

Title:	Attendant Care and Parents with I/DD		
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Overview:

The purpose of this Worker Guide is to provide Services Coordinators and Personal Agents more information on offering and authorizing in-home supports for people with Intellectual and/or Developmental Disabilities (I/DD) enrolled in services who are also parents of minor children.

Guideline(s) that apply:

Everyone has unique support needs and circumstances. Parents with I/DD can receive attendant care for their activities of daily living (ADL) and instrumental activities of daily living (IADL) just like people with I/DD who are not parents. This worker guide explains how to include an individual’s role as a parent in the planning process and authorize services that meet their disability-related needs alongside parenting and everyday life activities.

Attendant care authorized for a person with I/DD who is a parent cannot be used for direct support to their child, to provide parenting advice, or for childcare with or without the parent present.

Attendant Care: ADL and IADL Supports:

Below are examples to consider when exploring how attendant care supports may be provided to address the parent’s needs.

	Appropriate	Not Appropriate
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<p>ADL Supports</p>	<p>ADL supports needed for the parent at home, regardless of whether their child is present such as prompts, or reminders related to their personal hygiene routine while the child is present or helping the parent to chop vegetables in preparation for a family meal.</p> <p>Any ADL supports a parent needs in the community, including when the activities relate to their child. This could look like assisting the parent to access the local library or to access a park for a play date with their child. It may include providing supports while a parent attends a parenting class or appointment at the local Women, Infants and Children (WIC) office.</p> <p>ADL supports a person needs at a doctor appointment related to their own care, or pregnancy, postpartum, or pediatric care such as support to administer the person's medication.</p>	<p>Any ADL support provided directly to the child such as feeding, diapering, even if the parent is able to direct the support.</p>
<p>IADL Supports</p>	<p>Assistance with expressive and receptive communication with others. This could include people associated with the child, such as a doctor, teacher, or parenting educator and be in a variety of settings such as during medical appointments, or when the parent and child are meeting up with other parents and children for a play activity.</p> <p>Making a grocery list that includes options appropriate/preferred by the person's child.</p>	<p>Any IADL support provided directly to the child, such as helping the child to clean their bedroom, even if the parent is able to direct the support.</p>

	<p>Assistance with laundry, including the child's laundry as is age appropriate.</p> <p>Light housekeeping, including supporting the parent in cleaning up after a baby or young child. An example of this could be helping the parent to create a visual tool so they can see what household chores they need to do, for themselves and for the child, and check off when they are done.</p> <p>Emergency preparedness plans for the parent and any people for whom they are responsible.</p> <p>Basic budgeting for the household Assisting the parent with filling out paperwork related to themselves or the child, such as an application for Head Start or WIC.</p>	
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Transportation:

There may be times when someone would like to receive support in their community and will also need to have their child with them such as while grocery shopping, attending a medical appointment, or going to the park. The same rules that apply to transportation of any person using in-home attendant care services also apply when the person has their child with them.

For community transportation: as with other attendant care supports when the parent has an ADL/IADL related need the provider may be reimbursed for transportation of the parent with their child during these activities. Attendant care providers can have conversations with the parent to ensure there is a safe and comfortable means to transport the child such as with a car seat.

For medical transportation: Medical transportation is a different service available through OHP and is not a reimbursable service for a PSW or DSP.

A parent may choose to have their provider attend medical appointments that are for them or their child to support the parent with their ADL/IADL needs. However, this mileage cannot be reimbursed. A provider can still support the person to plan for and attend medical appointment by helping them call to schedule medical transportation, or plan to access other means of transportation. The provider can discuss with the person the transportation needs of their child, such as having the ability to use the child’s car seat and support the person to ensure the means of transportation they choose will accommodate these needs.

Information and Referral and Attendant Care:

Case management services also often include information and referral to activities and resources in the community to help meet the needs and desired outcomes of the person. This can include referrals related to someone’s goal of parenting their child such as information on parenting classes, child related community activities, or accessing their local WIC office.

If someone has an assessed need for ADL/IADL support prior to or during these activities, they may receive support from their attendant care provider. To do so, these support needs must be reflected in the functional needs assessment and noted in the person’s ISP.

Individual Service Plan (ISP) Example:

The following is an example of how a desired outcome in someone’s Individual Support Plan (ISP) might be written if they have a personal goal around parenting their child. This example outlines the desired outcome and key steps in meeting this goal.

Desired Outcomes <i>Base desired outcomes on what is important to Rachel that she wants support to work towards.</i>				
Desired outcome:		Rachel learns parenting skills and gets to know other parents in the community, so she can care for her new baby and have friends she can relate to.		
What supports this outcome?		Attendant Care		
Key step/ goal	Who is responsible?	Timelines	Where to record progress	Additional implementation strategies expected?

<p>Rachel will create a new routine for shopping, housekeeping, sleeping, and other tasks, and adjust it as needed. Rachel needs support to create lists, schedules, and other planning tools to help her keep organized and on track with her tasks. She may need reminders throughout the day to refer to these tools to start or maintain tasks. Occasionally Rachel may need physical support such as help making beds or vacuuming to ensure they are completed fully. Rachel will also need support with budgeting, locating items in the store, planning, and preparing meals for her and her family.</p>	<p>Rachel, Sylvia (Rachel's mother), Rick (Rachel's partner), and Pam (Rachel's provider)</p>	<p>During Rachel's plan year</p>	<p>Progress notes and reports</p>	
<p>Rachel will take parenting classes and access WIC. She will need support to research and identify the class of her choice as well as plan and budget for costs of the class and transportation to</p>	<p>Rachel, Sylvia, Rick and Pam</p>	<p>During Rachel's plan year</p>	<p>Progress notes and reports</p>	

<p>get there. She will also need support to locate the local WIC office and how to access. Rachel will need ongoing support to understand and complete any paperwork she may need to apply for and maintain her benefits.</p>				
<p>Rachel will attend infant/toddler story time at the library to get to know others in her community. She will need support to identify when this activity occurs and plan how to access it. Rachel will need reminders of the library rules and support to communicate with others while attending this activity with her child. Rachel may also need cues or reminders on how to address her child's needs during the activity.</p>	<p>Rachel, Sylvia, Rick and Pam</p>	<p>During Rachel's plan year</p>	<p>Progress notes and reports</p>	

Note: the provider (DSP or PSW) will not teach Rachel parenting skills or take care of Rachel's child directly. Instead, the role of the provider is to offer ADL and IADL supports that help Rachel to increase her skills, live independently and access community resources and as a result, make progress toward her desired outcome.

Service Agreement Example:

The following section gives an example of how a service agreement might be written if someone has a desired outcome around parenting in their ISP. As in any service agreement, one that includes services for parents with I/DD must list the specific services that will meet the assessed needs noted in the person's ISP.

Service and Proc Code:	OR526 Attendant care, ADL/IADL				
Rate of pay:	\$41.13	Units authorized:	100	Frequency:	Monthly
Description of Medicaid tasks authorized					
<i>Must include the areas from the ISP that the PSW/agency will be performing:</i>					
<u>OR526 Attendant care desired outcome:</u>					
Rachel learns parenting skills and gets to know other parents in the community, so she can care for her new baby and have friends she can relate to.					
<ul style="list-style-type: none">• Provider will offer verbal cues and occasional hands-on assistance for light housekeeping tasks such as dishes, sweeping, wiping surfaces, vacuuming, and organizing clutter.• Provider will offer verbal cues and written instructions so Rachel can complete all steps for the laundry for herself and her daughter on a weekly schedule.• Provider will assist Rachel with creating a daily routine, setting alarms on her cell phone, and maintaining a visual calendar of appointments for herself and her baby.• Provider will provide set-up assistance (writing lists, budgeting, using WIC app) and cues for grocery shopping.• Provider will support Rachel to plan her route and access public transportation to and from her parenting classes and provide communication assistance when needed during the class.• Provider will offer cues for meal preparation including assistance in identifying ingredients, measurements, and cooking time and temperature. Provider will offer hands-on assistance with chopping ingredients as needed.					

Note: A desired outcome is noted in the service agreement because Rachel has a desired outcome around her parenting goal. But there does not have to be a desired outcome related to parenting for Rachel to receive supports.

Questions:

Can a provider also support with relief care, schoolwork, or babysitting?

Relief care can only be used if the child is eligible and receiving IDD services. A provider cannot be paid to provide babysitting or tutoring services.

What if someone needs hand-over-hand, set up or demonstration support when caring for their child?

This would be allowable if it is an assessed need, and the person is present to receive the support. If these criteria are not met, then it would be considered support provided directly to the child and not allowable.

What if an individual is temporarily incapacitated? would a PSW or DSP be able to provide some care to the child at the direction of the individual?

At this time a provider cannot provide ADL/IADL supports – neither temporarily nor ongoing -directly to a child unless the child is eligible for and receiving DD services. The provider may provide ADL/IADL support to the parent such as verbal prompting, or hand over hand assistance depending on the person's specific needs.

How do providers address support when both parents are using DD services, cohabitating and have dual responsibilities but different support needs?

Each parents' supports will look different based on their specific needs and goals. The providers working with the parents (whether they are working with one or both parents) will need to address each parent's needs based on their specific ISP. This would be true whether the provider was working individually with one parent or with both parents together in group attendant care. For example, one parent may need help scheduling and setting up appointment reminders so when the provider is working with this parent, the provider could help them make calls to schedule appointments and help them set calendar reminders on their phone. This parent may know every step of washing the baby but when they are not available to do so the 2nd parent may need to wash the baby and has an assessed need for reminders during multi-stepped tasks. When the provider is scheduled to work with the 2nd parent, they can provide verbal cues or hand over hand support to wash the child if this is the support that is needed and requested.

What if one of the parents does not qualify for services but still has support needs, declines participation in parenting and/ or is listed as a secondary support on the ISP?

Only the parent eligible for DD services can receive supports directly from a paid provider. Note the support is for the parent to support their child, not for supports provided directly to the child. The parent that is not eligible or declines DD services may still parent their child regardless if they are receiving supports from a paid provider and the parents may choose how they divide up their parenting tasks to work best for their family.

What about support for people who live in adult foster homes or group homes who have children or are expecting children?

This guide is intended for people receiving in-home services. At this time, parents may only be able to have their children live with them in children's foster homes, adult foster homes, or 24-hour residential home under exceptional circumstances. If a parent lives in a foster or residential setting, a provider may still be able to support them with ADL/IADLs related to parenting such as helping to plan and attend visitations or complete paperwork.

What if there is Child Welfare involvement with someone's child?

A provider can support a parent with Child Welfare requirements, such as planning for and accessing meetings, classes, complete paperwork and communicate, as long as those supports meet an assessed need and are noted in the person's ISP. A provider cannot duplicate services that Child Welfare is providing, and they cannot act solely on the direction of Child Welfare. A provider can be a support and advocate for someone if the person chooses.

What if I observe or someone tells me there may be suspected abuse or neglect?

All providers, including Case Management Entities staff are mandatory reporters for vulnerable populations. Children under the age of 18 (whether they receive IDD services or not) are a vulnerable population. If abuse or neglect is observed or suspected, it must be reported to the Oregon Child Abuse Hotline by calling 1-855-503-SAFE (7233).

What are the rights of parents with disabilities?

People who receive services have a right to parent their children in their homes and communities just as any other parents have this right. They have the right to make informed decisions about their care and the care of their children and to receive support to make those informed choices. Supporting someone to make informed decisions, and to receive support and resources relevant to their needs and desired outcomes, is included in the choice counseling process.

Resources:

The below resources are not an all-inclusive list but are some other agencies and organizations that may offer additional support for someone who has needs and goals around parenting. Service Coordinators and Personal Agents can share these resources with individuals and providers as needed.

The Association for Successful Parenting:
Information and resources for parents with I/DD and Providers.
<https://achancetoparent.net/>

Oregon WIC Program:
Special Supplemental Nutrition Program for Women, Infants and Children:
<https://www.oregon.gov/oha/ph/healthypeoplefamilies/wic/pages/index.aspx>

Temporary Assistance to Needy Families (TANF):
<https://www.oregon.gov/dhs/assistance/CASH/Pages/apply-tanf.aspx>

Child Abuse Information and Resources:
<https://www.oregon.gov/dhs/CHILDREN/CHILD-ABUSE/Pages/index.aspx>

Behavior Rehabilitation Services:
<https://www.oregon.gov/dhs/CHILDREN/PROVIDERS-PARTNERS/BRS/Pages/index.aspx>

CaCoon (CAreCOOrdination):
A statewide public health nurse home visiting program for children and youth.
<https://www.ohsu.edu/occyshn/cacoon-carecoordination>

Friends of the Children:
A national nonprofit organization that pairs youth with a mentor.
<https://friendsofthechildren.org/>

211 for additional resources:
<https://www.211info.org/>

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