Seniors and People with Disabilities

Cathy Cooper

Authorized Signature

Number: SPD-PT-09-003

Issue Date: 1/26/2009

Topic: Developmental Disabilities

Transmitting (check the box that best applies):

- [x] New Policy
- [ ] Policy Change
- [ ] Policy Clarification
- [ ] Executive Letter
- [ ] Administrative Rule
- [ ] Manual Update
- [ ] Other:

Applies to (check all that apply):

- [x] All DHS employees
- [ ] County Mental Health Directors
- [ ] Area Agencies on Aging
- [ ] Health Services
- [ ] Children, Adults and Families
- [x] Seniors and People with Disabilities
- [x] County DD Program Managers
- [x] Other (please specify): 24-Hour Residential Providers

Policy/Rule Title: DD 50 Capacity Change Policy

Policy/Rule Number(s):

Release No:

Effective Date:

Expiration:

References:

Web Address:

Discussion/Interpretation: Since rates established by SIS assessments connect the assessed level of a person with the licensed DD50 site size, SPD has established the following criteria and guidelines to assist in reaching a standardized implementation of site licensing. These criteria will be used for all new licensing requests as of January, 2009. In the future, the criteria will apply to all programs beginning with the licensing cycles of July 2011 forward. SIS assessments completed on people living in existing DD 50 sites will use the current license site size until the site’s licensing review after July, 2011. At that time the persons SIS level will coincide with the newly established site size if a change occurred.

Implementation/Transition Instructions: DD 50 Licensed capacity of a site will be based on the number of people living under one contiguous roof line:
• Homes will be licensed by contiguous roof line capacity. This means that a duplex or triplex would be licensed for the number of people living in that program, not by the individual unit sizes.

• For individuals living in a multi-use complex (apartment complex) but in a “section” of the complex where there is a contiguous roof line, the license will be based on the number of people living under the contiguous roof line and not the individual apartment unit capacity.

• For individuals living in a multi use complex in apartments that are scattered throughout the complex will be licensed by unit size if they are not a supported living site.

Requests for Change:

• A provider can request a change to the licensed capacity twice a year. Applications will be accepted in March for a change to occur on the license in June and in October for a change to occur in December. Use attached form.

• No provider can change the licensed capacity at an existing site (going from an 8 person home to a 5 person home) if it means people would be exited from the provider. A provider can not change from a seven person home to a five person home if it means two people are exited from agency.

• Change in license capacity must involve CDDP approval.

• SPD will not be responsible for adding rent subsidy if a provider requests a smaller capacity.

Individual Changes:

• No person can be exited from their home solely based on a rate assessment.

• Individuals can request to be supported by particular agencies under freedom of choice.

• Agencies do not have to accept referrals if they believe they cannot meet the needs of the individual or they do not have capacity to meet the needs of the individual.
Training/Communication Plan: This information will be mailed to each DD50 agency.

Local/Branch Action Required: CDDP will be required to approve the capacity change prior to the agency sending the request to DD Licensing.

Central Office Action Required: Capacity changes will be processed on the above printed schedule by the DD Licensing Unit.

Field/Stakeholder review: □ Yes ☒ No

If yes, reviewed by:

Filing Instructions:
If you have any questions about this policy, contact:

<table>
<thead>
<tr>
<th>Contact(s)</th>
<th>Barbara Southard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>(503)945-9816</td>
</tr>
<tr>
<td>E-mail</td>
<td><a href="mailto:Barbara.L.Southard@state.or.us">Barbara.L.Southard@state.or.us</a></td>
</tr>
</tbody>
</table>
Change in Capacity Request
For 24-Hour Residential

Agency Name:_____________________                                       Date:___________________

Site Address:_________________________________________________________________

Current Capacity:___________________              New Capacity:______________________

Plan for individuals that will be moving out of current site:__________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

___________________________________            ____________
Agency Signature    SPD Designated Authority                                     Date

CDDP Review:___________________________________________________
___________________________________________________________________
___________________________________________________________________

CDDP Approval:____________________________________

Department Review:_________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

□ □
Approved    Denied                        SPD Designated Authority                                     Date