Revision Table

Revision Date	Sections Revised	Description
9/23/11		Original
10/6/11	7.0	Added

	DELAWARE HEALTH AND SOCIAL SERVICES Division of Services for Aging and Adults with Physical Disabilities	Adult Foster Care (Rest Residential Care) Level II Service Specification

1.0 SERVICE DEFINITION

1.1 Adult Foster Care (AFC) provides placement in foster care (Rest Residential Care Homes) for those adult participants who require assistance with activities of daily living (ADLs). The individuals require assistance with instrumental activities of daily living (IADLs.

1.2 These individuals are not fully capable of living independently, but are able to remain in the community with the support provided in a rest residential care setting.

1.3 There are two types of rest residential care homes:

1.3.1 Unlicensed home: Homes that have only one (1) resident.

1.3.2 Licensed homes: Homes that have two (2) or more residents.

1.3.3 These homes must comply with state and local laws and regulations applicable under the Division of Long Term Care Residents Protection, Title XXXI. All clients in this program will require a waiver.

2.0 SERVICE GOAL

2.1 Rest Residential Care homes (Adult Foster Care) are to provide room and board, as well as the necessary supervision and care to allow the participant to maintain the greatest level of independence as possible within a residential setting.

3.0 SERVICE AREA

3.1 Adult Foster Care is available statewide. Providers may apply for specific areas throughout the state in which to service.

4.0 ELIGIBILITY

4.1 The Division of Services for Aging and Adults with Physical Disabilities will determine eligibility for all participants and will process all referrals.

4.2 Individuals must be:

4.2.1 Residents of the state of Delaware.

4.2.2 A U.S. Citizen or legal alien (DSAAPD staff must verify Alien Status)

4.2.3 At least 18 years of age and older.

4.2.4 A Supplemental Security Insurance (SSI) recipient and eligible applicant for the SSI optional state supplement

4.2.5 Able to meet the eligibility criteria established by the Division of Services for the Aging and Adults with Physical Disabilities (DSAAPD) and be assigned an AFCII level of care (LOC) by DSAAPD.

4.2.6 Able to self-administer medications or assistance by proper staff.

4.2.7 Able to meet eligibility criteria or receive a waiver established in accordance with Long Term Care Residency Protection rules and regulations (if in a licensed home)

5.0 SERVICE STANDARDS
(Refer to Title XXXI Rest (Residential) Home Regulations, if licensed)

5.1 The service provider must recruit and maintain an inventory of licensed and unlicensed foster care homes that offer placement in a variety of socio-economic levels and cultural backgrounds.

5.2 The service provider must maintain homes with sponsors that:

5.2.1 Provide assistance with activities of daily living. Foster support by reminding participants to maintain their medication schedule as directed by the resident's physician. The sponsor cannot administer or assist with administration of medication unless they have been approved.

5.2.2 Assist the participant in maintaining medical appointments, provide meals, and maintain a clean and sanitary home.

5.2.3 Are in adequate condition and have working electrical, plumbing and heating facilities to maintain the health, welfare, and safety of the participant.

5.2.4 Maintain the participant in the same home that the sponsor resides or owns.

5.3 The service provider must evaluate the prescreened participant to determine suitable placement

5.4 The service provider must place an accepted, eligible individual in an AFC home within thirty (30) calendar days of the referral, unless the DSAAPD Case Manager grants and exemption for an extended timeline.

5.5 The service provider must notify the DSAAPD Case Manager within thirty (30) calendar days of the referral with a decision accepting or declining the participant for AFC service.

5.6 The provider must notify the DSAAPD Case Manager in writing, outlining the reason(s) for denial if the participant is denied service.

5.7 The service provider must develop a plan for the participant. It must include a contingency plan outlining alternative measures for continued care if the sponsor becomes unable to provide supervisory care in the home. A copy will be forwarded to the DSAAPD Case Manager within ten (10) working days.

5.8 The service provider must present continuous support and case management to the participant and sponsor.

5.9 The service provider must conduct in-home quarterly monitoring visits, a minimum of four (4) visits per fiscal year. The provider will conduct one (1) of the four (4) required visits as an **unannounced** visit.

5.10 The service provider must notify and coordinate with the DSAAPD Case Manager to address any changes regarding the participant's behavioral/mental status that might impact or jeopardize the participant's AFC placement or eligibility.

5.11 The service provider must provide sponsors with on-going training throughout the year that supports medical and social awareness and sensitivity to their adult foster care participants.

5.12 The service provider must notify the DSAAPD Registered Nurse within two (2) working days of any health changes or changes in behavior that might impact the participant's placement in AFC. This includes all hospitalizations and nursing home placements.

5.13 The DSAAPD Registered Nurse must re-determine the participant's level of care and appropriateness to return to their adult foster care setting.

5.14 The sponsor will respect the rights and privacy of the participant and allow the provider and the DSAAPD Case Manager or Registered Nurse to have private conversations with the participant.

5.15 If the participant is transferred to another AFC home, the provider must:
5.15.1 Contact the DSAAPD Case Manager prior to the transfer.
5.15.2 Notify the DSAAPD Case Manager of any changes in income or resources that might impact the participant's placement in AFC.
5.15.3 Develop a transition plan to prepare the participant, his/her support network, and sponsor for placement.
5.16 If the participant becomes unsuitable for AFC placement, the provider must:
5.16.1 Notify and coordinate with the DSAAPD Case Manager, and/or the DSAAPD Registered Nurse
5.16.2 Explain how the participant meets discharge criteria
5.16.3 If the reason(s) for termination are unrelated to the participant's medical condition, the provider must present a written explanation, as well as the steps taken to resolve the issues, prior to termination.
5.17 The provider must give the DSAAPD Case Manager a thirty (30) day (minimum) notice of termination.
5.18 If the reason for AFC termination is substantiated, the provider and the DSAAPD Case Manager will implement a termination plan, or alternative placement plan.

6.0 INVOICING REQUIREMENTS

6.1 Providers must invoice DSAAPD using Invoicing Workbook (IW-006) and pursuant to the DSAAPD Policy Manual for Contracts, Policy X-Q.
6.2 The following information will also be included on the invoices:
6.2.1 Itemized list of reimbursable expenses
6.2.2 Total DSAAPD funds expended
6.3 Reimbursement to provider is for maintaining all service standards of the program. The participant is responsible for the monthly payment of care to the Rest Residential sponsor. DSAAPD is not responsible for any reimbursement to the Rest Residential sponsors.

7.0 QUALITY ASSURANCE

7.1 Provider will furnish reports and data as requested by DSAAPD staff and staff of Long Term Care and Resident's Protection..