

ERC Waiver Program SERVICE PROVISION for services provided in staff homes

Policy and Procedures

I. Purpose

While ERC provides very little services in staff homes and there are no current plans to have provider-owned or controlled residential settings, it does recognize the need to describe the characteristics of settings in which Home and Community Based Services (HCBS) are offered.

II. Scope

This policy and procedure will apply only to persons served in ERC's waiver program who receive services within a staff owned or leased home or in a provider-owned or controlled residential setting, should that option become available in the future.

III. Policy

It is the policy of ERC to provide HCBS in settings that are integrated in and supports full access to the greater community, while meeting the specific needs of the persons served.

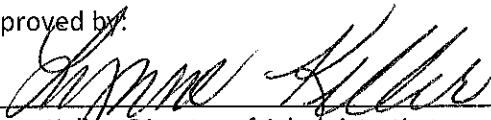
IV. Procedures

- A. Services will be based on the needs of the person served as described in their person-centered service plan.
- B. Services provided in staff homes will be provided in a manner that supports and promotes the belief that persons served must have full access to the benefits of the community and receive services in the most integrated setting. The setting must:
 - 1. Be integrated in and support full access of persons served to the greater community to the same degree of access and persons not receiving HCBS, including:
 - a. Opportunities to seek employment and work in competitive integrated settings,
 - b. Engage in community life, control personal resources, and
 - c. Receive services in the community.
 - 2. Be selected by the person served from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options must be:
 - a. Identified and documented in the person-centered service plan,
 - b. Based on the persons served needs, preferences, and
 - c. For residential settings, resources available for room and board.
 - 3. Ensure a persons served rights of privacy, dignity and respect, and freedom from coercion and restraint.
 - 4. Optimize, but not regiment, person served initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
 - 5. Facilitate person served choice regarding services and supports, and who provides them.
- C. All adults living in the staff home will be screened.
- D. Persons served will be matched with staff homes based on interests, preferences and choices of persons served along with the ability of the staff homes to meet specific needs of person served.
- E. The organization requires staff in staff homes to participate in competency-based training. Refer to ERC Training Procedures.

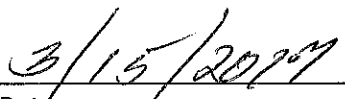
- F. The organization has a written agreement with staff in staff homes that include responsibilities, applicable rules/regulations, performance expectations, and monitoring process.
- G. The organization ensures a plan that addresses respite or relief and emergency response.
- H. In a provider-owned or controlled residential setting, the following conditions must be met:
 - 1. The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the person receiving services, and the person served has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity.
 - 2. For settings in which landlord tenant laws do not apply, there must be a lease, residency agreement or other form of written agreement will be in place for each person served, and that the document provides protections that address eviction process and appeals comparable to those provided under the jurisdiction's landlord tenant law.
 - 3. Each person served has privacy in their sleeping or living unit.
 - 4. Units have entrance doors lockable by the person served, with only appropriate staff having keys to doors.
 - 5. Persons served sharing units have a choice of roommates in that setting.
 - 6. Persons served have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
 - 7. Persons served have the freedom and support to control their own schedules and activities, and have access to food at any time.
 - 8. Persons served are able to have visitors of their choosing at any time.
 - 9. The setting is physically accessible to the person served.
- I. Any modification of the conditions specified in A, B, and C above, must be supported by a specific assessed need and justified in the person-centered service plan. The following must be documented in the person-centered service plan if any modifications are made:
 - 1. A specific and individualized assessed need,
 - 2. The positive interventions and supports used prior to any modifications to the person-centered service plan,
 - 3. Less intrusive methods of meeting the need that have been tried but did not work,
 - 4. A clear description of the condition that is directly proportionate to the specific assessed need,
 - 5. Regular collection and review of data to measure the ongoing effectiveness of the modification,
 - 6. Quarterly reviews to determine if the modification is still necessary or can be terminated,
 - 7. The written informed consent of the person served, and
 - 8. An assurance that interventions and supports will cause no harm to the person served.
- J. No general or "across the board" modification to the requirements in A, B, and C above may be made. All modifications must be specific to the person served as described in D above.

V. Review/Revision/Approval Information

- List all review/revision dates made by P&P Review Committee: 7/2015, 3/2017
- Reviewed/Approved by Board of Directors (if required):
- Approved by:



 Lynne Keller, Director of Administration



 Date

CARF standard(s) (Commission for the Accreditation of Rehabilitation Facilities) _____

DDS regulation(s) (Dept. of Disability Services – State) _____

- OLTC regulation(s) (Office of Long Term care – State) _____
- DOE regulation(s) (Dept. of Education – State) _____
- ARS (Ark. Rehabilitation Services – State) _____
- AHTD regulation(s) (AR Highway & Transportation Dept - State) _____
- OSHA regulation(s) (Occupational Safety & Health Administration – Federal) _____
- Medicaid regulations (Federal/state) _____
- HIPAA Regulations (Federal) _____

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