**SLIDE #1**

The Delaware Division of Developmental Disabilities Services (DDDS) welcomes you to this session that provides an overview of the services and supports the Division offers through the Lifespan Waiver and the Pathways to Employment State Plan Amendment.

This session is a component of DDDS’ goal of developing and maintaining a robust network of quality providers to deliver services and supports to individuals living with intellectual developmental disabilities and their families.

**SLIDE #2**

DDDS offers an array of services and supports to help individuals with intellectual developmental disabilities live their good life.

Applicants should become familiar with the service descriptions in the waiver and amendment documents, the provider standards, and the appropriate service manuals. The Provider Manual explains how to find these documents.

**SLIDE #3**

**DAY HABILITATION**

Day Habilitation service provides regularly scheduled activities in a non-residential setting, separate from the participant’s private residence or other residential living arrangement, such as assistance with acquisition, retention, or improvement in self-help, socialization and adaptive skills that enhance social development and develop skills in performing activities of daily living and community living, physical development, basic communication, self-care skills, domestic skills, community skills and community-inclusion activities. Activities and environments are designed to foster the acquisition of skills, building positive social behavior and interpersonal competence, greater independence, and personal choice. Day Habilitation may include self-advocacy training to assist the participant in expressing personal preferences, self-representation, and individual rights and to make increasingly responsible choices. Providers must encourage and support individuals to achieve their desired level of participation in the community. To the greatest extent possible, individuals should be exposed to a broad array of community experiences so that they can make informed choices about what they like and what they don’t like.

Day habilitation services focus on enabling the participant to attain or maintain his or her maximum potential and shall be coordinated with any needed therapies in the individual’s person-centered services and supports plan, such as physical, occupational, or speech therapy.

DDDS may authorize a higher rate for the provider when it employs American Sign Language fluent or ASL-certified staff to directly support individuals who use sign language to communicate or when it employs Registered Behavior Technicians (RBTs) to support individuals who have an increased behavioral support need.

**COMMUNITY PARTICIPATION**

While the Lifespan Waiver considers Community Participation as a separate service, it functions as an approved activity within day habilitation. Only approved Day Habilitation providers may offer Community Participation services. It provides scheduled activities outside of an individual’s home that support acquiring, retaining, or improving the following skills: self-care, sensory-motor development, socialization, daily living skills, communication, and community living. Community Participation activities include supervision, monitoring, training, education, demonstration, or support. Community Participation may include self-advocacy training to assist the participant in expressing personal preferences, self-representation, and individual rights and to make increasingly responsible choices. Individuals receiving Community Participation services work toward acquiring the skills to become an active member of the community. Because Community Participation is very individualized and is heavily focused on community exploration, staffing ratios may not exceed one staff to two participants.

Providers must encourage and support individuals to achieve their desired level of participation in the community. To the greatest extent possible, individuals should be exposed to a broad array of community experiences so that they can make informed choices about what they like and what they don’t like.

DDDS may authorize a higher rate for the provider when it employs American Sign Language fluent or ASL-certified staff to directly support individuals who use sign language to communicate or when it employs Registered Behavior Technicians (RBTs) to support individuals who have an increased behavioral support need.

**PREVOCATIONAL SERVICE**

Prevocational Services provide learning and work experiences, including volunteer work and/or internships, in which the individual can develop general, non-job-task-specific strengths and skills that contribute to employability.

Services develop and teach general skills such as: communicating effectively with supervisors, co-workers, and customers; following community workplace conduct and dress standards; following directions; attending to tasks; gaining workplace problem solving skills and strategies; following general workplace safety protocols, and mobility training.

Service strategies must support the individual’s employment outcomes. Prevocational services can occur in facility-based sites or in non-facility-based sites.

DDDS may authorize a higher rate for the provider when it employs ASL fluent or ASL-certified staff to directly support individuals who use sign language to communicate or when it employs Registered Behavior Technicians (RBTs) to support individuals who have an increased behavioral support need.

**TIPS**

* Only agencies approved to provide day habilitation services may provide community participation activities.

**SLIDE #4**

**PERSONAL CARE SERVICES**

Personal Care services assist individuals with activities of daily living (ADL), instrumental activities of daily living (IADL), and/or health-related tasks. This assistance may take the form of hands-on assistance (performing a task for the person) or cuing to prompt the participant to perform a task. Personal care services may occur on an episodic or continuing basis. Health-related services may include skilled or nursing care and medication administration to the extent permitted by State law.

Agencies may provide Personal Care services under the Lifespan Waiver and/or the Pathways to Employment State Plan Amendment.

Lifespan Waiver

Personal care can be provided in the participant's residence (family home, own home, or apartment), with or without family caregivers present, or in community settings and may not supplant other Waiver or state plan covered services. Individuals who are receiving residential habilitation in a provider-managed setting may not receive personal care services.

Personal Care includes a self-directed option that will be managed by a broker under the Agency With Choice model.

The total expense for Personal Care and Respite services, combined, is limited to $3,500 per waiver participant per waiver year.

Pathways

Individuals receive assistance with ADLs as needed to support them getting ready for work, getting to work (escort service), or at the workplace. This service includes stand-by assistance in the workplace to individuals who may require support on an intermittent basis due to a disability or medical condition. Individuals may receive assistance with IADLs that are essential to their health and welfare.

**RESPITE SERVICES**

Respite services provide short-term assistance to people who provide ongoing support to an individual with a disability because the caregiver needs relief OR because the person who normally provides care is absent.

The individual may receive In-Home Respite services in their residence (family home, own home, or apartment) or may receive Out-of-Home Respite services in community settings. Out-of-Home respite may be planned or may be used for individuals who are experiencing a short-term crisis.

Individuals may receive out-of-Home respite in the following settings: Medicaid-certified public ICF-IID, licensed Neighborhood Group Home, DDDS-credentialed Community Living Arrangement, shared living arrangement, overnight camp, or other emergency temporary living arrangement that meets DDDS standards.

Respite is not available to individuals receiving Residential Habilitation in a provider-managed setting.

Respite includes a self-directed option that will be managed by a broker under the Agency With Choice model.

The total payment for Respite and Personal Care services, combined, is limited to $3,500 per waiver participant per waiver year.

**TIPS**

* Providers must offer personal care services using a capacity-based approach, meaning that staff encourages and supports service recipients to maximize their remaining strengths and abilities.

**SLIDE #5**

**RESIDENTIAL HABILITATION**

Residential services may be available to individuals whose health and safety conditions pose a serious risk of immediate harm or death to the individual or others, who are the victims of abuse or neglect, or who have experienced the loss of a caregiver or a change in the caregiver's status that prevents them from meeting the needs of the individual and that puts them at risk of homelessness. Services must be provided in the most integrated setting to meet the individual's needs.

Residential services can include assistance with acquisition, retention, or improvement in skills related to activities of daily living and the social and adaptive skills necessary to enable the individual to reside in a non-institutional community-based setting.

Residential Habilitation providers must actively promote and be capable of providing opportunities for full access to participate in the greater community for those waiver participants that express a desire for such access and for whom it would not be contrary to their health and safety needs as articulated in their person-centered plan. The provider must demonstrate that they support individuals to exercise their option to achieve their desired level of participation in the community. To the greatest extent possible, providers should offer individuals exposure to a broad array of community experiences so that they can make informed choices about what they like and what they don’t like.

Providers of all types of Residential Habilitation may perform any of the following service activities:

* Self-advocacy training that may include training to assist in expressing personal preferences, self-representation, and individual rights and to make increasingly responsible choices.
* Independent living training may include personal care, household services, child and infant care (for parents themselves who are developmentally disabled), and communication skills such as using the telephone.
* Cognitive services may include training involving money management and personal finances, planning and decision making.
* Implementation and follow-up from mental health counseling or behavioral or other therapeutic interventions by residential staff, under the direction of a professional, that are aimed at increasing the overall effective functioning of an individual.
* Emergency Preparedness
* Community access services that explore community services available to all people, natural supports available to the individual, and develop methods to access additional services/supports/activities desired by the individual.
* Supervision services may include a person safeguarding an individual with developmental disabilities and/or utilizing technology for the same purpose.
* Transportation is a component part of Residential Habilitation Services for Neighborhood Group Homes and Community Living Arrangements.

Each participant’s assessment determines the number of hours of service, regardless of setting.

**RESIDENTIAL SITES**

All residential sites must comply with regulations implementing Medicaid home and community-based services waiver under section 1915(c) of the Social Security Act and the Centers for Medicare and Medicaid Services (CMS) Home and Community-Based Settings Final Rule.

Neighborhood Group Home

A Neighborhood Group Home is a residence for no more than 4 individuals that is fully integrated into the community and offers 24-hour supports to individuals with intellectual and/or developmental disabilities. Neighborhood Group Homes physically located in Delaware must meet all Delaware Regulations for Neighborhood Homes for Persons with Developmental Disabilities in accordance with Delaware Administrative Code Title 16, Section 3310. The Department of Health and Social Services (DHSS) Division of Health Care Quality (DHCQ) licenses and oversees neighborhood group homes.

Community Living Arrangement

A Community Living Arrangement is a supervised or staffed apartment setting for no more than 4 individuals that is fully integrated into the community and offers 24-hour supports to individuals with intellectual and/or developmental disabilities.

Shared Living Arrangement

Services provided under a Shared Living arrangement include personal care and supportive services provided in a DDDS-certified private home by a principal care provider who lives in the home. DDDS recommends only 1 individual per shared living site, though DDDS will consider exceptions in rare situations.

Medical Residential Habilitation

Medical Residential Habilitation is a type of residential service that includes the provision of direct, skilled nursing services and habilitative services and supports that enable a participant to acquire, retain, or improve skills necessary to reside in a community-based setting. Medical Residential Habilitation supports each resident’s independence and full integration into the community and ensures each resident’s choice and rights.

Medical Residential Habilitation must be medically necessary and provided in accordance with an order by a physician, physician assistant, or nurse practitioner and in accordance with the person-centered plan.

A participant must meet the following requirements to receive medical residential habilitation:

* They must have a medical diagnosis and treatment needs that justify the provision of direct skilled nursing services that must be provided directly by a registered nurse (RN) or a licensed practical nurse (LPN) operating within his/her scope of practice under state law.
* They must need daily nursing services at a level which cannot be provided through pre-scheduled skilled nursing visits, and which cannot be more cost-effectively provided through a combination of waiver services and other nursing services available under the state plan

Medical Residential Habilitation must be provided in an appropriately licensed or DDDS-certified residential setting, including a neighborhood group home, a supervised or staffed apartment (community living arrangement), or a shared living arrangement.

The Medical Residential Habilitation provider must provide the level of services and supports specified in the person-centered plan, including skilled nursing services, up to 24 hours per day 7 days a week when the participant is not attending work or other day services, based on the individualized needs of each participant. However, a nurse is not required to be present in the home during those time periods when skilled nursing services are not medically necessary.

**COMMUNITY TRANSITION**

Community Transition services help individuals approved for residential habilitation services or supported living services who are moving from an institution to a community setting or from a provider-operated setting to their own private residence in the community. For individuals who have limited resources, Community Transition helps with initial set-up of their living environment. The individual’s person-centered plan must include transition services and DDDS must approve expenses in advance. DDDS limits Community Transition services to $4,000 per participant for 10 years.

DDDS only authorizes Residential Habilitation providers and approved Supported Living providers to offer Community Transition services.

**TIPS**

* Read the latest approved Lifespan Waiver application, the DDDS Provider Standards, the DDDS Provider Specific Policy, the HCBS Settings Final Rule, and Delaware Administrative Code Title 16, Section 3310 prior to beginning your application.
* Because the provider authorization process can be lengthy, consider not encumbering program property prior to receiving approval as a DDDS provider and receiving provider authorization from DMMA.

**SLIDE #6**

**SUPPORTED EMPLOYMENT (INDIVIDUAL)**

Individual Supported Employment Services are provided to participants who, because of their disabilities, need ongoing support to obtain and maintain a job in competitive or customized employment, or self-employment position in an integrated work setting in the general workforce.

Because of the intensive and individualized nature of this service, providers must maintain a 1:1 participant to staff ratio.

Supported individual employment may include support to establish or maintain self-employment, including home-based self-employment. Supported employment services may include any combination of the following activities: vocational/job-related discovery or assessment, person-centered employment planning, job placement, job development negotiation with prospective employers, job analysis, job carving, training and systematic instruction, job coaching, on the job employment supports, social skills training, benefits support, training and planning, transportation, asset development and career advancement services, implementation of assistive technology, and other workforce support services including services not specifically related to job skill training that enable the waiver participant to be successful in integrating into the job setting.

DDDS may authorize a higher rate for the provider when it employs ASL fluent or ASL-certified staff to directly support individuals who use sign language to communicate or when it employs Registered Behavior Technicians (RBTs) to support individuals who have an increased behavioral support need.

Agencies may provide Individual Supported Employment services under the Lifespan Waiver and/or the Pathways to Employment State Plan Amendment.

**SUPPORTED EMPLOYMENT (GROUP)**

Supported Employment Small Group Employment Support are services and training activities provided in regular business, industry, and community settings for workers with disabilities. Examples include mobile crews and other business-based small work groups. Small Group Supported Employment does not include vocational services provided in facility-based work settings, enclaves, or other non-competitive or non-integrated job placements.

Small group employment must promote integration into the workplace and interaction between participants and people without disabilities in those workplaces. The outcome of this service must be sustained employment and work experience leading to further career development.

Supported employment small group employment supports may include any combination of the following activities:

* vocation/job related discovery or assessment
* employment planning
* job placement
* job development
* social skills training
* negotiation with prospective employers
* job analysis
* training and systematic instruction
* job coaching
* benefits supports
* training and planning
* transportation
* career advancements services.

Other workplace support services may include services not specifically related to job skill training that enable the waiver participant to be successful in integrating into the job setting.

Providers must encourage and support individuals to achieve their desired level of participation in the community. To the greatest extent possible, individuals should be exposed to a broad array of community experiences so that they can make informed choices about what they like and what they don’t like.

DDDS may authorize a higher rate for the provider when it employs American Sign Language (ASL) fluent or ASL-certified staff to directly support individuals who use sign language to communicate or when it employs Registered Behavior Technicians (RBTs) to support individuals who have an increased behavioral support need.

Agencies may provide Group Supported Employment services under the Lifespan Waiver and/or the Pathways to Employment State Plan Amendment.

Lifespan Waiver

The staff to participant ratio for Lifespan Waiver Small Group Supported Employment must range from 1:2 to 1:8.

Pathways to Employment State Plan Amendment

The staff to participant ratio for the Pathways to Employment Small Group Supported Employment must range from 1:2 to 1:4.

**CAREER EXPLORATION AND ASSESSMENT**

Career Exploration and Assessment is a person centered, comprehensive employment planning and support service that assists program participants to obtain, maintain, or advance in competitive employment or self-employment. It is a focused, time limited service engaging a participant in identifying a career direction and developing a plan for achieving competitive, integrated employment at or above the state’s minimum wage.

This service results in a report documenting the participant’s stated career objective and a career plan, including any necessary education, training, or skill development. This service may include conducting community-based career assessment.

Services must support each participant’s communication needs including, but not limited to, age-appropriate communication and translation services for participants who are of limited English proficiency or who have other communication needs requiring translation.

Transportation that allows the participant to engage in opportunities such as job shadowing and community-based assessments is a key component of this service.

**SLIDE #7**

**ASSISTIVE TECHNOLOGY**

Assistive technology means an item, piece of equipment (including hearing aids), or product system, whether acquired commercially, modified, or customized, that increases, maintains, or improves functional capabilities of participants.

As a service, Assistive Technology directly assists a participant in the selection, acquisition, or use of an assistive technology device and includes:

* evaluating the assistive technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the participant in their customary environment
* purchasing costs, leasing costs, or otherwise providing for the acquisition of assistive technology devices for a participant
* selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices
* coordinating and using necessary therapies, interventions, or services with assistive technology devices
* training, demonstrating, or providing technical assistance for the participant, family members, guardians, advocates, or authorized representatives of the participant; and
* training, demonstrating, or providing technical assistance for professionals or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of a participant.

Participants must explore off the shelf products before DDDS will approve the purchase of any specialized assistive technology equipment. DDDS limits participants to the lowest cost option that will meet the person's needs considering the timeliness of delivery to meet an immediate need and the availability of warranties. Providers should include refurbished equipment in determining the lowest cost option.

Agencies may provide Assistive Technology services under the Lifespan Waiver and/or the Pathways to Employment State Plan Amendment.

Lifespan Waiver

Though limited exceptions apply, DDDS limits the purchase of equipment to $500, including maintenance, every 3 years.

Pathways

As a service, Assistive Technology directly assists a participant in the selection, acquisition, or use of an assistive technology device to increase their independence *in the workplace*. Professional evaluations should focus on determining the need for technology and identify the appropriate technology to support the participant in an employment setting. Assistive technology may include augmentative communication devices, adapted watches, high and low tech adaptive/assistive equipment such as video magnifiers, Braille displays, and hardware and software.

Though limited exceptions apply, DDDS limits this service to $10,000 for the participant’s lifetime. This amount includes replacement parts and repair when it is more cost effective than purchasing a new device.

**SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES**

Specialized medical equipment and supplies include the following items specified in the individual’s person-centered plan:

* devices, controls, or appliances that enable participants to increase their ability to perform activities of daily living
* devices, controls, or appliances that enable the participant to perceive, control, or communicate with the environment in which they live
* items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items
* such other durable and non-durable medical equipment not available under the State plan that is necessary to address participant functional limitations
* necessary medical supplies not available under the State plan.

DDDS only provides Specialized Medical Equipment and Services not otherwise covered by Medicaid to individuals ages 21 and over.

**HOME OR VEHICLE ACCESSIBILITY ADAPTATIONS**

Home Modifications

Home modifications include physical adaptations to the private residence of the participant or the participant’s family that are necessary to ensure the health, welfare, and safety of the participant or that enable the participant to function with greater independence in the home. The participant must include home modifications in their person-centered plan.

Such adaptations include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or the installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies that are necessary for the welfare of the participant. This includes backup power generators that are necessary to supply power to medical equipment and are determined to be medically necessary by physician's order.

Modifications must comply with applicable building codes and must have building permits where required.

Vehicle Adaptations

Vehicle adaptations enable the participant to integrate more fully into the community and ensure the health, welfare, and safety of the participant. They include adaptations or alterations to an automobile or van that is one of the waiver participant’s primary means of transportation to accommodate the special needs of the participant.

DDDS excludes the following activities:

* adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual
* purchase or lease of a vehicle
* regularly scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications.

Limited to $6,000.00 per member every 5 years, inclusive of both services.

**ORIENTATION AND MOBILITY**

Orientation and Mobility provides one-on-one training to participants to develop the necessary skills to travel independently and safely. Staff may include training on how to use white canes, guide dogs, or other equipment. Orientation and Mobility instruction is a sequential process where visually impaired individuals are taught to utilize their remaining senses to determine their position within their environment and to negotiate safe movement from one place to another.

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**TIPS**

* Home and Vehicle Modifications may not be furnished to adapt living arrangements that are owned or leased by providers of waiver services.
* The participant or their support team must obtain bids or estimates from at least two vendors so that DDDS can select the most reasonable bid based on the work to be performed and the time necessary to complete the work
* Providers must issue a warranty for their work for one year from the date of purchase.

**SLIDE #8**

**WELLNESS**

The National Wellness Institute promotes [Six Dimensions of Wellness](https://nationalwellness.org/resources/six-dimensions-of-wellness/) that build a holistic sense of wellness and fulfillment:

* Occupational
* Physical
* Social
* Intellectual
* Spiritual
* Emotional

The physical sphere emphasizes that people achieve optional wellness through the combination of physical activity and good nutrition habits. This sphere also includes self-care, appropriately using and successfully navigating the medical system, caring for minor illnesses, and health promotion and disease prevention.

The emotional sphere focuses on managing feelings and behaviors, coping effectively with stress, and maintaining satisfying relationships with others. This sphere also includes understanding and managing behavioral health diagnoses successfully.

The World Health Organization (WHO) defines wellness as a “state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.” Further, the WHO defines [mental health](https://www.who.int/data/gho/data/major-themes/health-and-well-being) as a “state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community.”

The Lifespan Waiver includes Nurse Consultation and Behavioral Consultation to support waiver participants achieve optimal health and wellness.

**SLIDE #9**

**BEHAVIORAL CONSULTATION**

DDDS providers use the Positive Behavior Support model when providing Behavioral Consultation services.

Behavioral Consultation results in individualized behavior plans and strategies for waiver participants who have significant behavioral difficulties that jeopardize their ability to remain in the community due to their inappropriate responses to events in their environment. Behavioral Consultation is designed to:

* decrease challenging behaviors while increasing positive alternative behaviors
* assist participants in acquiring and maintaining the skills necessary to live independently in their communities and avoid institutional placement.

The Behavioral Consultation service includes:

* conducting a functional behavioral assessment
* developing and monitoring a behavior support plan
* implementing and monitoring the behavioral support plan to enable individuals, families, and service providers to effectively support the waiver participants in attaining their goals
* helping waiver participants access mental health practitioners
* acting as a liaison among the participant, their support team, and service providers
* preparing necessary documentation for oversight committees

Effective October 1, 2022, DDDS has 3 tiers for Behavioral Consultation services:

* Tier One: Bachelor’s degree in behavioral or social science or related field
* Tier Two: Master’s degree in behavioral or social science or related field, or Board-Certified Assistant Behavior Analyst (BCaBA), or Master of Social Work (MSW), or Licensed Clinical Social Worker (LCSW)
* Tier Three: Doctorate degree in behavioral or social science or related field, or Board-Certified Behavior Analyst (BCBA), or Board-Certified Behavior Analyst-Doctoral (BCBA-D), or Doctorate in Social Work (DSW), or Doctorate in Psychology (Psych D)

**BEHAVIORAL CONSULTATION TIPS**

* Behavior Consultation staff must be proficient in positive behavior supports, DDDS-approved behavior techniques, DDDS policies and procedures regarding restraints and restrictive interventions, and DDDS policies and procedures regarding critical incidents.
* Consider developing a robust staff orientation, training, and development program to ensure your staff is current on best practices, proper techniques, and DDDS policies and procedures.
* Carefully review the Lifespan Waiver provider requirements for this service.
* Ensure your agency has the infrastructure to support in-person service delivery (transportation, communication devices, computer access, etc.).
* DDDS may ask your agency to participate in work teams to review policies and procedures and identify best practices.
* There is a lot of documentation and staff should be fluent in entering and retrieving data electronically.
* Budget cautiously – participants have choice in selecting providers and you won’t know which level of service each participant needs

**SLIDE #10**

**NURSE CONSULTATION**

Nurse Consultation consists of coordinating and monitoring the health care needs for waiver participants to facilitate the individual’s independence and inclusion in their community. These individuals live in community settings and have a prescribed medical treatment plan. This consultation also assists caregivers in carrying out individual treatment/support plans.

Nurse Consultation provides the clinical and technical guidance necessary to support the individual in managing his/her healthcare needs. This includes conducting comprehensive assessments, reviewing provider health records, monitoring health services, providing health-related training, and participating in person-centered planning meetings.

Effective October 1, 2022, DDDS has 3 tiers for Nurse Consultation services:

* Tier One: Licensed Registered Nurse
* Tier Two: Licensed Registered Nurse with two or more years Intellectual/Developmental Disability (IDD) experience
* Tier Three: Licensed Registered Nurse with two or more years Intellectual/Developmental Disability (IDD) experience and national certification with specialty in intellectual/Developmental Disability (IDD).

**NURSE CONSULTATION TIPS**

* Nurse Consultants provide training to participants, families, and staff on a variety of health-related topics. This requires explaining medical and health language in ways that everyone can understand and make informed decisions based on the information.
* “Life happens” so your agency must have an on-call | after-hours system easily accessible by participants, caregivers, and providers.
* The participant is the center of everything we do, so your agency staff may be required to attend care plan meetings after normal business hours.
* If you don’t document it, it didn’t happen. There is a lot of documentation and staff should be fluent in entering and retrieving data electronically.
* Nurse Consultants spend a good bit of time in the field visiting participants and families and monitoring provider services.
* Determine how many participants you want to support and which counties you want to support.
* The Community Navigators give families a list of Nurse Consultation providers from whom to select. You should be prepared to serve individuals with a variety of needs.
* Carefully review the Lifespan Waiver provider requirements for this service.
* Ensure your agency has the infrastructure to support in-person service delivery (transportation, communication devices, computer access, etc.).
* DDDS may ask your agency to participate in work teams to review policies and procedures and identify best practices.

**SLIDE #11**

**SUPPORTED LIVING**

Supported Living is a highly individualized service and is provided in a non-provider-managed residence that is owned or leased by the waiver participant.

Supported living encourages maximum physical integration into the community and is designed to assist the individual in reaching his or her life goals in a community setting.

The person-centered plan must describe the amount and type of supports that the individual needs to live successfully in the community. Daily hours of support vary based on the needs of the individual but cannot exceed 40 hours per week. Supported living is provided on a one-to-one basis.

Supported Living helps the individual with acquiring, retaining, or improving in skills that enhance independence. For example, the individual may want to learn a new skill or may have some proficiency in certain parts of a skill but want to learn how to complete the entire task independently.

Individuals may want to become more independent in such areas as:

* Activities of daily living
* Socialization and adapting to new environments
* Locating and scheduling appointments
* Mobility
* Shopping
* Community involvement
* Acquiring and caring for a pet

Supported Living includes self-advocacy training to assist the participant in expressing personal preferences, self-representation, and individual rights and to make increasingly responsible choices.

**SLIDE #12**

**BENEFITS COUNSELING & FINANCIAL COACHING**

**BENEFITS COUNSELING**

Benefits counseling will provide information to Pathways to Employment participants regarding available benefits and assist them to understand options for making an informed choice about going to work while maintaining access to necessary healthcare and other essential benefits.

This service will assist participants to understand the work incentives and support programs available and the impact of work activity on those benefits. This service will assist participants to understand their benefits supports and how to utilize work incentives and other tools to assist them to achieve self-sufficiency through work.

Providers must support the participant’s communication needs including age-appropriate communication, translation/interpretation services for participants who have limited-English

proficiency or who have other communication needs requiring translation, and assistance with the provider’s understanding and use of communication devices used by the participant.

This service is in addition to information provided by the Aging and Disability Resource Centers

(ADRC) or other entities providing information regarding long-term services and supports.

**FINANCIAL COACHING PLUS**

Financial Coaching Plus uses a financial coaching model to assist participants in establishing

financial goals, creating a plan to achieve them, and providing information, support, and resources needed to implement the financial plan goals. The financial coach assists the participant seeking to improve his/her financial well-being to improve economic self-sufficiency.

Financial Coaching Plus includes developing a personal budget and identifying reliable and

trusted savings, credit, and debt management programs that promote financial stability. Providers must customize the content and direction of the coaching to respond to the participant’s financial goals. Financial coaching provides 1:1 service to the over a time-limited series of sessions and follow-up to increase the opportunity for self-directed behavior skills learning.

**SLIDE #13**

As a final note in your process of applying to become a DDDS network service provider, we encourage you to read and become familiar with the documents necessary to submit a successful application. These include:

The 1915c HCBS Lifespan Waiver

The 1915i Pathways to Employment State Plan Amendment

DDDS Provider Standards

Health Care Quality Regulations for Neighborhood Homes and for Family Care Homes

Pathways to Employment HCBS Provider Specific Policy

DMAP Provider Manual

The Provider Manual contains links to these documents.