager (CM) must complete the DDS Supported Living Services Standardized Assessment Questionnaire with the planning team. CM will provide case management supervisor with completed form.

Link for document:

https://www.dds.ca.gov/wp-content/uploads/2019/02/DDS_SLS_StdAssmtQuestionnaire-1.pdf

Welfare and Institutions Code Div. 4.1 section 4689

(p) (1) To ensure that consumers in or entering into supported living arrangements receive the appropriate amount and type of supports to meet the person's choice and needs as determined by the IPP team, and that generic resources are utilized to the fullest extent possible, the IPP team shall complete a standardized assessment questionnaire at the time of development, review, or modification of a consumer's IPP. The questionnaire shall be used during the individual program plan meetings, in addition to the provider's assessment, to assist in determining whether the services provided or recommended are necessary and sufficient and that the most cost-effective methods of supported living services are utilized.

5. Case manager and supervisor will review assessment report and proposed SLS budget and schedule. Once it is determined that the budget and staff schedule are appropriate, the CM will move forward with authorization of services. If the budget is inaccurate or not accurately reflecting the needs of the client, the case manager must follow up with the provider and/or planning team to resolve any concerns or discrepancies as identified. If unresolved questions remain regarding proposed budget and other supportive documentation, CM can seek additional consultation from SLS Coordinator and also schedule appointment with SLS Committee as necessary.
6. CM writes a POS and attaches the budget and schedule, along with the Standardized Assessment Questionnaire, then submits to their Supervisor for approval. The SLS Coordinator or designee will provide final review and approval of the budget and schedule after contract compliance, rates, and other factors are considered (such as room-mates budget, if applicable). The budget and the schedule must also have a projected start date and a minimum of 14 day lead time prior to the start date is required in order to get the purchase to accounting for timely processing. The approved POS,

budget and staff schedule are submitted to accounting by the SLS Coordinator.

REAUTHORIZATION Purchase:

Purchases are written on an annual basis ending on the last day of the month after client's birth month (except for the initial POS which is written for 6 months maximum). The planning team shall meet during the client's birth month to review services and progress made toward meeting objectives identified in the IPP.

Reauthorization of services should be processed as follows:

1. The provider must submit a current ISP (as approved by the planning team), support schedule, and budget no later than the month of the client's birth.
2. Budgets and schedules with no changes, as long as the planning team determines that the same level of support continues to appropriately meet the needs of the individual served, should be forwarded to the SLS Coordinator, along with a POS authorizing the service for another year. The SLS Coordinator will review, approve, and submit to accounting for processing.
3. Budgets and schedules with an increase in SLS may need to be reviewed by the SLS Committee, as determined by the SLS Coordinator, as increased SLS should only be approved when health and safety issues exist. The provider must provide documentation, including a written summary of the need for increased SLS and other supporting documentation, when an increase in SLS is requested. Any need for an increase to SLS must be identified in the ISP.
4. A 14 day lead time is required in order to get the POS to accounting in a timely manner, not including time to go through the approval process for requested increases. The case manager may extend the current POS for a maximum of 30 days to allow time to assess and address the situation, as approved by the CM Supervisor and SLS Coordinator (or designee).

CHANGE in Purchases

For unanticipated changes in an individual's support needs that require an **immediate** increase in purchase, the following must take place:

1. Within 24 hours of a change in client care need, provider contacts Case Manager to discuss the immediate need for support change and all possible resources available to the client before an SLS increase is recommended. If there are no alternative resources available to the client, and the need is for health and safety reasons, an increase in SLS hours may be considered. The case manager must consult with his/her supervisor, SLS Coordinator, and the Associate Director of Adult Services (or Director of Community Services if unavailable) and proceed as recommended.

2. Within 5 business days, the provider submits to the regional center a revised budget, revised staffing schedule, and documentation that supports the need for a change in SLS.
3. Case manager consults with his/her Supervisor, the SLS Coordinator, and the Associate Director of Adult Services or Director of Community Services regarding the need for increased SLS, providing all documentation provided by the provider.
4. A change may require an additional POS or a change POS. The type of POS is dependent on the reason for the change. If the change is time limited, then a second POS is written. If the change is ongoing, then a change POS is written.

For increases to an individual's support needs that do not require an immediate change in services, the provider must submit to the regional center a revised budget, revised staffing schedule, and documentation that supports the need for a change in SLS. The Case Manager presents this to the SLS Coordinator, who will advise the case manager how to proceed.

SEE ATTACHMENT A for additional SLS funding procedures

DEFINITIONS

AD-HOC MEETINGS: These are meetings that are held outside of standing meetings for a particular purpose, such as an SLS situation that requires immediate resolution and cannot be scheduled during the standing SLS Committee Meeting.

PLANNING TEAM : Team of people responsible for assisting the individual with getting their needs met in the community. At minimum, the planning team must include the individual and the case manager, but can include family, neighbors, providers, or anyone else the individual would like to be present to support them.

SLS COMMITTEE: The SLS Committee is comprised of the SLS Coordinator, case management supervisors, the Director of Community Services, and the Associate Director of Adult Services. The committee's function is to assist case managers with ensuring successful supported living arrangements for individuals

served. Some areas the committee assists with include (but are not limited to) identifying all possible resources available to each individual and ensuring costs are reasonable and necessary based on each individuals needs.

TRUSTS: A trust is a fiduciary arrangement that allows a third party, or trustee, to hold assets on behalf of a beneficiary or beneficiaries. Trusts can be arranged in many ways and can specify exactly how and when the assets pass to the beneficiaries. A Supplemental Needs Trust (sometimes called a Special Needs Trust) is a specialized legal document designed to benefit an individual who has a disability. A Supplemental Needs Trust provides for supplemental and extra care over and above that which the government provides. Some Trusts can pay for SLS-like services, depending on the type of Trust and what is authorized to be paid for in the Trust. A client may not be eligible for IHSS if he/she has a Trust, so it may be necessary to estimate the amount of IHSS the client would have been otherwise entitled to in order to determine how much the Trust should pay toward services. It is important that the case manager obtains a copy of the Trust when learning a client has one.

SLS PROCEDURES – ATTACHMENT A

Vendor Proposal for Financial or Fiduciary Involvement in the home of client receiving Supported Living Services

Regulations and Procedure

In regards to living environments, SLS regulations stress that people should choose where and with whom to live, control the character and appearance of the environment within their home; and choose, change their SLS vendors and direct service staff as they desire, and receive services appropriate to their evolving needs and preferences for support without having to move from the home of their choice, for as long as SLS remains the preferred objective, as determined in the consumer's IPP process. (Title 17 § 58620 and WIC4689).

§ 58611. Housing Financial Involvement and Responsibilities.

(a) A SLS vendor shall have no financial or fiduciary involvement in the home, or in any utility or service contract integral to the occupancy of the home, of a consumer to whom the SLS vendor provides services, *whenever such involvement would inhibit the consumer's exercise of the rights enumerated in Section 58620, or be inconsistent with any requirement of Welfare and Institutions Code, Section 4689.*

(1) Whenever a vendor proposes to have a financial or fiduciary involvement specified in (a), the vendor shall present the proposal in writing to the regional center. The proposal shall assure and demonstrate to the regional center's satisfaction, that:

- (A) The involvement would serve the interests of the consumer better than a range of available alternatives;
- (B) The consumer understands and approves of the vendor's proposed involvement; and
- (C) The requirements of (a) would be met.

If the ID Team believes that it is in the self-interest of a consumer to receive Supported Living Services (SLS) in a home setting where the vendor has financial or fiduciary involvement, the vendor needs to submit a proposal in writing to RCEB that details and documents this position.

This proposal needs to be submitted on agency letterhead and must clearly define:

- How this arrangement is the consumer's best interest as opposed to other alternatives,
- Have proof the consumer understands and approves of the plan (Must include statement signed by consumer)
- Have choice in where they will live,
- Have choice in who they will live with,

- How the consumer will have control of the character and appearance of the environment of their home,
- How long this situation is expected to last
- That the person can continue to live there if they chose a different SLS agency and staff to support them.

After receiving the proposal and IDT agrees this arrangement is in the consumer's best interest, RCEB Case Manager must document in IPP or IPP Addendum.