

Anna Lansky

Authorized Signature

Number: APD-PT-16-011
Issue date: 3/25/2016

Topic: Developmental Disabilities

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other: _____

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input checked="" type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input checked="" type="checkbox"/> ODDS Children’s Residential Services | <input checked="" type="checkbox"/> Other (<i>please specify</i>): DD Residential Providers; Adult Foster Home Providers |
| <input type="checkbox"/> Child Welfare Programs | |

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|------------------------|---|-------------|--|
| Policy/rule title: | Grant funding for transitions out of Stabilization and Crisis Unit settings | | |
| Policy/rule number(s): | | Release no: | |
| Effective date: | 3/25/2016 | Expiration: | |
| References: | | | |
| Web address: | | | |

Discussion/Overview:

The 2015 Legislature approved \$500,000 in a Policy Option Package which allows the Office of Developmental Disabilities Services to provide one time grant dollars to Community Based Care residential providers (24-hour residential, supported living – provider owned and controlled, and foster care) to support the needs of individuals transitioning out of the Stabilization and Crisis Unit (SACU).

As long as funding is available, providers accepting individuals transitioning out of an SACU setting into an alternate community setting may be eligible for this funding. The specific amount of each grant will be determined by the needs of the individuals, but will not exceed \$50,000.

By accepting these grant dollars, the provider agrees to successfully maintain the individual for no less than twelve months. If for any reason, the placement is not successful for twelve months, a partial or full reimbursement may be recovered.

All modifications must comply with the Oregon and Medicaid Home and Community-Based services requirements. Modifications must support optimal community integration of individuals.

In support of a successful client placement, providers may contact SACU for technical assistance throughout the year.

Grant money can be used for modifications specific to the individual's needs at the community placement, such as, but not limited to:

- Home modifications appropriate to meet the needs of the individual in provider owned homes.
- Vehicle modifications
- Vehicle needed to support development of new homes or other circumstances specific to an individual or group of individuals transitioning from SACU
- Electro-magnetic locks, fire/sprinklers as required by law
- Installing alarms as needed
- Ensuring the bathroom is "waterproof" for client supports
- Home furnishings
- Staff training and associated costs related to the needs of the individual above and beyond basic training
- Other items as approved on a case by case basis
- Start-up cost for an apartment or home (down payments, utilities, etc.)

Grant money cannot be used for services covered by current Medicaid rates, such as:

- Standard DSP training for staff
- Staff salaries and associated costs

Implementation/Referral instructions:

In order to access the grant dollars, the process of referring individuals to residential provider agencies will remain unchanged. Once the individual residing at SACU and their current ISP team agree the individual is ready for community placement:

1. SACU's Placement Team will contact the regions in order to find appropriate vacancies or development possibilities. SACU will send a referral packet to the designated regions with placement options.
2. The Rate setting tool will be completed, ODDS has agreed to set exceptional transition rates for individuals transitioning from SACU and to hold those rates for one year before re-assessment.
3. A referral packet to potential providers.
4. Interested providers will meet individuals and individuals will tour potential placements.
5. The individual, with the help of their ISP team, will choose the provider and home.
6. Visits are scheduled between provider and individual.
7. Relocation meeting scheduled and held.
8. ISP team and the new provider agree on additional modifications needed in order to help individuals succeed in new placement.
 - a. Provider agencies work closely with the SACU placement team to determine appropriate supports needed for successful client placement;
 - b. Provider submits a proposal to SACU Administrator including bids for proposed work if appropriate. SACU placement team will present proposal to exceptional transitional rate review committee;
 - c. If proposal is approved:
 - i. A Memorandum of Understanding is completed between ODDS and the provider describing what the agreed grant funds will be utilized for.
 - ii. Provider completes proposed work and is reimbursed by ODDS with appropriate supporting documentation.
 - d. If proposal is denied the ISP Team reconvenes to discuss options.
 - i. Move date scheduled;
 - ii. Individual moves into community placement, SACU provides staffing support as agreed on by ISP team and SACU Administration

Training/communication plan:

Service coordinators of individuals residing at SACU may share the policy with potential providers.

Local/branch action required:

Service coordinators of individuals residing at SACU may share the policy with potential providers.

Central office action required:

ODDS will review proposals and contract as approved.

Field/stakeholder review: Yes No

If yes, reviewed by: Oregon Rehabilitation Association (ORA); CDDPs;
Community Providers Association of Oregon (CPAO)

Filing instructions:

If you have any questions about this policy, contact:

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|--------------------|--|--|--|
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