



A Guide to Single Household Supported Living Services

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A Guide to Single Household Supported Living Services

Developed for

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Noah Erenberg

For the last 32 years, we have fought constantly for the best possible services for our son, Noah Erenberg, through 21 years of public school Special Ed programs— a frustrating and seemingly endless struggle. Then began “adventures in supported living.”

Since 1990 — under a variety of agencies — none satisfactory, but we were apprehensive to go it alone, even though the last agency, their staff and our family had frequent disagreements, and Noah was getting less quality service each year, Noah was miserable for a long time, as were we.

Finally, in 2000, we took the giant step of becoming vendorized, after many consultations with our mentor, Dave Denniston, after submitting three drafts over months of back and forth negotiations with the regional center.

Since we became vendors, the last two years have been amazing. Noah is 100% happier. His family is 100% happier. Noah is in control of who supports him and what supports he receives.

For Noah’s family, it is a great feeling of empowerment to know how every dollar, received for Noah’s support, is spent; and to know that finally he is getting true value for every dollar.

We were very fortunate to have had the resources to purchase a house for Noah. We decided to purchase this house in a college community where there has been, and will be, a constant supply of energetic, educated and caring support people for Noah. Noah enjoys the environment of the college community where he is known and accepted. He lives with four terrific house mates - all former UCSB students who bright stability, fun and compassion into Noah’s life. Our vendorization has made all of this possible and it is a blessing!



P.S. Over the last 10 years, with our help and encouragement, Noah has become a professional artist. He has taken art classes in the studio art department at UCSB and has used UCSB art students as studio assistants. All of which has greatly enriched his life, both socially and economically.

This year Noah has sold two large paintings to the M.I.N.D. Institute, which will open in 2003 through U.C. Davis Medical Center in Sacramento.

Introduction to Supported Living

What are “Supported Living Services” (SLS)?

Supported living is a lifestyle option for individuals with developmental and other disabilities. This term refers to a situation where an individual lives in a home of his or her choice, with or without house mates (roommates), and with support from friends, family and agencies, in order to have a life that is typical of others in his or her community, and achieve maximum independence. Individuals who were previously destined to live in licensed group homes, or other congregate settings, often succeed in creating a more natural, meaningful lifestyle within the community through a supported living arrangement specifically designed for him or her. Every situation will be different from the next, since individual hopes, dreams, desires, talents and needs vary greatly.

Supported living services (SLS) were developed to provide the support necessary to enable people to participate more fully in community life. SLS is based upon the belief that every person has a fundamental right to live in a home of his or her choice and that no person should be forced to live away from his or her community, or in a setting which is segregated, due to the nature or severity of disability. Supported living arrangements are not licensed; people simply receive the services and supports they need to build the lives they desire while living in their own homes and communities. By “their own homes”, we mean an apartment, condo, townhouse, duplex, or typical single family home which an individual has selected from a range of options; and, the lease, rental agreement or, in the case of a purchase the title/deed, is in the name of the person and signed by the person. This is the reason that SLS is available only to individuals over the age of 18, which is the legal age required for contracting in the State of California. Supported living services in California are governed by regulations (see the following paragraph); in regards to a person’s own home, the regulations specify that a home shared with a person’s parent or conservator does not qualify as the person’s “own home”.

The SLS regulations are located within Title 17 of the Welfare and Institutions Code. As regulations go, they are short and relatively easy to read. If you or someone you care about are interested in supported living services, you should read them. If you are seriously considering being an individual or single household vendor for SLS, you must read them; you will be expected to live by them, and you will find them

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helpful as you go through the process. The following page includes the definition of SLS as it relates to direct support, as described in the SLS Regulations.

What's so special about SLS?

SLS is unique. The core philosophies and values of supported living have a strong foundation in individual choice and self-determination. More than any other service, true supported living services are tailored to support each person's own distinctive blend of preferences, wishes, dreams, strengths and needs. Individuals utilizing services have clear and strong voices in selecting their service providers and support staff, the types of supports and services they wish to have, what they do each day, and with whom they do those things.

Having control over our own environments, and deciding who is welcomed into our lives and our homes, is critical for each of us. How many of us would have "behavior issues" or "severe reputations" if we had no voice, choice or control over the direction of our lives or where and with whom we live? In the past, many people have assumed that individuals with developmental disabilities simply did not know enough to have preferences and dreams, or that they were not aware enough to care. In other services labeled "residential", often administrative convenience and practicality must dictate physical environment and staffing rather than the individual preferences or needs of one person, as the needs and services of the whole group must be considered. Many people who were never successful in group settings due to "behavior" have been living successfully in their own homes, using appropriate supported living services, for over a decade.

Unlike some other services, there is no "readiness theory" associated with SLS. Everyone is "ready" to use supported living services, regardless of skill levels in any area. There are no specific requirements for levels of independence that "qualify" a person for SLS. While the SLS regulations do state that the person must express a desire to have supported living services, we also know that many individuals experience difficulty expressing their thoughts, wishes and desires verbally or in writing. In these situations, the person's wishes are often expressed through his or her circle of support (family, friends, advocates, agency personnel, etc.), as they are the people who usually know the person best.

Chapter 3: Community Services

Subchapter 19: Supported Living Service

Section 58614 - Service and Support Components

- (a) Supported Living Service, as referenced in Title 17, Section 54349(a) through (e), shall consist of any individually designed service or assessment of the need for service, which assists an individual consumer to:
- (1) Live in his or her own home, with support available as often and for as long as it is needed;
 - (2) Make fundamental life decisions, while also supporting and facilitating the consumer in dealing with the consequences of those decisions; building critical and durable relationships with other individuals; choosing where and with whom to live; and controlling the character and appearance of the environment within their home.
- (b) Supported Living Service(s) are tailored to meet the consumer's evolving needs and preferences for support without having to move from the home of their choice, and include but are not limited to the following:
- (1) Assisting with common daily living activities such as meal preparation, including planning, shopping, cooking, and storage activities;
 - (2) Performing routine household activities aimed at maintaining a clean and safe home;
 - (3) Locating and scheduling appropriate medical services;
 - (4) Acquiring, using, and caring for canine and other animal companions specifically trained to provide assistance;
 - (5) Selecting and moving into a home;
 - (6) Locating and choosing suitable house mates;
 - (7) Acquiring household furnishings;
 - (8) Settling disputes with landlords;
 - (9) Becoming aware of and effectively using the transportation, police, fire, and emergency help available in the community to the general public;
 - (10) Managing personal financial affairs;
 - (11) Recruiting, screening, hiring, training, supervising, and dismissing personal attendants;
 - (12) Dealing with and responding appropriately to governmental agencies and personnel;
 - (13) Asserting civil and statutory rights through self-advocacy;
 - (14) Building and maintaining interpersonal relationships, including a Circle of Support;
 - (15) Participating in community life; and
 - (16) 24-hour emergency assistance, including direct service in response to calls for assistance. This service also includes assisting and facilitating the consumer's efforts to acquire, use, and maintain devices needed to summon immediate assistance when threats to health, safety, and well-being occur.

Note: The remainder of this section describes SLS Administration and other related components. The SLS Regulations can be accessed via several websites, including the Department of Developmental Services (DDS) website at www.dds.ca.gov and the California Protection and Advocacy (PAI) website at www.pai-ca.org.

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One factor that separates SLS from some other services is flexibility. This is what allows supported living services to be so responsive to each individual.

Because services are truly tailored to the individual, it is easier to shift, add, reduce or otherwise customize supports as needs, preferences or desires change. The concerns with impacting the services of others in a group by changing something for one person are eliminated or greatly reduced.

Another key thing to remember is that this is, indeed, assisting a person in creating a unique lifestyle. That person must be provided the freedom to make choices for him/herself, and have those choices honored. At the same time, we know that many people have not had a lot of practice in decision-making. So we want to make sure that people have as much support as they wish and need, as they learn, grow and live in their homes. Sometimes that will require more structure; sometimes it will require being more laid back. It is important that we pay close attention to what people are telling us about their lives.

In the event that supported living services and supports do not meet the person's needs, or the person decides that he or she is dissatisfied with the service provider, the person has a right to change service providers. Of course, there are usually conversations about how to make things work better first. This is often an exercise in clarifying expectations and responsibilities, as well as making some compromises on both sides. However, if there is still not a "match" after everyone making best efforts, or if the person decides at any time that the current provider is not his or her choice or not meeting his or her needs, a new SLS provider is chosen. Although this process may take some time, the important thing is that the person being supported has the right to decide whether the service provider is right for him or her, and to make changes as desired. This is usually accomplished with the assistance and support of the person's regional center service coordinator, the person's circle of support and others.

The situation described above is one of the reasons that the SLS regulations separate the provision of housing from the provision of services, again a unique and important feature of SLS. The intent is to remove any possible undue influence by providers, intentional or unintentional, over whether a person feels that he or she

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is “satisfied” with his or her supported living services and SLS provider. This applies to all SLS vendors, including family members who are vendors. When services or the relationship between the person and the provider do not work out, the individual does not have to uproot his or her life to move to a “more appropriate placement” in order to receive SLS. The person’s home remains the person’s home; a simple concept, yes, but not often evident in other traditional services labeled “residential” or “residential placement”. In fact, supported living is never referred to as a “placement”. It refers to a person’s home, and the provision of a set of services and supports tailored for the individual.

People often ask about safety issues when they begin investigating the possibility of supported living services. Ensuring safety is always of primary importance. With SLS, because services and supports are individualized, safety concerns and training can often be addressed on a more in-depth, personalized level. For individuals with intensive needs, SLS can offer the opportunity of one:one support, which may not be available through other services.

What is NOT “Supported Living?”

This list could be very long, but let’s start by saying that, if a service or arrangement does not meet the conceptual framework described above, it is not SLS and should not be called “supported living”. That said, there are certainly many other types of living situations that people desire or find acceptable. For example, continuing to live with one’s parents is a desirable situation for many people. However, continuing to live in a parent’s home with that parent and receive support services is not SLS; it is a different service, and should be called something else to reduce confusion.

These are just a few examples of when you can tell that a situation is not supported living services. SLS is not happening if:

- a person is told where to live or not provided the opportunity to look at different options and make a choice;
- staff are being “assigned” or hired without the person first meeting the proposed employee and deciding to try out the relationship;

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- a provider exerts undue influence over a person;
- a person's housing situation is dependent upon his or her continuing to use a particular provider;
- an individual's choices are unreasonably limited;
- a person's decisions and choices are not respected, acted upon, supported or otherwise honored;
- other people are making important life-changing decisions for a person, as well as daily decisions such as what to do, where to go, what to eat, what to wear, and when to do these things;
- services and supports are unable to be flexible as needs, preferences and desires of a person change;
- a person's situation is consistently unsafe;
- a person is or feels controlled rather than supported.

A Note To Parents, From Parents

The responsibilities of parenting a child with developmental disabilities span a lifetime and can be all-consuming. As parents, we have spent the years of our children's lives learning about our children and becoming experts in their abilities and "limitations"; learning the medical, education, social services, political, legal and developmental disabilities systems and terminology; learning to be advocates; learning how to get what our children and our families need; learning to cope; learning to "fit in" to the community; learning about resources; and learning to compromise, cajole, negotiate, adapt and juggle. We learn to tell the difference between who will help and who will not. Most importantly, we learn the particular importance and power of our love for our children, whether they are toddlers, adolescents or adults. After years of conditioning, we are used to having to be the catalysts for all of the significant events in their lives. At the same time, we are very much aware that our children will be here after we are gone, and the awesome responsibility of ensuring their future is, of course, ours as well.

The one thing we are not taught is how to let go.

One of our hardest lessons to learn as parents of individuals with developmental disabilities is how to balance our children's vulnerability to the world and our desire

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to protect them at all costs with our intent to support them to reach their highest potential, to have dreams, expectations, goals, and independence. We all want our children to have full, productive and happy lives, rich with choices, opportunities and people who love them. Supported living offers people an excellent chance to build that life, complete with the necessary comprehensive services and supports that are essential and unique to each individual. It also offers an opportunity for parents, friends and family members to find the ways that best support the person as an adult, making his or her own way in the world. And, we all like to have a hand on one corner of the safety net; supported living offers a variety of non-intrusive ways to do just that.

Just between us, the danger of being a supported living vendor and being the parent is the ever-present opportunity and overwhelming temptation to take over. There is a fine line between controlling things and having things under control. Utilizing your wisdom and years of experience and expertise are important, and can be one of the defining factors underlying the quality of the supported living services. However, you will need to find appropriate avenues for channeling your input, suggestions, advice and non-negotiables. Even though you are the vendor, you must constantly keep in mind that the home your son or daughter is living in is his or hers, not yours. You may hate the kitchen curtains that he chose, or feel that the underwear should be in the top drawer, not the middle drawer. These decisions are not yours. Having respect for your son or daughter as an adult is critical, regardless of abilities or limitations. Sometimes it helps to think in terms of how you would treat your other adult children or others at this chronological age. For example, most of us would not just walk into our adult children's homes without knocking, or maybe even calling first, even if you do have a key for emergencies. Think about applying the same standard. This sends a message to everyone, including your son or daughter, staff and house mates, that you are showing respect and that you truly are modeling the values and philosophies underlying supported living.

That said, when things impact health & safety or true quality of life, your role as the vendor is definitely to work with your son or daughter and the circle of support (including staff) to bring your concerns forward and work as a team to make positive and necessary changes. This is also your role as a parent, of course. There will be times when you will simply need to say something like, "I'm going to put my Parent

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Hat on for a minute...” The tricky part is figuring out which role to play when, and it will take some time for you to get comfortable with the differences and switching back and forth. You will find it is well worth the effort, and will play a big part in building and enhancing your relationships with everyone involved.

Not every parent wants to be or should be a vendor for SLS. There are certainly pros and cons on both sides. And, there are individuals who do not want their parent(s) to be their vendor, which is of utmost importance in the equation. However, once you decide to make the commitment, realize that it is a journey and that all of you will learn something new each day. If you keep returning to the basic values and philosophies of SLS, your decisions will become easier each time. You will find that being an integral part of your son’s or daughter’s SLS arrangement is one of the most rewarding experiences you can have.

“She’s moved in! Everything is set! The hard part is done.”

Wrong. That was the easy part. One point of caution that experienced SLS vendors will offer, regardless of whether you are a family member, friend or professional associate of a person in a supported living arrangement: change is inevitable. As soon as you feel that “everything is settled”, something will change. People who decide to use supported living services often experience much growth and change as their relationships, skills, interests and tastes evolve. Individual lifestyles and choices will also change over time. Other people’s situations change, and lives may take new directions. Circumstances, relationships, financial and health situations can be altered overnight. Many of these changes are positive, and provide an opportunity to find a new path. Some are not so positive, and will challenge everyone’s creativity and fortitude. Support needs will change, as well; we are all interdependent, and a variation in one person’s life has a ripple effect on others. And, there is always the issue of others getting comfortable with a person having more control over his or her own life. Even though people have been living in supported living arrangements for over a decade, this is still a new concept for many people, including some family members, new friends, and many neighbors in the community.

Isn't This All I Need to Know? Why Should I Read the Rest of This Manual?

There are a million details associated with our everyday lives. Just think of your own life. Then add the components of complex physical, health, emotional and functional needs, as well as the components of organizing and running a business - within the guidelines of SLS -- including complying with labor laws and regulations. This manual will attempt to walk you through some of this maze.

This document was compiled with the emphasis on meeting a person's individual needs, while supporting the efforts of the consumer, family members and/or circle of support when they all choose to work together to create successful individualized lifestyles and lives. It is with great enthusiasm that many people have gone forward to pave the way for this innovative and practical approach. We hope that the adventure of providing this service will not only meet people's needs in meaningful ways, but that it will be fun as well!

What Does It Mean?

- Everybody is “ready”, no matter where they are in life
- Having choices, making decisions, developing life skills
- Living interdependently
- Choosing where to live and with whom
- No licensing
- Full community membership
- Enhanced quality of life
- Individualized personal lifestyle
- Taking responsibility
- Building and expanding a circle of support
- Compatibility and friendship with house mates and support persons
- Supported living service provider (vendor) is separate from housing
- Person being supported has control of who is providing support, how and where, including hiring, firing and evaluation
- Long term commitment and security
- Living life vs. being “in a program”

Section I: Now That You've Decided on Supported Living

Mike White



I've been living in my own home since 1992. When I first moved, I never thought I would last a month, let alone 10 years. The biggest challenge is finding good people to support me. I've been lucky because I've had the same core staff for the past 5 years. But, that also has its down side. Sometimes I'm so tired of the same people, I think about moving back to a nursing home where I'd

have some variety! It's like a marriage - it's the little quirks that can wear on you! The best part of living in my own home is that I can have all my animals.

Section I:

Now That You've Decided on Supported Living

Now that you have made the decision that Supported Living Services (SLS) is the right choice, there are some important steps to take.

Before we outline the steps, just a reminder about “consumer involvement and participation.” It is essential that the consumer be at the heart of all planning and decision-making throughout the process of discussing, developing, implementing and evaluating his or her supported living services. Some people will readily jump in and want to lead all discussions; others may stand back, unsure of their roles in making choices and decisions about their lives. Still others may want to be part of the big picture, but not of any details.

Each consumer should be supported in making his or her decisions about the level of involvement and participation he or she wants in setting up and implementing the supported living arrangement.

One of the jobs of the circle of support is to assist the consumer by facilitating his or her understanding of supported living and what it means in the daily life of an individual. How will things change? How will they be the same? What types of support, and from whom, does the consumer need to feel comfortable taking a leadership role in the supported living process, and in making both long-term and day-to-day decisions? What types of facilitation are necessary for the consumer to most effectively communicate his or her wishes, ideas, thoughts, questions and concerns about all of these things? How will the circle of support make sure that the consumer is supported in the best ways to feel comfortable and safe in communicating throughout this process?

And finally, for those of you who are conservators or are thinking of becoming conservators...

In terms of the mechanics of supported living vendorization, conservatorship is a silent issue. You are not required to be a conservator, nor are you prohibited from being a conservator. It has no bearing on your eligibility for being a supported living vendor. The pro's and con's of conservatorship are well-debated, and

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there is plenty of other important information to include in this manual without opening that discussion here. As in the Supported Living Services (SLS) Regulations, conservatorship is a silent issue in this manual except to say that it is irrelevant.

There are key considerations to think about and discuss even before the decision is made to choose SLS. For more information on this topic, see Section II of this manual.

What To Do Next...

<p>Step 1 Add a Goal for SLS to the Individual Program Plan (IPP)</p> <p>Call your service coordinator (case manager) at the regional center. Explain that you have decided that supported living is the right choice for you [consumer]. Ask for an addendum to be added immediately to the IPP stating that you are requesting a new goal for supported living services. You may want to word it similar to this: "I want to live in my own home and receive supported living services by [pick a specific target date, such as May 1, 2003]."</p>	<p>Who</p> <ul style="list-style-type: none"> • Individual Consumer • Depending upon the individual and his or her wishes: <ul style="list-style-type: none"> Family member Friend and/or Other advocate
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The target date can be any date that seems reasonable or desirable for the consumer. Remember, you can alter this date later if anything significant changes, or if the consumer and his or her circle decide to delay or move up the date. Having a target date helps everyone focus the energy and attention on making supported living happen for the consumer in a timely fashion. It also helps the regional center in its own planning processes.

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Some service coordinators may want to meet with the consumer and his or her circle of support before adding the new IPP goal. Also, each regional center has its own policies and procedures, and yours may require a face-to-face meeting in order to change the IPP. Scheduling a meeting with the necessary people as soon as possible will help to ensure that things move along in a way that assists the consumer in receiving supported living services in his or her own time frame.

One word of caution...

Do not skip the step of adding a supported living goal to the IPP!

It is critical to have the consumer's wishes and plans documented in the IPP so there are no misunderstandings about what the goal is, when the consumer expects to achieve it, or what resources need to be made available by the regional center and others. Verbal discussions or promises are not the same as goals written in an IPP, which is a legal document.

Later on in the process, when the consumer has definitely chosen a specific vendor as his or her partner in the supported living process, the IPP goal for supported living should be amended to include the name of the vendor selected by the consumer. If the consumer has chosen an individual vendor (such as a parent vendor) at the time the original IPP goal for supported living is written, the vendor's name should be included in the goal to clarify and document the consumer's choice of vendors.

Usually, regional center service coordinators are enthusiastic and excited that a consumer they support has decided to pursue supported living. Sometimes, however, service coordinators are not familiar with supported living services. They may be confused about things such as who is eligible for SLS or how to go about starting the planning process.

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The eligibility criteria set out in the SLS Regulations (Section 58613) is:

- “(a) A consumer shall be eligible for SLS upon a determination made through the IPP process that the consumer:
 - (1) Is at least 18 years of age;
 - (2) Has expressed directly or through the consumer’s personal advocate, as appropriate, a preference for:
 - (A) SLS among the options proposed during the IPP process; and,
 - (B) Living in a home that is not the place of residence of a parent or conservator of the consumer.
- (b) Consumers shall not be denied eligibility for SLS solely because of the nature and severity of their disabilities.”

If the service coordinator does not know how to initiate the process for supported living in your regional center, or feels that the consumer is “not eligible” for any reason, it is important to ask for a meeting with the consumer, members of his or her circle, the service coordinator, his/her supervisor, and the resource developer or other regional center staff person in charge of supported living services. Others may be appropriate, depending upon the situation and the structure within each regional center. The consumer may also want to invite the Clients’ Rights Advocate for your regional center. If this meeting does not result in a positive outcome for the consumer, there are other options, including asking for a meeting with the regional center executive director, contacting Protection & Advocacy or other advocates for assistance, and filing for a Fair Hearing.

Having a good relationship and good communication with your service coordinator and other staff at the regional center is extremely important. Developing a trusting and cooperative relationship, and working in good faith with your regional center, is essential when quality supported living services and consumer satisfaction are the ultimate goals. Consumers, family members, service providers and regional center staff have much to share with each other and much to learn from each other. Walking together through the process of setting up and providing high quality supported living services that enhance a person’s life can be a wonderful learning opportunity for everyone involved.

Now That You've Decided

Step 2 Investigate Options for SLS Service Provision Find out what the options are for SLS in your geographical area. This is important even if you already think you want to be vendor (provider). Generally, the choices are: <ul style="list-style-type: none">• Supported Living Agency• Self (Individual) Vendor• Parent Vendor• Other Individual Vendor (friend, family member, support person as vendor, etc.)	Who <ul style="list-style-type: none">• Individual Consumer• Potential Individual Vendor (someone tentatively identified)• Depending upon the individual and his or her wishes:<ul style="list-style-type: none">Family memberFriend and/orOther advocate
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What is a “vendor?”

Before we go further, let's make sure that everyone understands the term “vendor”. To simplify it, a vendor is an agency or individual that provides services to persons with developmental disabilities through an agreement with the local regional center.

This happens through a process called “vendorization”. The regional center has certain requirements that providers must meet in order to become vendors. This paperwork includes a plan (“service design”) showing what services the vendor will provide, how and where those services will be provided, to whom, and other pertinent information. The regional center wants to make sure that the agency or person is capable of actually providing these services. There is also some standard paperwork that all vendors must sign, as you will see in Section III of this manual. Depending upon the type of service provided by the vendor, rates are either set or negotiated. In SLS, rates are negotiated, and may be hourly, monthly or on a flat rate basis agreed to by the vendor and regional center. More information on individualized rates and negotiation is provided in the section outlining budget and other fiscal information, and in the SLS Regulations.

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Once a vendor has been approved by the regional center, the regional center refers consumers to the vendor; or, in the case of an individual SLS vendor, the regional center understands that the vendor and consumer have already made the decision to work together. The SLS vendor and the regional center sign a contract according to the Supported Living Services Regulations.

The regional center also issues an authorization for services called a "Purchase of Service" (POS) for each consumer served by the vendor. The POS details the amount authorized for the vendor to bill the regional center for the consumer's supported living services.

Why should we investigate other options if I know I will be the vendor?

There are several reasons that you and the consumer should check out other options, even if you are both sure that you are ready to be the SLS vendor. Your regional center should be able to give you a list of available SLS agencies to talk with, as well as some names of other individual household vendors and, possibly, consumers who are their own vendors. Talking with others is a wonderful opportunity for the consumer and you to ask questions of people who have been providing, and using, supported living services.

1. SLS Agencies

- By talking with the SLS agencies in your area, you and the consumer will learn a tremendous amount about supported living, the role of the vendor, what "quality" supported living services means in a broader context, how they evaluate services, and how agencies provide individualized supports and services. You will learn something different from each agency you visit, all of which is very valuable to you and to the person you will be supporting.
- You may find an agency you both really connect with and feel could provide the quality, individualized supports the consumer needs. Your role could possibly be for quality assurance or as a circle member instead of taking on the entire responsibility of being the vendor.
- You might be able to reach an agreement with an agency to contract with them for assistance with staff training, screening and background checks, or

even payroll. Several parent vendors have successfully partnered with an existing SLS agency to provide administrative support and/or staff emergency back-up.

- Agencies often have valuable information that they might share with you regarding good potential landlords, social and recreational opportunities to meet other consumers in SLS arrangements in the consumer's community, and a variety of information about generic and community resources.
- Agencies may be able to provide you with information about SLS vendor groups, gatherings, or specific SLS vendor resources in your area.

2. SLS Parent Vendors

- Parent vendors can be a valuable source of information and creative ideas, even if you decide not to become a vendor. If you are a parent, and do finalize a parent vendor arrangement for SLS, these contacts are especially invaluable. The benefit of their experiences in planning SLS, negotiating with your regional center, and finding resources available to individual vendors (vs. non-profit or for-profit agencies/businesses) can make the difference between a smooth transition and a difficult road. Who is their local insurance agent? What do they do about payroll services? What does the local regional center require in the way of documentation? Their experiences can help you make key decisions about what to do and what not to do.
- Other individual vendors, such as parents, will be part of your own personal support network. Parents who are SLS vendors for their own children are in a unique situation, and have experience in balancing the complex roles of parent, friend, protector, cheerleader, advocate and service provider. They, more than any other vendor, must work hard at "letting go" of many ingrained habits (like being expected to make all of the decisions), and not over-shadow the independence of the consumer. Their perspective and the issues they confront are different than other vendors, yet the requirements and responsibilities as a vendor are the same. Keep their phone numbers and e-mail addresses handy!

Now That You've Decided

3. Self/Consumer Vendors

- Consumers who are their own vendors also have a perspective not shared by others. Their expertise in finding creative ways to meet their own needs while meeting the requirements of the regional center and the SLS Regulations can be very enlightening.
- Self-vendors can provide insight and ideas regarding ways to assist consumers in learning to become responsible and responsive employers to the people providing their daily support. Learning how to get your needs met while building and maintaining a cooperative, respectful and meaningful relationship with support staff is a balancing act of its own kind. Their experiences can be so valuable for other consumers, even if the others are not their own vendors.
- Some consumers may wish to be their own vendors, but do not feel "qualified" or are afraid to try. Self-vendors can be good role models and inspiration for all of us.

4. Other Individual ("Single Household") Vendors

- Some vendors are the SLS provider for one consumer, or one household, but are not parents. Siblings, other family members, friends, staff from previous living or work situations, and others who have a strong desire to assist a particular consumer may be providing SLS for someone they care about. While their role as a provider is the same according to regulations, and similar to that of a parent vendor in nature, the difference in the relationship creates a distinct dynamic. This vendor can provide helpful feedback and observations about many of the issues described above, as well as tips on managing the many interconnecting relationships from a more objective viewpoint.

5. Consumers Accessing Supported Living Services

- Your regional center should be able to give you names of people living in their own homes who are willing to talk with the consumer and/or you about their own supported living services. Making a visit to someone's home is an excellent way for people to get a better idea of what supported living is all

Now That You've Decided

about. If possible, talk with consumers who use a supported living agency as well as consumers who use an individual vendor. If you are thinking about parent vendoring, it might be very helpful to visit someone whose parent is their vendor. The dynamics of these situations tend to be very different than other consumer-vendor relationships. This will give you both an idea of what you like and don't like about the various arrangements, and it might bring up important discussion points for the two of you to address even before you get too far into the planning of services and supports.

- It will be especially important to remember, and to remind the consumer, that each person's home, standards and other specific decisions are individual choices. For example, visiting someone who lives in an apartment does not mean that you must also live in an apartment if you receive supported living services. Likewise, there are multiple ways to implement and administer supported living services as the vendor, and these are personal choices that the vendor and consumer can make for that individual supported living arrangement.

Step 3 Obtain and Read the Supported Living Regulations The Supported Living Services Regulations are important to read for a variety of reasons; particularly, they will help to define SLS, clarify the scope of services, and outline the responsibilities of the vendor and regional center, and the rights of the consumer. First, the bad news: 1) Regulations are boring; and, 2) If you choose to be the vendor, you must adhere to the SLS Regulations. The good news: The SLS Regulations are relatively short and, for the most part, fairly straightforward.	Who <ul style="list-style-type: none">• Potential Single Household/ Individual Vendor• Others in the Circle of Support, including Family Members• Individual consumer, if he or she desires*• Individual's Regional center Service Coordinator <p>* If the individual is unable to read and/ or understand the actual regulations, it would be beneficial for someone in the circle of support to talk with him or her about the key ideas, especially related to consumer rights and responsibilities.</p>
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Now That You've Decided

Your regional center should be able to give you a copy of the Supported Living Services Regulations. They can be found in this manual in the Resources section, or you can obtain them through the California Department of Developmental Services (DDS) website at www.dds.ca.gov or the Protection & Advocacy, Inc. website for California at www.pai-ca.org. You are looking for:

Title 17, California Code of Regulations

Chapter 3: Community Services, Subchapter 19: Supported Living Services

Article 1, Sections 58600 - 58680

How long will all of this take?

The time it takes to go through the process of becoming a vendor and putting together supported living for an individual can vary. Although SLS should not be considered a “crisis service”, there have been situations that were vendored, planned and implemented in as little as four to six weeks. This, of course, is not typical, nor should it be.

Assisting someone in creating a truly individualized life is a task worthy of significant thought and planning. Allow enough time for the consumer and you to really think through what services and supports the person needs and wants, as well as the best ways to provide them. At the beginning of the process, talk over:

- the **vision** of the consumer, family and/or circle of support of what life will be like for the person when living in his or her own home;
- **outcomes** the consumer, family and/or circle of support are expecting as a result of supported living services;
- the **individual's expectations** of you, as the vendor; and,
- **rights and responsibilities** of all parties: consumer, vendor, family members, circle of support, the regional center and other agencies, if any.

These discussions can take place over time, and in a variety of formats. Your own knowledge of the person, input from other significant people in the consumer's life, informal conversations, daily observations in different settings, recent professional

assessments, and more “formal” planning processes such as a person-centered planning meeting, PATH, Essential Lifestyle Plan, and similar opportunities all have a place in the gathering of information. No one tool or process will capture all of the critical information necessary for a well-rounded supported living plan. The most beneficial process is a combination of many perspectives and thoughtful discussion.

Take the necessary time to actually put the supports and resources in place right from the start whenever possible. It is much easier in the long run to do things right the first time instead of having to go back and correct poor decisions made under pressure to rush the start of supported living services.

What is a good rule of thumb? While keeping in mind that the process is very individual, a reasonable average is probably somewhere between a minimum of three to six months. Many people take longer, but feel that the wait is worth the outcome.

There are obviously many variables, including desire and current situation of the consumer, start-up costs and available resources, housing considerations, geographical location, availability of staff, intensity of and accessibility to other necessary supports, adaptive equipment, training issues, general motivation of others involved in the process, and quality of collaboration and cooperation among the regional center, consumer, family and circle of support.

And, having said so much about the importance of planning, the beauty of supported living is that it is a fluid service, meaning that it can and should shift and change as the person's needs and desires change. Living on one's own can be a tremendous growth experience for any of us, and changes in supports and services should mirror that growth. Supported living services should always be responsive to the consumer. Vendors for an individual or single household have the optimal situation for being responsive, as they have only one - or possibly two - individuals to support rather than the larger number to whom agencies must be responsive.

The bottom line is this:

The individual consumer deserves the best possible opportunity to be successful in this new stage of life. The vendor also deserves the chance to provide the high quality supports that will lead to maximum consumer satisfaction with the supported living services, and the overall quality of his or her life. It takes time to build a strong foundation and set the stage properly so the consumer can create the life of his or her dreams.

Section II: Making the Decision to be a Single Household SLS Vendor

Eddie Compton

My son, Eddie, is a 29 year-old autistic man with dreadful behavior problems. He lived in the family home for the first 18 years of his life. We love him so much, but he was so disruptive. He was expelled from his school program and kicked out of every available day program. Because of this, the family decided to relocate to a rural coastal area in Oregon where Eddie could be free to be himself.



It didn't work out. No day programs or services. Eddie became isolated and bored. His behaviors became worse. It got so bad that we were forced to place Eddie into a group home. At that time, we were told that we were doing the right thing and now the family could finally rest and start living a normal life. We were told that once Eddie was gone, we would feel so good, but that didn't happen. Eddie kept getting into trouble in the group home and was finally placed into a developmental center. At the developmental center, his bad behaviors continued.

Instead of relief, the family became more stressed. We couldn't sleep. My wife would call three or four times a week to make sure Eddie had a blanket and wasn't sick or hurt. On several occasions during our visits, we found injuries on Eddie that indicated that he had been assaulted. In one case in particular, we found him in his room with his front teeth knocked out. Because he is non-verbal, we were never able to find out what actually happened. There was an investigation, but no one was ever charged with the assault. Even though we lived over 200 miles from the center, we never missed a weekend visit.

Eddie was upset too. He would cry when we had to leave. Oregon had no community services that could meet Eddie's needs, and the family wanted Eddie out of the institution so bad. We knew that for Eddie had to relocate back to California. With the help of the Delta Project and Alta Regional Center, we were able to return to the Sacramento area and bring Eddie home.

Also with their help we were able to set up a Supported Living arrangement where Eddie is close to his friends and family, but doesn't dominate their lives. It is not easy, but Eddie is really happy. He has had a few set backs, but his life is heading in the right direction. He is able to make his own choices and not disrupt others. He is loving and funny; he can really make you laugh. Who care if he keeps his beanbag chair in the closet or doesn't allow the microwave oven to be plugged in? It is his house, and Eddie likes it that way.

Section II:

Making the Decision to be a Single Household SLS Vendor

Things to Think About ...

Some important considerations when deciding whether or not to become an individual vendor are:

- Needs of the individual;
- The individual's family structure and support structure;
- The individual's and potential vendor's desired involvement in providing services; and,
- The individual's wishes regarding choice of SLS vendor, including whether he or she wants a family member or friend to be the service provider.

In some situations, day-to-day business demands on the vendor, including having to oversee services and supports, may jeopardize an existing nurturing personal relationship between the individual and the vendor. If this is the case, finding an agency that values and supports family involvement and participation may better meet the needs of everyone involved, allowing the family member or friend to remain solely in the personal role. In other cases, various factors such as time constraints and other lifestyle issues determine that the individual would be better served by having an established agency provide services.

When it does seem as if being a "single household vendor" -- meaning the SLS vendor for only one person, or for two or three people who have chosen to share one home -- will best meet the needs of the individual, specific things to think about are:

- **Goals of the Individual**
Both long-term as well as short-term goals need to be considered. How will these goals best be met? Will you, as a vendor/service provider, be able to facilitate the process, including all necessary follow-through, to make sure the desires and decisions of the individual are met? Sometimes it can be difficult to step back from a parent role and facilitate decisions made by the individual, even though he or she is an adult. This can be especially tricky

Making the Decision to be a Provider

when the individual and parent vendor disagree.

- **Share and Communicate Expectations**

In order to facilitate positive results, it is crucial that the expectations of everyone involved be specifically addressed and weighed with the expectations of the vendor. The value of taking an honest approach regarding each person's vision and expectations will be worth the effort. The result will be the ability to set realistic goals and will lead the way to agreement and follow-through with regard to roles and responsibilities.

The expectations of each circle of support member are as varied as the members themselves. This is the value of having friends, family members and acquaintances in our lives! How many times have we experienced a new opportunity because someone shared a new concept we decided to explore? Each circle member will share his or her individual expectations and ideas, always keeping the individual's best interests in mind, while maintaining the commitment to share in the responsibilities generated by the plan. The vendor who is able to provide SLS with expectations that have been clearly defined and agreed to by the individual and circle of support prior to starting services will find it easier to communicate and resolve difficult issues that may arise later. Although the vendor may feel capable of making all decisions for the individual, SLS is built on the philosophy that each person, as an adult, makes his or her own decisions, with the support of his or her circle. While this sounds like a straightforward process, there can be subtleties and tensions at work that make it complex, especially when the individual is unable to speak for himself or herself. Ideally, the circle is comprised only of people who not only care about the person, but know him or her very well and respect the feelings and wishes of the individual. In some cases, after all input from the circle is considered, final decisions are made that the circle determines are in the best interest of the individual. This situation would never intend to strip the individual of self-determination or decision-making; the sole intent is to facilitate the best decision when a person is unable to communicate his or her own independent decision. Again, the vendor sometimes has to step back, recognize and honor the decision making process and then facilitate the change, even though they may not fully agree with it.

Making the Decision to be a Provider

- **Rights, Responsibilities and Roles**

It is important that individuals understand their rights and responsibilities as individuals receiving SLS. When rights are balanced with responsibilities, it is then possible to be realistic about expectations. After becoming familiar with the SLS Regulations, it is a good idea to identify personal expectations, share them with circle of support members and determine if the expectations will drive goals that are attainable.

Each member of the circle, including the individual, needs to take responsibility for “Action Items”. It must be clear that, in order to ensure success, the individual must make a commitment and work at keeping his or her agreements. SLS is not something that just “happens” for an individual. It is a service that has to be thought out and worked through, with a solid commitment and responsibility shared by everyone, including the individual. When the individual seems to have limitations that would affect participation in his or her plan, he or she will receive assistance from the circle of support to find ways to be able to be involved to the fullest extent of his or her ability.

- **Family Participation**

When families are involved in a individual’s life, it is very important that they take many of the same steps that the individual takes in understanding what SLS is and how it will affect everyone. Whether or not a parent or family member makes the decision to be the vendor, often the individual chooses to have them participate as very critical members of the circle of support. They assist with planning and making ongoing decisions, while at the same time, finding ways they can continue to grow the relationship they have established over the years. The transition is much like any other life-changing process we all experience when a family member moves, goes to college, or makes a choice to do something that affects the individual roles we have had previously.

Openly expressing concerns and examining expectations can be a healthy way to prevent problems later on. It may be difficult and alarming for a

Making the Decision to be a Provider

family member who has been involved in every aspect of a individual's life to imagine how others will assist in handling challenges with which, until now, perhaps only they have been familiar. Sharing the wealth of information and experience they have gathered over the years results in a smooth transition, and has, in many cases, allowed everyone to experience things no one thought possible. New relationships form, enthusiasm and excitement breed renewed strength, and a whole new world can open up for everyone.

- **Shifting roles**

Often, when roles change, family members are able to have more of an "adult" relationship with the individual and realize that growth is possible, not only for the person receiving services, but for them as well. Sometimes the expectations of the family include being sole decision makers in the individual's life. As everyone experiences new ideas and creative approaches that often result from the circle of support's team approach, expectations can change and a renewed sense of possibilities allows a new vision to take place.

Facing Reality

Ideal: Serving as an individual vendor for yourself, or someone close to you, can produce exciting and positive results. It can be a way to ensure that every detail of the desired service is fine-tuned and properly administered. If you and the individual agree that you will work together as a team to attain the desired result of an individualized service that truly meets the needs of the person being supported, then individual vendorization is definitely something you should both explore.

Reality: Sometimes being involved with every detail of the desired service, and attempting to properly administer the services, can be cumbersome and confusing. If you and/or the individual would find it difficult to work together as a team, and/or might have difficulty agreeing on how the individualized services would look, individual vendorization might not be the option you will choose.

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Ideal: Being involved with every aspect of providing this service can result in a comprehensive and individualized lifestyle that is naturally safe, comfortable and healthy. If you and/or the individual can be available to oversee the details of making sure everything runs smoothly, individual vendorization is definitely something you should both explore further.

Reality: The commitment to be available when necessary can sometimes be disruptive and inconvenient depending on schedules and lifestyle. If, after thinking about your availability, you realize that this is not a commitment that would be possible for you, individual vendorization might not be the option you will choose.

Ideal: For a family member or friend who desires to be involved with this level of detail, serving as the vendor allows both the vendor and individual to feel confident that individual needs are not only being met, but are as personalized as possible. If you feel that being involved with the level of detail described would increase your confidence in SLS, and is something you are interested in doing, individual vendorization is definitely something you should both explore further.

Reality: For an individual vendor to be confident that needs are being met and are as personalized as possible, a huge investment of effort, energy and time are required. The Single Household Vendor is a small business, with all of the challenges, worries and concerns that go along with any important endeavor. Although the result can be positive and rewarding for everyone involved, the day-to-day business also includes human resource procedures, taking the lead as you assist the individual in hiring and firing support staff, facilitating orientation and training, payroll, budgeting and billing, tax and insurance issues, reporting and documentation, an awareness of resources and agency procedures, keeping up on laws and regulations, overseeing the maintenance issues of another house/condo/apartment, paying bills, negotiating budgets and glitches in services, dealing with tenant/landlord issues, learning and facilitating IHSS, mediating between the individual and staff, mediating staff to staff issues, and counseling, as well as always ensuring that the individual's best interests are at the forefront.

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Essentially, you must be willing to attempt to know everything, be able to do everything, find everything, train everything, fix everything, answer everything, evaluate everything, be available for everything, and remember everything - while you are keeping your patience and advocating! If you are not a person who is able to or enjoys multi-tasking, consider carefully before you commit. If you are a person who needs a great deal of sleep, think carefully before you make this decision. If you are not a "detail person", this may not be the job for you.

Can you hire people to help with some of these things? Of course. Does it absolve you of the ultimate responsibility and free you from having to think about it? No. As with any business, there are resources available such as payroll services, human resources and legal assistance; however, it is critical that the person making a decision to provide SLS is aware of the complexity of the commitment, the nature of the responsibility, and the time involved in keeping the commitment. On the other hand, if you just know that you otherwise would be spending frustrating hours trying to force a "fit" if the services were provided by an SLS agency or another vendor, the knowledge of your personal situation, your personality, and the individual's wishes and needs must be weighed against the work of being a vendor.

There are individual vendors who have full-time careers, children, and social lives, as well as additional commitments, and have found the job of providing SLS for one person manageable, productive, successful and rewarding. The key to doing this is to first be sure that all of the aspects of providing services are looked at honestly before making a decision to go forward, and then to continue to ensure that everyone involved is thriving. If the complex issues of managing a small business would not be something you would be interested in doing, individual vendorization might not be the option you will choose.

So, the reality is that being a Single Household Vendor is a huge job and lots of work, but if the conditions are right, it is well worth doing!

Making the Decision to be a Provider

People to Talk to

One of the first things many people exploring the option of being a vendor ask is to whom they should talk about providing services to a consumer. The answer is always the same. Always start by talking to the consumer! No one ever knows the needs of an individual better than that person. Through interviews, casual discussions and informal time spent together, we learn important information.

Sometimes, when the individual does not communicate in typical ways, we need to creatively approach a new way to access the information the person has about himself or herself. Friends, family, and others acquainted with and chosen by the consumer, can meet with the person as a circle of support to assist with difficult, but life-determining, decisions. The focus of these meetings must always be on the consumer, and discussions and decisions made must always honor the consumer's choice. This can be extremely challenging, as it is always easier to make decisions for other people based on what we think they need, rather than honoring what they say they want.

Honoring Consumer Choice

In many situations we have seen very positive results that no one previously thought possible when we have honored the requests of the individual, even when we strongly disagreed with his or her decision. In one case, a young man we know with a label of extremely "challenging", and even self-injurious, "behaviors" decided he wanted to do woodworking and use a power saw. His family and circle of support assisted him to find a way to do this safely, even though it had seemed impossible. Today, that same man has his own business, successfully making and selling furniture that he creates. What would that person be doing today if his circle of support had made a decision based on their opinions or limitation in their thinking, rather than his request?

The philosophy of SLS is the thread that runs through all successful examples of individuals living on their own with supports. Over and over again, we see and hear of instances where someone who was thought to be unable to participate in even the most simple activities or tasks is living with support in a place of his or her own. People have lives that revolve around their choices and decisions, and are

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participating not only in the maintenance of their homes, but are involved in their communities as well.

With adaptations and support, we all make progress. With experience and support, we learn to make better choices and decisions. When we look at abilities rather than disabilities, we begin to see the real person that has likes, dislikes, desires, needs, and dreams that are of his or her own choosing. It is always interesting to look at our own lives and evaluate the kinds of adaptations and supports we've built in to meet our own needs and goals. Supported living services allow every individual the opportunity to explore their dreams and, with support, to live them.

The Final Decision is...

If, after careful consideration, your final decision is to become a Single Household Vendor, the best advice for you is to be open, honest and ready to learn as much from the person you will be supporting as they will learn from you. As you work through difficulties, it is important to remember that SLS is still a relatively new concept in the scope of services, although we always say that parents and families have been providing supported living for years. We need to keep in mind that everyone involved with this service is still "pioneering" the effort to assist people to live as independently as possible, and although we have a long way to go, we've come a long way. The goal is always to assist people to live their lives as close to what their dreams are as possible.

Section III: Creating the Foundation for a Supported Living Arrangement

James Escamilla



My name is James Escamilla. I live in Placerville, CA in my own apartment. I love having my own apartment because I can set the level of activity I can handle at the moment. I love my cat Snoopy. She is a wonderful companion.

I moved into this apartment in January 1997. By being in this Supported Living Program I can pick my own staff to help me with my life challenges. I also enjoy my specialized volunteer program through In Alliance where I can learn and do clerical tasks at the Marshal Hospital - Community Health Library. I am able to participate in the Special Olympics, too. I love Softball in the summer. We usually go to a weekend tournament in Sunnyvale - if we qualify - to play competitively with all other teams in Northern California. We did really well last year. Thanks to my staff support for helping me make all this happen.

This program has helped me manage my life and reduce the stress medication I take by 75% over the last 5 years. I hope more people can have this opportunity to live in their own "space" by having wonderful people helping them where they need help.

Section III:

Creating the Foundation for a Supported Living Arrangement

By now, three major decisions have been made by the individual and/or circle of support (including the regional center service coordinator), and potential SLS vendor: 1) supported living, or SLS, is the chosen option, 2) a single household (individual) vendor, rather than an agency, will best meet the individual's need for a service provider, and 3) you will be the vendor. Next comes the fun and the challenge of creating the actual services and supports.

Talking and thinking about being a "single household" vendor (parent, self or other individual) can create excitement, energy and apprehension all at the same time. Once you have finally made the decision to take the big step and actually do it, the tasks can be daunting. There are what seem to be a million details, and many of them are about things you may not feel prepared to address. Suddenly the issues of support for the person seem like the easy part; time sheets, payroll, regional center billing, budgets, insurance coverages and contracting with the regional center loom. And, how do you balance all of this with your personal relationship with the individual?

Don't let it overwhelm you! The best plan of attack is to start out with one thing at a time. It is true that you will have many balls in the air during the process, but this is good practice. Anyway, especially if you are a parent, you've been multi-tasking for years. This is no different.

Let's begin by taking one step at a time.

1. Collaborate with your Regional Center

Building and nurturing a collaborative relationship with the regional center is essential. In addition to the fact that they need to pave the way for supported living services, the sooner they are involved, the more ownership the service coordinator will feel for the success of the SLS arrangement. If the service coordinator is not already aware of the individual's most recent decisions, contact her or him immediately. It's important to bring the

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regional center into this process as quickly as possible in order to agree on time lines and other key issues. Different regional centers handle planning for new services in varying ways, however, every regional center has internal processes to which service coordinators must adhere when requesting new services for any individual. Remember to keep communicating progress, any anticipated delays, and special needs that arise during planning or implementation to the service coordinator so he or she can help to move things along at the regional center.

❑ ***Beginning the Vendorization Process***

Most regional centers have a “vendor packet”, with forms and instructions for how to become a vendor. This is fairly straightforward. Generally, the packet includes a request for the description of services (“service design”); a related budget; standard tax paperwork like the W-9 and I-9; and a Medi-Cal Provider form, which is required. The Medi-Cal form sometimes concerns vendors because it says that you agree to be a Medi-Cal provider. This is a formality, and does not mean that the regional center is intending to refer more individuals to you, that you must serve more individuals than the one person you wish to support, or that they are going to hold you to Medi-Cal rates. Your signature on the form allows California to capture additional Medicaid funds.

2. Involve the Individual’s Circle of Support

If the individual does not already have a formalized “circle of support”, sit down with the person and make a list of people that he or she would like to have in the circle. Assist the individual in setting a date, time and place for the meeting, and help the person, if necessary, create an invitation to a circle meeting. It can be as simple as several sentences:

“I am thinking of moving into my own home, and I would like you to be part of a group of friends who can help me plan and make decisions for this exciting new experience. On Saturday, September 21st from 2 to 4, I am having a get-together at (location) to talk about this. Please come.”

This can be written in letter or traditional invitation form, e-mail format and/or by telephone. Assist the individual in distributing or mailing the

invitations, planning and purchasing some light refreshments, and thinking about what things he or she would like help with from the circle of support. It will also be important that someone within the circle take notes or otherwise document the discussions and any decisions made there.

Sounds Good... But What is a Circle of Support?

As referenced earlier in this manual, a circle of support is, as the name implies, a unique support system and team who care about a particular person and want to share in his or her life. Members of the circle of support can be friends, parents, other family members, personal attendants and other support people, co-workers, neighbors, professionals from agencies providing services, and any other person the individual chooses. One of the important things about a circle is that it is comprised of people the individual likes, trusts, and feels will support him or her in making good choices and decisions. Circle members should be invited to participate by the individual, although sometimes self-selecting can work out fine, if the individual agrees (for example, a co-worker or neighbor may ask to be included).

Circle members' roles includes encouraging the individual to voice his or her own opinions, choose and meet his or her own goals, and to make choices and decisions based on his or her own value system. A circle can also be effective in helping a person think through difficult decisions, as well as supporting the person in taking responsibility for his or her own life and standing up for personal rights. Circle members can be great cheerleaders, and can assist individuals and family members in the job of advocating for the individual. They can also utilize their personal networks to access resources, jobs, opportunities, and help expand the person's social circle.

Some individuals start with a circle of support that includes, literally, only themselves and one other person. That's fine, too. A goal might then be developed for the IPP and SLS service design that would address assisting the individual to expand the circle if he or she chooses to do so.

Another Kind of Circle of Support ...

As a SLS service provider for a single household or person, you might want

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to develop your own personal circle of support. Being an individual vendor can be lonely sometimes. In addition to your friends and family members, you may want to access a network of other individual vendors. In California, there is an informal organization called the California Supported Living Network. While many people in the network represent SLS agencies, there are some people in various locations around the state who are parent, self (individual) and other individual SLS service providers. Access www.supportedliving.com to get basic information about this group. Connections and Information on Resources for Community Living (CIRCL) is an excellent source of support that can be accessed at www.allenshea.com/CIRCL/CIRCL.html.

3. Gather Information and Resources

Begin gathering personal information from the individual, such as any thoughts about places he or she might like to live, special goals, health issues or concerns, and any “assessment-type” information about skills or other areas of need.

Professional Assessments

Previous or current professional reports may or may not be helpful, depending upon the age and quality of the report. Often, quality professional assessments are helpful in planning for situations or potential circumstances that may require additional resources. Ideally, useful assessments provide helpful strategies as well as diagnoses or technical explanations. Assessment information is most valuable when it includes these strategies and ideas for implementation.

Sometimes, these types of reports tell us more about how other people, or certain people in a given professional community, perceive this person. Keep in mind that many reports of this nature are written by professionals who generally have not had a long or meaningful personal relationship with the individual or his or her family. The point in mentioning this is simply to help keep the information in perspective, and to see it for the type of information it is. Often this equates to a snapshot in time as opposed to a lengthy feature film.

Medical and Related Areas

Medical, dental and vision issues and data about medications, side-effects, specific reactions or allergies, treatment plans and other therapeutic information is obviously critical information for people working with any individual. Medication tracking, follow-up blood work, and understanding medication interactions is particularly important on a daily basis. It is also, of course, important to ensure that medical, dental, vision, mental health and other therapeutic appointments are made and kept as recommended. Health insurance(s) and/or Medi-Cal and Medicare issues must be handled promptly and as efficiently as possible to avoid any potential glitch or lapse in coverage. Wheelchair fittings, communication device appointments and similar needs also fit into this “must do on time” category. A regularly updated calendar of medical and related appointments for the coming year can be a big help in reminding someone of the appointment that was made six months ago.

Under no circumstances should a individual ever run out of medications! This could create a life-threatening situation, and personal attendants must be made aware through training and ongoing monitoring that lapses in medications could potentially pose an immediate health and safety risk.

Daily Personal Routines and Rituals

To be most helpful in planning, the information on day-to-day skills, tasks and preferred routines or personal rituals (we all have them!) should be as specific as possible. Talk through a typical day, from waking up to going to sleep. Do you shower in the morning or at night? If it’s morning, is it before breakfast or after? Do you wash your hair or your body first? When do you brush your teeth? Although at first glance, someone may consider these types of questions “invasive” or “personal”, they are important things to know if you are responsible for supporting someone through the most intimate details of his or her life. In fact, they are very personal questions. And, supported living is a very intensive and personal set of supports. The point in asking the questions is to help keep the services from being invasive or disruptive to the

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person's preferred routines. Imagine needing this type of intimate service, being unable to communicate verbally what you really want and need, and having someone new come into your home to provide support. Would you prefer to let the personal attendant do things his or her own way, or your way? For most of us, if we were repeatedly subjected to someone else's idea of what our daily routines and rituals should be, we would surely have labels such as "aggressive", "non-compliant" and "challenging behaviors"!

If you are the person's parent, you may feel you already know these things. Even so, gather as much information directly from the individual as possible. This is a good time to begin supporting the individual to take more responsibility for himself or herself in this area. Supported living services are a wonderful safety net for individuals while they are learning to take on more self-responsibility, give directions to staff, and to let people know in a cooperative but firm way, what they need.

Other Resources

Begin your search for resources in your local area, including various community assistance programs to help with housing, furnishings or utility costs for people in the "low" to "very low" income designations. Think beyond "disability" to generic resources. More information on community and/or generic resources is found in Section V of this manual.

4. Develop the Individual's Person-Centered Plan

Whether you use a specific format or process, such as a PATH, MAP or Essential Lifestyle Plan (ELP), or just get together more informally with the circle of support, including the regional center, it is critical to talk about the key issues:

- Who is this person? From our collective knowledge, what can we say about him or her? What have you learned from him or her?
- What qualities, talents, skills and strengths does he or she possess?
- What are the desires and dreams of this person? What are the "non-negotiables" in this person's life? What does the individual need to be happy and stay safe on his or her own terms?

- What are the concerns that the individual or circle members have? How can they be addressed?
- What services, supports and trainings are needed and desired by the individual?
- What unique goals does the person have? What will his or her life look like next year at this time? Several years down the road?
- How can the circle come together to assist the individual in creating the individualized lifestyle that he or she wants to live?
- What specific tasks and/or commitments can each of us take on to assist the person in having the life that he or she desires?

Once we have this information, together with the information discussed previously in Item 3, we can get serious about developing a unique SLS service design that truly meets the desires and needs of the individual, and the coordinated IPP.

5. Assign Tasks to Circle Members Willing to Help

This is where the rubber meets the road for the circle of support. Who is willing to assist the individual with looking at housing? Who is willing to check the papers and talk to property managers, real estate agents and landlords? Who can help check out Section 8 housing assistance? Does anyone know someone at a local college or other potential source of personal attendants? Is someone willing to make informational phone calls to a list of agencies or people they know to “spread the word” that the person is looking for support staff? Who can work with the individual to develop a list of questions that he or she would like to ask potential employees? Who wants to go shopping with the person so he or she can begin to visualize what “home” will look like (colors, styles, etc.)? Who would like to work with the individual on a list of household items needed, and maybe register at Target or some other stores where people could go to purchase something to help out? Who has unneeded things at home that the individual could look at to

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see if he or she could use them? Can anyone help write parts of the service design? Does anyone know a banker or insurance agent who might be helpful? Does anyone know someone with a truck, who would volunteer to help move things? Who will physically pack and move everything? Who is interested in just going to a movie or out to dinner with the person during this exciting, but somewhat uncertain, time?

Of course, these are part of the vendor's responsibility, but how the responsibility gets met can be very individual. There are a million details to take care of. The circle of support is a perfect vehicle for accomplishing the work of many in a shorter time. Together, make a list, then ask people to choose some tasks they can and will do. Set time lines and deadlines for task check-points and completion! Sometimes people mean well, but don't understand the timing or urgency of a particular task. One thing could hold up a whole list of other things that need to be accomplished.

Don't be shy about asking people to help out in specific ways. Circle members may also have friends, relatives, co-workers or children who would love to be part of this exciting time. If other people offer to help, take them up on it. Keep a detailed task list with the name and contact information for each person helping with these tasks, and ask each person to report back to you when the task is completed or at some pre-determined point.

One word of caution... remember to monitor and document that the tasks really got handled. Few things are worse than having a person excited and ready to move, an enthusiastic group of volunteer friends and movers, a stack of boxes, and no truck.

6. Start on the Nitty-Gritty Details

Even before you develop your service design, there are things you can begin to investigate and do. This is not an exhaustive list, but rather an overview of suggestions to get you started.

- ***Spread the News***

Tell everyone you know what you are doing. People love to be involved

in positive and exciting things, and you never know what will come to you and the individual by letting the world know (confidentiality issues, of course, should be respected). Personal attendants and other support staff, resources and good surprises can come from the most unexpected places.

- *Help the Individual Start Collecting Household Items*

Once the basic decisions are made and planning has begun, it's exciting and motivating to begin looking for and accumulating things for the person's new home.

This can be such a big step for everyone. Many parents who never thought their children would be able to live in homes of their own have said that, although they saved certain dishes and household items for the person's siblings, it never occurred to them to save things for the individual's future home. What a nice right of passage to be past the old limitations, and on to helping the person choose just the right items to "make a house a home".

When we think of all of the items, big and small, that it takes to furnish our homes, we realize it's never too early to start collecting things! If storage is an issue, call on the circle of support for ideas or space.

- *Basic Business*

Start working on getting the basics lined up. Employer forms, insurances, a bookkeeper or accountant, bank, computer software, supplies and other daily necessities will all have to be dealt with. While you are developing the service design and budget, then waiting for regional center approval, these other things can be in process so you and the individual will be ready when the regional center gives the O.K. For a start:

- ❑ Contact your current insurance agent for your personal coverages, and talk about what you are doing. Ask for quotations on a renter's policy (or homeowner's, if the person will be purchasing a home), general liability, employer's liability, and an umbrella policy. Workers'

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Compensation information may need to be supplemented when you have more specific information about support configurations and people's hours; this can also be provided for some personal attendants as an "inservant" rider to the renter's or homeowner's policy, which is often the most cost effective way to provide the coverage. Remember that IHSS covers Workers' Comp for all IHSS hours worked, which is a major benefit. Ask your agent for additional recommendations and quotations. Find out how much money you will need to put all necessary insurances in place up front (even payment plans often require an initial deposit that is somewhat larger than the regular installment payment will be).

- ☐ Check out the federal requirements for employers and related forms at www.irs.gov.
- ☐ Check out the state requirements and forms at www.edd.ca.gov.
- ☐ Apply for employer numbers from the IRS and from the California Employment Development Department.
- ☐ Contact bookkeepers, payroll services, CPA firms and banks with payroll processing for small businesses. Explain what you will be doing and get quotations.
- ☐ Talk with your own and several other banks, or even credit unions to which you may belong, regarding your needs for a checking account. An initial line of credit would be wonderful, to help defray some of the cash flow crunch of the first few payrolls before you begin to receive the regional center reimbursement. A separate, dedicated credit card is also helpful when purchasing supplies and other necessities. Although you can use the dedicated checking account or reimburse yourself, it is sometimes easier to have a card just for this purpose.
- ☐ More specific information is in Section V.

Although you may feel that some of these things are a bit premature, realize that they take time to initiate and process. For example, you cannot employ people without Workers' Compensation in place and your employer identification numbers. For the sake of keeping things separate from your own resources, it is recommended that you not use just your social security number, or the employer number from any other business that you may have.

7. Begin Developing the Service Design

Once again, collaboration with the regional center is critical at the beginning of the SLS process, and remains a crucial focal point throughout the time that the person is receiving supported living services. Regardless of who the vendor may be, if the regional center service coordinator does not understand supported living philosophies and values, there may be an unnecessary tension in the relationship.

Make every effort to involve the service coordinator and keep him or her updated as to progress. Even if the person does not have time to come to every circle meeting or have regular phone contact through the planning process, keep him or her posted through e-mail, voice mail messages and/or minutes of circle meetings. He or she will appreciate your willingness to keep the regional center informed of progress, and to provide the service coordinator with the tools and information to do a good job for the individual. When you continue to promote the opportunity to work as partners in this process, you will create credibility, trust and a positive working relationship. This will be an essential part of working as a team to ensure quality supported living services to the individual, and respect for you as a vendor.



CIRCL

CIRCL's mission is to create opportunities for building and sharing individual, organizational and community strengths in supported living.
More about what we do!

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Section IV:

Developing an Individualized Supported Living Service Design



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IRS Announces Hundreds of Jobs

The Large and Mid-Size Business Division is seeking qualified candidates to fill hundreds of GS-13 technical positions in various locations across the country. The job announcements appear on the Office of Personnel Management web site at USAJobs. These senior technical-level positions require strong analytical and professional accounting skills.

Check out the federal requirements for employers and related forms at www.irs.gov

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Section IV:

Developing an Individualized Supported Living Service Design

Why should I have to write a service design for SLS?

This is a good question, and one that many people ask. After all, you will not be an “agency” providing supported living services to a wide range of people. Your ultimate goal in being a vendor is simply to provide the best opportunity for a quality life, with the appropriate individualized services and supports, to one person that you care about (possibly two, if friends have chosen to live together). Those of us who are parents often feel that we already know what our son or daughter wants and needs, as well as the standard of quality we expect. Especially if the individual is anxious to move, writing a service design for SLS can seem time-consuming, intimidating, and unnecessary. The tasks involved just in setting up the services, finding housing, identifying support staff, and coordinating a move-in may feel overwhelming by themselves. Why add to the work at hand by writing something that will just sit in the regional center’s file?

Writing a service design is a good idea because...

- **The process is helpful to everyone.**
The process of developing each of the areas of a service design for SLS is a valuable tool in the planning of services and supports. It provides a chance for the vendor, individual, and circle of support to have conversations about a number of things that might not come up right away, but would have to be dealt with eventually. Who will actually be the first one called in an emergency? Who will fill in when a personal attendant calls in sick at the last minute? How will you train new staff, and who will do it? Thinking through all of the “what if’s” that should be addressed during the development of the individual’s service design gives everyone a much more concrete idea of how it will all fit together, and can help to avoid panic when the unexpected occurs.
- **It can be your road map.**
A well-written service design, together with the individual’s IPP, will provide a sound road map, especially when life becomes unpredictable. It can be

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very helpful, and even comforting, to be able to look at the service design for ideas when things move in a way you did not anticipate. Going back to the original mission statement, values and expected outcomes can be valuable periodically to remind you of the purpose and intent of all of this work. It will help you assess how far the individual and you have come, and where you are going. If nothing else, it is rewarding to see that you are on the right track.

- **It helps to ensure continuity of service.**

Although most of us are pretty confident that we will be here tomorrow, the truth is that we never know what tomorrow will bring. What if you decided to go on a long vacation, or had to be out of town tending to an ill or elderly relative? Or, if you become seriously ill for an extended period, or are injured in an accident? Despite our resolve to be immortal, anything could happen. What if you just get tired of overseeing things and want to hand off more responsibility to someone you hire? For a multitude of reasons, having a service design to refer to can be instrumental in providing a continuity of services and supports. The service design (minus the budget, of course) is even a good training tool to share with new support staff and new circle of support members, to help them have a better understanding of the individual, supported living, and their own roles.

- **It reassures the regional center.**

Regional center staff tend to have more confidence in your ability as a vendor if you are able to write a clear, concise service design that makes sense. It helps them to see that you have approached supported living from an organized, thoughtful and individual-centered perspective. Even if you have had a long relationship with the regional center as a parent or other family member, your role as a vendor is much more complex. A quality service design may also provide an assist when you are negotiating the budget. Extraneous expenditures and unexpected costs can sometimes be the result of poor planning. If the regional center can see in writing that you have a well thought out plan, including the necessary contingency planning and cost controls, they will feel more secure in meeting their own responsibility to the individual, as well as meeting the goal of cost-effectiveness. Individual

SLS vendors are definitely in a partnership with both the individual and their regional center. Trust is the basis for a stronger and more responsive collaborative relationship between you and the regional center. When this is in place, it is much easier to call on the regional center to help handle life's little crises when they do arise.

- **The SLS Regulations say so.**

The SLS Regulations specify that SLS vendors must submit a service design to the regional center for approval. However, there is a provision that allows regional centers to waive this requirement for single household, or individual, vendors. Refer to the SLS Regulations, Article 4, Section 58630 (d). Although it may seem attractive at first glance to skip writing the service design, it is not advisable. Remember that having a well-thought-out service design will be a guide post for the vendor as well as the circle of support when things go awry or become confusing.

A few more words about the SLS service design...

SLS agencies serving more than one individual have one service design for the entire agency, and then develop an annual ISP, or Individual Service Plan, for each individual. The ISP, which should coordinate with the IPP, explains how the agency will meet the unique goals and service and support needs of the individual individual.

When the vendor is providing SLS for one person, or two or three people living in the same home, an ISP is typically unnecessary and not required. However, the IPP and the service design must then be strong enough to carry the full array of information detailing the goals, desires, strengths and needs of the individual; what services and supports will be delivered; how and by whom the plan will be implemented; periodic evaluation and individual satisfaction measures; and, the expected outcomes.

One of the key benefits of supported living is the flexibility to continually evolve and change to meet the individual's changing desires and needs in a natural, unique way. Most of the time, service designs allow for anticipated personal growth, as well as other changes that are more in the area of new goals. These types of

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changes are usually not substantial enough to warrant a full re-write of the existing service design, as long as the IPP is reflective of changing goals. However, in the event that the service and support needs have changed substantially, updating the service design may be necessary to accurately reflect the nature of the services and supports. For example, when a individual experiences significant health problems and requires ongoing nursing or other more extensive medical care, an updated service design should be submitted to ensure that everyone is informed and understands the nature of the services required, and a plan is in place to provide these supports.

Some regional centers may ask single household vendors to update their service designs on a more regular basis. If this requirement varies greatly from what is expected of other SLS agency vendors, talk with your regional center about the information they really need or want to see. There may be some other alternative that would actually provide them the more specific information they are looking for, such as an annual update, amendment or progress report, but would not entail the hours necessary to fully re-write the service design. Similarly, contracts and budgets can usually be renewed without the need for intensive re-writes of the service design when both parties understand what the critical points of discussion and agreement are.

Communication is a wonderful thing. It can go a long way toward saving expensive time, resources and relationships.

The remainder of this section has more specific information on writing the SLS service design. Remember that SLS service designs for individual individuals should be unique, and not be “cookie-cutter” versions of someone else’s service design. The guidelines on the following pages simply give you a place to start and a reference. For the service design components listed in the SLS Regulations, see Article 4, Section 58631 for more detail.

Example SLS Service Design Outline Single Household Vendor

- I. Mission Statement**
 - A. Values and Philosophy
 - B. Goals for SLS Service
 - C. Long-Term Vision

- II. Implementation of Supported Living Services Philosophy**
 - A. Supporting Individuals in Self-Determination
 - B. Necessary and Appropriate Services and Supports
 - C. Relationship, Social & Community Supports
 - 1. Typical home environment
 - 2. Community access; accessing generic & natural supports
 - 3. Circles of support and relationships
 - D. Ongoing Monitoring
 - 1. IPP changes reflecting supports
 - 2. Services & supports responsive to individual needs and preferences
 - 3. Health & safety maximized
 - E. Supported Living Services Training for Individuals

- III. Service Policies and Procedures**
 - A. Internal Grievance Procedures
 - B. Record Keeping
 - C. Evaluation
 - 1. Individual Satisfaction
 - 2. Regional center Performance Evaluation

- IV. Human Resource Development**
 - A. Personnel Standards, Hiring Criteria and Recruitment
 - B. Screening Procedures and Practices
 - C. Retention of Qualified Staff
 - D. Orientation for Paid and Unpaid Staff
 - E. Continuing Training and In-service

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V. Budget for Determining Rates

- A. Administrative Rate
- B. Direct Service Rate

VI. Attachments

- A. Organizational Chart (see "Examples" section of manual)
- B. Supported Living Process Diagram (see "Forms" section of manual)
- C. Training Checklist & Evaluation (see "Forms" section)
- D. California Mandated Reporter Form (see "Forms" section)
- E. Regional center Special Incident Report Form (see "Forms" section)
- F. Individual Satisfaction Vendor (SLS) Evaluation (see "Examples" section)
- G. Individual Satisfaction Employee Evaluation (see "Examples" section)
- H. SLS Vendor Employee Evaluation (see "Examples" section)
- I. Vendor Grievance Procedure (see "Examples" section)
- J. Examples of training materials for staff, individuals and others
- K. Other [Specify]

Mission Statement

Your SLS service design begins with a Mission Statement. This includes a description of your vision, values and philosophy about supported living and providing services. Give a brief overview of what you believe about people having the supports they need to live in their own homes, why you want to provide those supports, and how you believe you can assist the person to live as he/she chooses. If you will be your own vendor, tell why you want to live in your own home, and why you want to be your own service provider.

1. My values about people living in their own homes and making their own choices include:

2. My main purpose (reason) in providing supported living services is

3. My goals for providing supported living services are _____

4. I want to provide supported living services for _____ because

5. My long-term vision for providing supported living services is _____

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Implementation of SLS Philosophy

A. Supporting individuals in self-determination

Describe how you will support and assist the person to:

- ☐ develop skills for making informed choices & decisions
- ☐ have daily opportunities to make choices & decisions
- ☐ act on his/her decisions & choices, including follow-through
- ☐ freely communicate preferences, needs & choices in any way he/she chooses
- ☐ identify and plan for his/her short-term and long-term goals
- ☐ involve a circle of support for planning, support & friendships
- ☐ have support persons that understand & value self-determination
- ☐ become an effective and vocal self-advocate
- ☐ know and act on his/her rights and responsibilities
- ☐ have control over his/her life

B. Necessary and appropriate services and supports

This is a good place to include key background information and an overview of the person and his/her current situation. Much of the day-to-day information about the person, individual preferences, strengths, needs and goals will be discussed in this section. Some person-centered planning with the circle of support should already have occurred in order to confirm that the person wants supported living, and has chosen this person to be his/her vendor. Address issues such as how you will assist the person in locating a home & furnishings to start out, accessing low-cost and generic services, how you will provide support to make decisions about whether to live with a house mate (now or later), how you will help find house mates and other staff, and how you will assist the person in managing his or her staff, including resolving difficult issues of disagreement. For example, will you utilize a facilitator, house manager or coordinator to assist in supervising staff and implementing SLS? If so, how will this work? Will you be including this position in your proposed budget? Are you clear about this position's job description? What will you do if the individual

chooses a different house mate, or chooses another house mate receiving SLS from a different vendor? Because people's lives flex and change, the service design should describe how you will be responsive to changes requested by the individual?

This is also where you will describe the primary part of the person's daily routines and activities, as well as the support plan for providing daily services. Include specific information about who will support the individual and what types of support will be given for personal assistance with grooming, bathing, dressing, and other personal care tasks, household chores, other typical maintenance, meal planning and cooking, budgeting, managing money daily and saving for special needs or desires, medical and other personal appointments, and the myriad other issues we all handle in a typical day. Include an example of a typical monthly schedule. Will you be providing SLS for all times the person needs supports, or will he or she have a job or attend a day program? If so, will the individual use public transportation, a contracted specialized transportation service, or be transported by personal attendants or house mates? Is this a service you will provide as part of SLS, or will that be separate?

What about communication and visits with friends and family, and other supports necessary to develop and maintain meaningful relationships with people one cares about? What kinds of social and recreational opportunities and activities are important to the person, and how will you support participation? Tell how you plan to assist the person by facilitating new experiences. How will you encourage the person to become an active self-advocate? How do you envision providing these supports? Who will actually do these things, and what are the mechanics of ensuring opportunity and freedom together with exercising rights and responsibilities?

A well-thought out and well-written SLS service design for an individual can actually take the place of the more formal "assessment" document(s) typically used by agencies. The individual service design also, in effect, functions as the person's ISP (Individual Service Plan). If there are two individuals, this could be accomplished by incorporating different sections for the differing preferences, needs and goals into a single comprehensive plan; or, by writing one primary

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document covering the more general information and attaching two individual documents to the service design providing the specific personal information, including differing preferences, goals, and service & support needs.

One important note to remember when there are two (or three) people who have decided to live together is to ensure that each person is treated, respected and supported as an individual. Living together does not mean that preferences, needs, strengths, goals or even many activities will be the same. Plan for and ensure that individual choices, services and supports are available as necessary.

To summarize, describe how you will:

- ☐ communicate with the person, in ways that he/she chooses, to find out what he/she wants and needs
- ☐ use person-centered planning and an ongoing circle of support to determine the person's preferred goals, objectives, and desired personal outcomes
- ☐ identify the person's typical patterns of daily life (or preferred daily activities) and the services and supports the person will need to achieve this
- ☐ decide the specific types, levels, amounts and hours of services & supports the person will need in his/her daily activities, and create a plan to meet these specific needs
- ☐ explain and document these service preferences and needs
- ☐ implement the service and support plan (make it happen)
- ☐ provide a full array of comprehensive services and supports

In-Home Supportive Services (IHSS), hourly support services provided through each county's Social Services Department and based upon an individual's daily needs and financial need, may be available. If the person has not already become eligible for IHSS, the vendor (or a circle member) should contact IHSS to schedule an assessment appointment. IHSS hours must also be factored into this equation, both in the service area and in the budget area. How will IHSS be utilized and coordinated with SLS? If the person already has IHSS services, you will have a better idea of how many IHSS hours will be available. However, IHSS will re-assess the person when SLS goes into effect. The number of IHSS hours authorized may be different in SLS than in the type of situation in which

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the person is currently residing; for example, no IHSS is in place if the person is living in a licensed facility, but even a person living in his or her parents' home will have a change in the number of IHSS hours assessed when moving into a place of his or her own.

In this section, you will want to look at the types of services that IHSS pays for, and see how you can utilize those before using regional center hours. This is because IHSS is considered to be the “generic service”, and must be used before regional center funding. Staff paid through IHSS are actually “statutory employees”, and the state pays Workers’ Compensation insurance for these hours. Technically, IHSS employees are not employees of the vendor while they are working IHSS hours. In actuality, IHSS hours are a transaction between the individual and IHSS; the vendor is technically not a party to this arrangement. This can be, understandably, confusing for staff and the vendor. To further complicate the issue, the IHSS rate of pay is frequently lower than what the SLS vendor would pay. Some counties are still paying only minimum wage, while others may be paying \$9.50 per hour because their workers are unionized. Because of the federal participation in most of IHSS funding, the vendor is technically not allowed to supplement the IHSS rate. There are some services for which IHSS pays that are allowable to supplement, but these are by far the minority (“advance pay” situations, for example). Because of the technical and unique nature of this issue, and the individualized needs of each individual, it is too complex to fully explore in this manual. However, if you have questions about IHSS, it is recommended that you contact your local IHSS office, regional center, Protection and Advocacy, Inc., a supported living consultant and/or an experienced supported living vendor for more information. CIRCL, the California Supported Living Network (both referenced in Section III), and Protection and Advocacy have access to individuals from whom you can receive technical assistance. Protection and Advocacy also has excellent information on IHSS on their website at www.pai-ca.org.

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C. Relationship, social and community supports

Describe and give examples of how you will assist the person to:

1. Establish & maintain a typical home environment
 - ☐ a home and neighborhood chosen by the person receiving services
 - ☐ a home that truly reflects the likes, dislikes, personality and lifestyle of the individual
2. Access the community, generic resources & supports
 - ☐ involvement in a wide range of activities in the community and with friends
 - ☐ resources & services, including low/affordable income services: IHSS, SSI, Section 8 (housing), annual renters' rebate, utilities discounts, special needs phone equipment & services, counseling, Hospice, shopping assistance, etc.
 - ☐ social and leisure opportunities of interest to the individual
3. Develop, nurture and expand a circle of support, and relationships
 - ☐ ongoing circle of support gatherings
 - ☐ expand circle to include new relationships
 - ☐ establish and/or strengthen relationships with neighbors, friends, family, co-workers, others
 - ☐ relationships of mutual support and respect

D. Ongoing monitoring

- ☐ How will you facilitate changes in the IPP to accurately reflect supports?
- ☐ Describe how you will ensure that services and supports remain responsive to the individual's needs and preferences at all times?
- ☐ Explain how you will maximize the individual's health and safety.
- ☐ What types of self-monitoring will you do?
- ☐ How will evaluation outcomes be incorporated into your service delivery to improve services and supports to the individual?

E. Supported Living Service (SLS) training for individuals

Describe how you will provide SLS training to the individual and to the unpaid members of the individual's circle of support. The training must include, as appropriate to each individual's preferences, all of the following:

- ☐ Philosophy of SLS;
- ☐ Individuals' rights;
- ☐ Identification and reporting of suspected abuse or exploitation of the individual;
- ☐ Internal grievance procedure(s) of the SLS vendor; and
- ☐ Strategies for building and maintaining an effective circle of support.

Service Policies and Procedures

A. Internal grievance procedures

Include an explanation and how you will implement it:

- ☐ How do you propose to resolve conflicts or problems?
- ☐ Describe your grievance procedure or other process to address individual concerns or complaints of personal attendants and other employees (simple is best).
- ☐ Describe your grievance procedure to address individual concerns or complaints of the person receiving services.
- ☐ Show how you will ensure that everyone knows and can access the process.

B. Record keeping

Basically, there is nothing unusual or difficult here. The regional center simply wants to know how you will be accountable for the funding they are providing. Tell what and how you will use accepted standard accounting practices:

- ☐ It's O.K. to hire someone else to handle all or part of the payroll and accounting process - explain who and what they will do. This could include specialized payroll services, local banks with payroll services, a CPA or bookkeeper you trust, or someone in your family who is a QuickBooks Pro whiz. [Payroll service companies tend to be somewhat

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expensive for small situations like single household vendors; even the banks can cost less. Check prices carefully.]

- ❑ Talk with your regional center regarding their specific accounting processes and their expectations of you as a vendor. Include appropriate information in this section of your service design.
- ❑ Ensure that you will keep all records for at least three years after the provision of services.
- ❑ Make records available to the regional center when necessary.
 1. Service design and any amendments
 2. Accounting records, payroll, taxes, bank, household fund ledgers, other financial records
 3. Human resources/personnel, time sheets, training, grievance
 4. Service evaluation
 5. Other documentation of actual service delivery
 6. Specific records identified in SLS Regulations
- ❑ Human resources (HR) is one of the stickiest areas of being a SLS vendor. It is also the area where you have the most potential liability. Although your payroll and bookkeeping issues may seem important, your HR issues are even more so. Record keeping for HR can feel fairly complex at first, but a good HR consultant or experienced HR coordinator can put your records in order, your mind at ease and your processes in place.
- ❑ Training records, evaluation, and individual satisfaction documentation are critical to keep. As soon as you try to cut corners, you will end up paying more. It pays to do it right the first time whenever possible.

C. Evaluation

Decide, with the person receiving services, what qualities and supports are most important to evaluate:

- Individual Satisfaction Evaluation
 - ☐ Supported living services and vendor support of individual
 - ☐ Individual personal attendants (employees)
 - ☐ Unpaid or volunteer support
 - ✓ Involve the circle of support in the individual satisfaction and evaluation processes, with the individual's permission.
- Regional center performance evaluation of vendor
 - ☐ This varies among regional centers. Check with your regional center to ensure that you know their criteria for evaluating your services as a SLS vendor.
 - ✓ Explain how you will implement changes in your services and supports based on feedback from various evaluations.

Human Resource ("HR", otherwise known as "Personnel") Development

A. Personnel standards, hiring criteria & recruitment

- ☐ Describe how the personal attendants and other staff will be chosen, with assistance, by the person receiving services.
- ☐ Outline roles, responsibilities, and employment standards.
- ☐ Detail specific levels of experience, expertise or unique training necessary in order to appropriately support the person.
- ☐ Explain where and how you will find support staff.
- ☐ Give information on proposed compensation plans for support staff, including benefits such as health/dental insurance, paid vacation, sick time, etc.
- ☐ Explain any special compensation, such as room and board for live-in personal attendants ("house mates") in lieu of certain wages.
- ☐ How will you ensure compliance with California and federal labor laws? (For example, contracting with a human resources firm or consultant, using the California Chamber of Commerce Labor Law Digest, etc.)

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- ☐ How will you do future and contingency planning?
- ☐ Describe how you will ensure emergency and other critical back-up staff at all times.
- ☐ How will you address the individual's or your own concerns about employee performance outside of the evaluation process? How will you handle employee disciplinary actions?

B. Screening procedures and practices

- ☐ Outline your employee application screening and application process.
- ☐ Explain your process for background & reference checking. The SLS Regulations do not mandate criminal background checks for SLS staff. Remember that there are many questions you may not ask prospective employees, and it is important that you research this area to avoid inadvertent violation of discrimination and labor laws. Standard background checks can provide you with important information. Because individuals who are not part of an agency are not privy to the same services as agencies for fingerprinting and background checking through the Department of Justice (DOJ), you may consider contracting with another SLS agency provider, or even a day program or similar agency, to assist you in handling these issues. Safety and security are important, as is peace of mind. Of course, whether checking through LiveScan, DOJ, or private services specializing in background checks, we all know that nothing is fool-proof. Your best day-to-day system is for the individual to have awareness and safety training, and to have a strong circle of support, including current staff and people in your family and community, who will be aware and watchful for anything that appears or sounds unusual or out of place.
- ☐ Tell how you will keep all necessary documentation.

C. Retention of qualified staff

- ☐ Outline methods you will use to attract and retain quality personal attendants and other support staff.
- ☐ Describe any incentives or proposed incentive plans aimed at staff retention.

D. Mandatory orientation for paid and unpaid staff

- ☐ Show how you will provide this within the first two weeks.
 - Overview of your mission, policies, practices and SLS philosophy & values
 - IPP objectives of individual
 - Practical use of SLS to promote individual self-reliance
 - Rights and protections of individuals
 - Your internal grievance procedure(s)
 - Fair hearing provisions
 - Regional center Special Incident Reporting (SIR)
 - Mandated Reporter provisions/individual protection from abuse, neglect, financial exploitation/related documentation & reporting procedures
 - Appropriate staff conduct in establishing and maintaining personal relationships with individuals
 - Participation of individuals in a teaching, consulting or other instructional resource capacity
- ✓ This requirement may be waived by the regional center for single household vendors.

E. Continuing training and in-service

- ☐ Develop the expertise and commitment of staff.
- ☐ Results in higher quality supports
- ☐ Employees gain a professional development benefit.
- ☐ How will you cover a range of topics? Give examples, particularly for specialized training the individual may require of his or her support staff.
- ☐ Who will provide the training?
- ✓ This requirement may be waived by the regional center for single household vendors.

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Budget

Regional centers vary in their approaches to negotiating initial budgets, as well as any budget increases, and in billing practices. Budgets for persons receiving SLS from single household vendors vary in scope and format, but should be based primarily on the IPP of the individual, including his or her specific and unique needs, skills, strengths and goals.

Individual budgets may be developed in a variety of ways. Use the specific information within the service design, together with any other pertinent information on services you will provide or costs you will incur, and begin to build your budget item by item. An example of the types of line items to include in your SLS budget is included in the

Forms and Samples section of this manual. Additional line items or costs may be negotiated with the regional center. When in doubt about whether a particular cost may be allowed, a good place to start is with the SLS Regulations.

At the minimum, make sure that you capture:

- ☐ all support staff direct costs, including personal attendants, a community support facilitator (manager-type person to oversee the home and services), and other staff as determined by the individual and vendor;
- ☐ related payroll and employee benefits costs;
- ☐ cost of rent, utilities and groceries for house mate(s), or live-in personal attendant situations where part or all of the employee's compensation is room & board in lieu of wages;
- ☐ insurances: Workers' Compensation, general liability and others that may apply to you (check with your insurance agent);
- ☐ training costs: actual materials, fees and consultants, in addition to the extra staff time for participating in training;
- ☐ out-of-pocket costs for personal attendants to accompany the individual to activities in the community;
- ☐ mileage reimbursement for staff using their own vehicles to take the individual to community activities, medical and other appointments, grocery shopping, banking, social visits to family and friends, meetings with agencies, self-advocacy meetings, and similar trips;
- ☐ costs to accompany the individual on public transportation;

- ❑ administrative costs: see the SLS Regulations for a list of allowable costs, including administrative mileage, supplies, insurances, equipment, appropriate utilities and office rent, phones, and payment for administrative services such as your own compensation;
- ❑ necessary consultants: examples include individual-specific, such as specialized behavior and training, and administrative, such as human resources and accounting;
- ❑ health & safety costs such as pagers, cellular phone(s), fire extinguisher, etc.
- ❑ other miscellaneous costs, based on the individual situation.

As a point of clarification, **parents are allowed to be paid** for the services they provide as vendor or administrator. This has been a confusing issue for some regional centers. There is nothing in either law or regulation that prohibits regional centers from compensating parent vendors for their services, or allowing it as a cost in a budget for SLS. First, anyone who provides services should be paid, and if the parent is filling the role of the administrator or vendor, their services should be compensated. Anyone else who was providing the same service, even through a parent vendor, would be compensated. It is a reasonable cost associated with the administration of the supported living services. The amount of time necessary to successfully administer SLS, and the liabilities, stress and just plain work inherent in carrying the responsibilities of being a vendor and employer are not within the realm of “natural supports”. Further, parent vendors often cut back on their careers or other jobs to do this, resulting in a loss of income to them. Finally, denying compensation to one vendor for services for which the regional center compensates other similar vendors is discrimination (short version: if they pay other SLS vendors for administrative wages, fees or costs, they should pay you.)

Often, when this issue comes up, it is a case of someone telling someone who told someone that parents cannot be paid. If you are told it is their “policy”, ask to see the policy in writing. Even if there is a written policy, it may or may not be the appropriate reference for SLS, which is a unique situation when the parent is the vendor. You can always discuss your particular question or situation with the

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Executive Director of your regional center, DDS staff, or Protection & Advocacy, or SLS consultants for more specific information.

Billing to the regional center can be in the form of one single SLS rate (hourly or monthly), or split into an administrative rate and a direct service rate, depending upon negotiations with and varying policies of different regional centers.

One note to remember: In addition to the SLS Regulations, vendors must ensure compliance with California and federal labor laws. Although Supported Living Personal Attendants work under California IWC Wage Order 15, which exempts them from overtime, meal breaks and other mandatory breaks, SLS vendors are required to pay personal attendants a minimum of \$6.75 (or current minimum wage) for each hour, even if they are sleeping at the individual's home overnight. The key factor is that the employee is unable to leave at his or her discretion. Make sure that you count the overnight hours and associated payroll costs for that amount in your budget projections.

If you have questions about the Wage Order or other labor law, there are multiple state web pages that you can access for the information, in addition to availability of labor specialists by phone and in person at your local office of the Labor Commission. Of course, there are also labor law attorneys and consultants who could be part of your SLS vendor support team. The time and expense involved in educating yourself about the specifics of labor law as it relates to supported living is well worth the cost and effort, even if it is somewhat frustrating. Without any guidance, you will be much more frustrated and could potentially incur thousands of dollars in fines. This type of technical assistance should be included in your proposed budget to the regional center.

Contracting, Billing and Getting Paid

Vendor Contracts

According to regulation, regional centers must have contracts with their supported living vendors. The Supported Living Services Regulations briefly state vendor-regional center contracting requirements and necessary contract components.

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Read those provisions before entering into any contract for SLS (Article 8, Sections 58670 - 58672). There is no standard contract, and different regional centers use different formats. Although nothing in this manual is intended as legal advice, here are several general points listed below when considering the content of a SLS vendor contract.

- ❑ A contract is only legally binding when both parties agree and have executed the contract with signatures and dates.
- ❑ Contracts must have a starting date and an ending date. Have a written provision that outlines how much lead-time is necessary or optimal for beginning to renegotiate your contract renewal. This will help prevent unnecessary lapses in services to the individual or payment to the vendor, as well as expired contracts that result in the regional center being out of compliance. Having time to think about and prepare reasonable contract renewals assists both parties to create a process based on actual data, and a document that best meets the needs of the individual, regional center and vendor.
- ❑ Contracts should clearly define responsibilities, benefits and penalties for both parties. They must benefit both parties.
- ❑ Compensation (the amount of the contract), and the associated terms of compensation, should be clear and understandable.
- ❑ Read the provisions of the contract carefully. Ask questions about anything you don't fully understand. If the answer to your question is still unclear, request further clarification before you commit to the contract in writing.
- ❑ Ask the regional center to document in writing all agreements the two parties have made; if they do not, document it yourself in a letter of understanding to the regional center and treat it as an addendum or attachment to the contract.
- ❑ Unless you are both the individual and the vendor, be careful about signing a contract with any provision that ties your performance as the vendor to specific goals that the individual "must" meet, especially if those goals are not in the individual's IPP. For example, one provision in a proposed contract presented to a parent vendor stipulated that the vendor's only performance objective/expected outcome was that the individual would "improve 10% in independence" each contract year!

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- ❑ Do not sign a contract with any provision that obligates the individual to do something when you have no authority to obligate him or her to anything. Unless you are the conservator, you have no legal right to obligate the individual to any contractual provision. Even if you are the conservator, the individual should be involved in any discussion or agreement regarding his or her specific obligations, and, obligations of the individual have no place in your vendor contract with the regional center unless you are both the individual and SLS vendor.
- ❑ Attempt to keep the contract as simple and straightforward as possible. Some legalese is inevitable in any contract, but having clear, concise contract provisions whenever possible can help to avoid misunderstandings, and benefits both parties in the long run.
- ❑ If you feel more comfortable, hire a contract attorney to look over the provisions of the proposed contract and offer you a legal opinion or advice before you sign it.
- ❑ Once the contract is signed, contact the regional center immediately in writing if you find you will be unable to fulfill any of the contract provisions.

A Word (or Two) About Negotiation...

The term “negotiation” is defined in Webster’s Dictionary as:

“to deal with (some matter or affair that requires ability for its successful handling) : MANAGE b : to arrange for or bring about through conference, discussion, and compromise <negotiate a treaty>...”

One of the most widely discussed topics in any conversation about negotiated rates, such as SLS rates, is the question: What does “negotiation” mean? Here are some basic thoughts on the subject that might help both parties as you go through the process with your regional center.

- ❑ Always negotiate in good faith. Yours will be a long-term relationship, and this is not the place to burn your bridges unless you have tried to come to agreement over time and have been left no other option.

- ❑ Listen, and give genuine consideration to what you hear. Try to put yourself in the other party's position.
- ❑ Ask what specific things are standing in the way of successful completion. Even if you think you know, clarify this. Then, ask: "If (xx issue) can be resolved, is there anything else that would still be in the way of our completing this contract?"
- ❑ Generally, the process of negotiation is seen as a voluntary process on the part of both parties. It is usually also a process presumed to be between two parties with equal power. In the best situations, each party gets the most important things that they need, and is willing to compromise, if necessary, on less critical issues. Obviously, a smooth, mutually beneficial process is the goal.

Some individuals, families, and service providers, however, believe that an imbalance of power exists in favor of the regional center. Individuals, families or vendors who come to an impasse with their regional center over services or rates (the most common issues) often complain that, because of the structure of the system and the regional center's role as the "sole source" of funding available for many services, certain regional centers have adopted a "take it or leave it" attitude.

On the other hand, regional center staff sometimes feel that they are pressured to meet unnecessarily expensive, unfair or unreasonable demands made by individuals, family members, advocates or service providers. From their perspective, they are trying to balance the needs of the entire community with the needs of the individual or agency and their budget restrictions. When this type of situation looms, be as honest as possible about what you need in order to meet the goals and objectives of the individual receiving SLS, and your performance objectives for providing quality services and individual satisfaction.

Be as creative as possible, and try not to see the issues as "personal." There may be underlying issues that have nothing to do directly with your situation, but are holding up an agreement. Try to look objectively at what each party could give, and at what each party needs to feel that the negotiation is successful. Remember

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that the longer you take to negotiate a contract, the longer the individual may have to wait for SLS.

Vendor Number

Upon approval of your vendor application packet, the regional center will issue you a vendor number. This number will be on each Purchase of Service (POS) you receive, and on each monthly billing statement. It is important to use this number when you are checking on any technical issue related to your contract, POS, or any billing.

Purchase of Service Authorization (POS)

Once you have come to agreement with the regional center on the appropriate SLS service plan for the individual individual, and the regional center and vendor have agreed to the terms, conditions and rate(s) within the SLS contract, the regional center will issue a "Purchase of Service" (POS) authorizing a specific level services for payment at a specific rate for each individual.

In many cases, the regional center issues an initial POS for the vendor's time in assessing the strengths and needs of the individual, then issues a separate POS for the actual ongoing Supported Living Services once the assessment is complete. Occasionally, a regional center may also issue an interim-type POS as a transition into SLS. The transition POS would be issued after the assessment and before the regular SLS. Some regional centers set a time frame, such as 90 days, for the transition. Typically, the budget for the transitional POS is a little higher than the ongoing budget would be. This allows for extra training and support necessary as new personal attendants and the individual get to know each other, as well as time for IHSS to do their (new) assessment, authorize and begin services. House meetings may also be more frequent in the first 90 days, giving everyone a chance to work out some of the "start-up issues" inherent in a new supported living arrangement. All of these extra things equate to extra personal attendant and other staff time to pay.

The POS is critical in the payment process. Regional centers do not pay for services unless their accounting department has a copy of the POS! Let the regional center know immediately if you do not receive the POS showing the SLS service for the individual, with the proper authorized number of hours per month, rate per hour or rate month, depending upon your budget agreement and contract. Take special notice of the POS expiration date, and communicate with the regional center at least 30 to 60 days prior to that date so you can coordinate the renewal of the POS.

Service Codes

Services are billed using “service codes” that are developed by the California Department of Developmental Services (DDS). There are two service codes that may apply to SLS. The first and most significant is service code 896 - Supported Living Services, which is the service code for all direct supported living services provided to the individual. It encompasses what, prior to July 1, 2001, were three separate service codes (current: “(896) Supported Living Services”; old: “(891 - 893) Personal Support”, “Training & Habilitation”, and “24-hour Emergency”). For further information, see the DDS Program Advisory dated May 24, 2000, which is included in the Appendices.

The current service code deals primarily with direct support wages and salaries, related employee benefits and other costs attributed to providing direct individual support. Obviously, this category is the largest cost center for any SLS provider. 896 may also include all related administrative costs -- including but not limited to liability and other employer insurances, vendor supplies and equipment, and other administrative costs as outlined in the SLS Regulations -- making it like a “one-stop shopping” service code.

Some vendors bill their administrative costs separately from the direct service costs. In those cases, the second service code is 894 - SLS Vendor Administration Services. Administration costs are then billed solely under 894; vendors may not, of course, bill administration costs under both service codes at the same time. The choice of whether to use one or two separate service codes is one that you must discuss, and sometimes negotiate, with your regional center.

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Whichever rate model is chosen and agreed upon, it is important to have clarification from your regional center as to:

- how they expect you to document your costs;
- what documentation they require at the time of monthly billing vs. documentation in your files in case of an audit;
- the preferred format for billing the regional center;
- when the actual billing is due at the regional center; and,
- when you can expect payment for services.

Billing Process

Typically, the billing processes and timing are similar from one regional center to the next. Regional centers pay in arrears, so your start-up funds for the first several payrolls, insurance and tax costs, and other up-front costs are important to have in place.

Let's walk through a typical month.

For example, you provide services from May 1st through May 31st. Near the end of that month (May), the regional center will send a billing statement showing the individual's name (or each individual's name), the "client (individual) I.D.", dates that the service is authorized from and to, the dates for the services you will bill, and either your monthly or flat rate (per individual) or your hourly rate and space to enter the number of hours of service provided, and the appropriate totals columns. If you have two service codes (896 - SLS and 894 - SLS Administration), you will receive one billing statement for each service code.

At the end of the month, enter the proper amounts, total the columns, and sign and date the form. If you provided SLS for the entire month, enter the service dates as 05/01/(yr.) through 05/31/(yr.). Each billing statement has a two copies, the top (white) which is the original and goes in the mail to the regional center. The bottom NCR copy (yellow) is for your files. Make sure you keep an organized file of your billing statements in the event of a question or lost form.

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The billing for services provided during May must reach the regional center no later than the 5th of the following month (in this case, June 5th). It's a good idea to get into the habit of just doing it on the first day of the new month, and mailing it immediately.

You should receive your payment for services provided in May by approximately the 17th to the 20th of June. As you can see, you will be running about six to seven weeks in arrears. This is important to remember as you plan your start-up costs. Many regional centers now have the option of direct depositing your payment into your account via Electronic Funds Transfer (EFT). If available, this way is faster and easier for both you and the regional center.

One last reminder about the billing process: remember to find out ahead of time what documentation the regional center will require you to submit with your billing statement. For example, if you must submit copies of certain receipts or time sheets with your billing, it will be most efficient to have those copied and ready to attach even before you complete the billing statement. Don't assume that the documentation required by the regional center's accounting department from an agency or another parent is what they will require from you. There may be variations even within the same regional center. As you get things more organized in the first few months, introduce yourself to some of the accounting staff by phone, if not in person. Get to know each others' names and develop a friendly rapport. They will appreciate your readiness to cooperate, and having a familiar name and voice on the other end of the phone will be a great help to you if something needs checking or verification in the future.

Other Things to Think About...

Bank Accounts

Have a bank account dedicated to receiving the income and paying the expenses of the SLS arrangement. It's a good idea to have a second name on the account for signature purposes, just in case of an emergency. You don't want to have unnecessary problems in the event that an emergency check needs to be authorized and you are not there, and you certainly would not want the account

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frozen if something unexpected happened to you. Do not put the individual's name on this account (unless, of course, the individual is the vendor).

Do not, under any circumstances, co-mingle your own personal money or the personal money of a individual in this account!

You might want to get a separate inexpensive credit card for your use and ease of purchasing supplies and other administrative needs for the SLS arrangement. If possible, use this card only for the SLS arrangement costs.

The individual should have a completely separate checking account of his or her own for payment of personal bills, rent, etc. (savings account is optional). An ATM card is a good idea for most people, but think carefully about the limits you and the individual will choose to put in place regarding the use of the ATM card, especially as it relates to personal attendants assisting the individual to use the card.

Remember that the individual's total liquid assets need to stay under \$2,000.00 at all times in order to qualify for SSI (Supplemental Security Income) and the SSI-related Medi-Cal, as well as IHSS. Individuals receiving SSA and/or retirement benefits of a parent also need to stay under the \$2,000.00 liquid asset limit; and, if total income exceeds the standard SSI rate for individuals living in their own homes, IHSS and/or Medi-Cal may assess the individual a "share-of-cost" for those services. Because this is a complex and individualized area too detailed for inclusion in this manual, you may want to contact Social Security Administration, IHSS/Department of Social Services in your county and Protection and Advocacy, Inc. for more detailed information.

Tax Implications

Even if you are comfortable preparing your own personal tax return, consider having your SLS tax return prepared by a Certified Public Accountant (CPA) or other tax professional. It is well worth the relatively small investment to assure the filing is done properly. This service will pay for itself, and can be added to your SLS budget as an administration cost. As a vendor, you will receive a Form 1099 from the regional center at the end of the year. It will be important for your CPA or tax adviser to understand the nature of supported living in order to most accurately reflect your tax liability.

Section V: Putting It All Together

Putting It All Together



House or Apartment Checklist (from Towards Maximum Independence, San Diego, CA)

Here is a way to look at a house or apartment where you might want to live. It will help you decide what is good about the place and what could be better. The best way to use this checklist is as follows:

1. Make sure you get a chance to view the house or apartment and the immediate neighborhood.
2. If you need assistance with the checklist, ask you Community Support Coordinator or someone else you feel comfortable with.
3. Write notes about what you find out about the place in the box provided.
4. Think about all of these things before you decide if you want to live in the house or apartment or not.
5. You may be looking at several different places - use this checklist to decide which house or apartment is best for you.

1. **The place is close to stores, banks, places to eat and other resources I will need.**

2. **The place is clean inside and outside.**

From *Supported Living Services Your SLS Training Tool Box*;
Connections for Information and Resources on Community
Living (CIRCL; April, 2001)

Assisting the individual

Personal Budget

Discuss assisting the individual in developing a personal budget. Available funds will depend upon his or her status with the Social Security Administration (SSI/SSA and/or other monthly payments to the individual), access to paid work, family support, and other resources, if any. Individuals who are over a certain threshold may be assessed a share of cost against their Medi-Cal payments or IHSS hours. If a trust is involved, be sure you understand the terms and conditions as they relate to the person's daily life and future planning. Helping the individual set up an estimated budget at this point may also assist the person is deciding how much to pay for an apartment, etc. Most individuals will have very little money left after meeting the regular obligations of rent, utilities, phone service, cable, groceries, clothing, co-pays and other necessities. Money for social and recreational activities for the individual usually come from this pot of money, as well. For this reason, Entertainment Books and similar resources can be very valuable tools in supported living arrangements.

Housing, furnishings and household items

A individual's experience in moving to a home of his or her own is much the same as for people without disabilities. The process begins with thinking about how and where one wants to live, and culminates in an actual move. It includes setting goals and timelines, and making realistic financial and lifestyle decisions.

Often, a individual may be unfamiliar with the choices he or she will need to make when it's time to think about living in his or her own place. The time to begin assisting a person with housing and furnishings for their own home is as soon as that person has decided they want to pursue SLS.

Individuals can begin to think about where they might like to live. They can start to look at apartments, condominiums, duplexes, and houses, so they can familiarize themselves with the pros and cons of various lifestyles. Having the opportunity to look at and think about different housing options is especially important if the

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person has lived only with parents or in group facilities. Asking if a person would rather live in a house or apartment is useless to the person who has no way of knowing the difference, or what that difference would mean to his or her own life.

A good way to approach this is to talk with the person and circle about personal preferences and what makes the person comfortable. Think about the features of each type of housing, and help the individual match up those features with his or her own personal choices and preferences. For example, if a quieter environment is preferred, away from lots of different people coming and going, a duplex or house might be better choices than the bustle of an apartment or condo complex. If social opportunities are important, an apartment or house in an area with an active community life or clubhouse might be a good option. In some cases, people are able to purchase a home, which means a search could begin anytime, and may take a little longer to finalize. However, home ownership means longer term security for the person, as well as more privacy and easier adaptation for special physical or other personal needs, and can be worth waiting for.

What about the impact of support needs and desires? First, if 24 hour or overnight support is necessary, a bedroom should be available for the personal attendant. Or, if the person would enjoy living with one or more housemates, a larger place with a flexible floor plan may be necessary. Privacy is an issue when more than one person lives in any home, and people tend to be happier for longer when they are comfortable in their surroundings. How can the circle of support and the vendor facilitate that comfort? Has the person always wanted a pet? If so, the housing search may focus on places that allow pets.

What about furnishings? Looking at magazines, catalogues and “window shopping” is a great way to get ideas and learn more about personal preferences. Visiting the homes of family members, friends, others in the circle of support, and individuals living in their own homes can help the person get a more vivid picture of “home” and feel the difference that colors, styles, and personal items in one’s surroundings can make. Talking to others who have gone through similar experiences also helps people visualize what individualized lifestyles look like, and how their own lives might look.

Once people begin to imagine their own lifestyle choices and the reality gets closer, they may be anxious to acquire some of the things they will need.

Of course, budget and practicality do take their places amid all of the excitement. It should be noted here that furnishings, household items, groceries and other personal housing expenses are not allowable expenses for the SLS budget under the SLS Regulations; in other words, these are not regional center expenses. Exceptions can be made and approved by the Executive Director of each regional center under certain circumstances (see the SLS Regulations), and are determined on a case-by-case basis.

This is a time for everyone to help with creative ideas. For housing, remember that, for individuals who require overnight support, many costs should be shared, lowering the overall cost to the individual. When these costs are associated with paid support, they are legitimate expenses under the SLS Regulations. Two examples are paid housemates who receive room and board in lieu of all or part of their wages, and portions of rent & utilities attributed to a “staff bedroom/guest room” necessary when an individual with no housemate requires 24 hour support; labor law requires providing a place for staff to sleep with “an expectation of privacy”.

Accessing HUD (Section 8) housing assistance funding can further reduce costs by a considerable amount. Even home ownership is becoming more common, with innovative down payment, grant and special loan programs designed specifically for persons with developmental disabilities. HUD voucher (Section 8) funds may now be used toward mortgage payments in many communities. Shopping for bargain furnishings and household items can be fun and affordable at garage sales, thrift stores, discount stores and warehouse stores. Some household goods and decorative items can be even more special when they come from a friend or relative.

There are some unique resources available in some local areas. For example, several non-profit agencies have set aside revolving funds, allowing individuals to take no-cost loans of up to several thousand dollars for moving costs, household goods and furnishings, deposits, down payment assistance or any other cost associated with making the exciting step into their own homes. Some businesses will give or donate used computer equipment and other items for individuals with

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minimal resources. Advocating in your own community for similar resources, private funding, and creative community participation can make it possible for more people to live in homes of their choice, enriching and benefiting each of our communities.

Deposits: rental, utilities, phone

Budget planning should include initial costs for housing, utilities, cable, and phone company deposits, as well as first and possible last months' rent payments, which can sometimes be substantial. When looking at rental properties, don't forget to ask about security deposits, cleaning fees and possible application and credit check fees. Make sure that you and the individual understand which costs are refundable, and the conditions of refund. There is a basic tenants' rights booklet that is available from a number of sources, including state agencies, the Department of Real Estate, and many housing coalitions and advocacy groups. There may also be a tenants' rights organization in your city.

It is also a good idea to call utility, cable, and telephone services to find out if they have deposits that will apply. Sometimes, explaining the situation to the person on the other end of the phone will result in special exemptions from or reductions of deposits or other charges.

Generic services

Generic services are services or special programs that are available to a wide range of individuals in the community, and are not tied to labels of disability. Generic resources and services may be in the form of discounts, hours of support and cash grants or rebates. Following is a sampling of the types of generic services for which many individuals will be eligible:

- ☐ Gas and electric company low-income discounts (California CARE, etc.)
- ☐ Phone company - different types of special adaptive equipment and training available at no cost to the individual; some discount(s) if TTY is used.
- ☐ Some cable companies offer discounts to individuals who are low-income seniors or persons with disabilities.
- ☐ Water, trash and/or other city services may have discount or tax exempt services for individuals meeting certain income, age or disability guidelines.

- ☐ Programs such as the SHARE program for grocery/food bargains in return for minimal volunteer time.
- ☐ Free e-mail account

In-Home Supportive Services (IHSS)

As discussed previously, the IHSS program offers funding for hours of support as determined and authorized by their own assessment. The program is administered through each county, and is generally considered a poor fit with supported living services because of inflexibility, lack of individual choice, a problematic and inadequate payment structure for service workers, and a relatively old service model grounded in basic care-giving. However, because it is considered a generic resource, IHSS-eligible individuals receiving supported living services are required to utilize IHSS hours first.

Local Housing Authority - Home Choice Voucher

This is a rent subsidy program, and in some locales, mortgage payment assistance, to eligible individuals who have completed what can be a lengthy process. Many areas have long waiting lists, and even a waiting list to get on the waiting list. However, the subsidy can be substantial and is worth the work and wait. The “window” for applications varies by location, and it is important to keep in touch with their office until you have made it into the application process. Once an individual comes up on their list, income and living situation information is submitted and verified. The Housing Authority then completes an inspection of the home or apartment. When all required repairs, if any, have been made to the property, the subsidy is finalized. This can reduce the individual’s housing cost by hundreds of dollars.

(More than) A few words about finding and hiring support...

Now that you have thought about financial requirements, housing, furnishings, household goods and generic resources, it’s time to start thinking more seriously about who will be hired to provide support. Although the actual hiring may be done later, many times individuals and vendors are able to find potential support staff in the early stages of planning. The number of support staff will depend upon the hours needed by the individual, and the configuration of support that works best for

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the individual. Some people receiving SLS require only one or two support persons, but typically, when a individual has 24-hour support, 7 days per week, he or she may require several people to provide different support at different times.

Most individuals and SLS providers will say that some of the best support persons they have hired were found through “word of mouth”, or have been referred by a friend who is excited about working with the individual. Ideally, individuals and individual vendors would be able to hire support staff referred to them by a reliable source. Although this is actually the case many times, the reality is that it isn’t always possible.

As mentioned previously, it is a good idea once you’ve decided on SLS to speak to everyone you and/or the individual can think of about your plans. Many times, this will lead you to potential support persons. The most important thing to remember when looking for staff is that the individual is the one that will interview and decide whom he or she wants to hire. Most individuals will need a fair amount of support in the interviewing and hiring processes, as well as the ongoing monitoring and evaluation of staff performance. This is a learning process for all involved.

Some individuals will prefer not to be overtly involved, but to make their wishes and satisfaction known in other ways. This is one of the challenges for the vendor and circle of support; part of their job is to encourage and support the individual to gradually take on more responsibility in this area. Sometimes, individuals have been trained to accept any “care” or support without complaint, or to hide or de-value their own opinions. One of the wonderful things about supported living is the opportunity for people to express their true likes, dislikes and satisfaction with support, including their treatment by various staff, without fear of reprisal. Like all freedoms, it can be a difficult adjustment. And, sometimes the role of the vendor or circle of support can be to act as a buffer for the individual. Issues that may be hard for the individual to address directly with a personal attendant can, at the individual’s request, be addressed either independent of the individual actually being there or with the individual, but with the vendor taking the “hard line” (also known as “good cop/bad cop”).

While we're here, let's talk for a moment about who is the employer. Unless the individual is his or her own vendor, the person or entity who is the vendor is "employer of record" with local, state and federal government agencies, as well as with insurers and other official entities. Some vendors incorporate as non-profit or for-profit agencies, in which case the agency is the employer. However, conceptually and philosophically, it is preferable to think of the individual as the "real" employer. Everyone involved is, essentially, working for the individual. The individual is the person whose opinion about the services and supports counts the most. Think of it as pleasing your boss. Especially for parents, this can be a big leap to take, but it is an important concept. It can be challenging for people to see the individual in this light, but individual vendors in most cases are providing their services specifically for the facilitation of supported living services for a particular individual (or two). The vendor/employer status is basically for the convenience and benefit of the individual. So, while the vendor gets to have all the headaches of human resources and following the labor and tax laws, we still should remember where the buck stops in terms of satisfaction with services - the individual.

Rapport with the individual, desire and ability to provide the support, and availability for times that the individual needs support are critical. Previous experience may or may not be good, depending on the quality and type of experience. Having worked in a day program or group home does not mean that the person is capable of embracing the values and philosophies of supported living, nor of seeing the individual as the "real boss". The capacity and motivation to switch gears from a "taking care of people" mode to one of providing support, following the lead of the individual, and respecting him or her as competent is not something that should be assumed. If the circle of support and the vendor project a presumption of competence, it will more likely be reflected in the evaluation process and, ultimately, in all of the people who provide support.

Where to look for staff? Be creative! College employment offices, job fairs and job boards, as well as newspapers and flyers, are excellent sources for recruitment. Small, independent or neighborhood papers are sometimes better than the mainstream newspaper. However, talking to people, including other adult service agencies and schools, are a good way to get the word out that you are looking for people to hire. Talk to the grocery store checker, the dry cleaner, the doctor's

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office staff, the aerobics teacher, and others that you see in your daily life. Put a flyer at the health food store or food co-op. Does the individual have any special interests? For a person who likes golf, for example, see if you can put up flyers or leave information at public courses in the pro shop. Check out private groups or organizations that have open, socially responsible, community-minded attitudes, as they may have members who might be interested in spending an occasional evening or even a weekend getting to know a individual and doing fun things in the community. Church bulletins and various newsletters can also be good sources of potential support. Internet listserves that are accessed by people interested in the field of developmental disabilities, recruiting sites, and other Internet resources are also good ways to advertise for support persons. Several examples of ads are in the Forms and Samples section of the manual. Now, with scanners and digital cameras, it's easy to include a favorite picture of the individual. Photos of people, especially doing fun activities, really draw interest and can make the difference in whether someone will respond. And remember... any place there are people, there are potential support staff!

Updating the circle of support

It is important to remember that the circle of support team shares all of the tasks involved with creating a successful SLS arrangement. When there is a need for assistance with housing, furnishings, deposits, recruiting, and/or other specialized needs, it is helpful if each circle member takes responsibility for assisting the individual to accomplish a task. When family members want to take responsibility for follow-up or monitoring of many of the more personal tasks, and the individual agrees, it can be very successful.

The circle of support should have regularly scheduled meetings to update the individual, vendor and each other, discuss next steps, and re-distribute and share in the responsibilities necessary to meet the needs of the individual. To ensure success, it is crucial that the individual agrees to follow through with his or her commitments as well.

Section VI: After the Plan is Approved



Developing Supported Living Services:

A Guide to Essentials for Service Agencies and Regional Centers

Connections for Information and Resources
on Community Living (CIRCL)

September, 2000

Available at
<http://www.dds.cahwnet.gov/LivingArrang/sls.cfm>

Regional Center Contract and Purchase of Service Authorization (POS)

When you receive the SLS Purchase of Service (POS) and contract from the regional center, it is important to look at it closely to determine if there are changes that might need to be addressed. The contract should be exactly as you agreed with the regional center; neither of you may unilaterally make changes in the contract. Contract changes always require the written consent of both parties. The POS is critical in your billing and payment process. If there is a mistake on the POS, it could affect your cash flow. These are the working documents for services, and it is best to clarify all of the details before going any further.

Start-up Funds

This varies greatly, depending on individual circumstances. Remember that your regional center payment for services will be almost two months in arrears. Unless the person already has IHSS in place, funds for these services may also be delayed. If the person is moving out of a licensed facility, it will take some time for Social Security to process the change of status. If the person is moving from a developmental center, the wait can be months.

It is important to have these frank discussions [about such cash flow issues] with the regional center. Some regional centers will provide some funding that will need to be paid back when IHSS, SSA and their own typical billing cycles catch up. When budgets are tight, this is less likely. Some individual vendors make arrangements with the regional center to be paid for “assessment”, including the time assisting the individual to determine needs, find and secure housing, support staff and make other necessary arrangements. SLS agencies do get paid for assessment, and sometimes transition, costs. You should be entitled to payment for those services, as well. These billings can go in to the regional center well before the person moves into their own home and officially begins receiving SLS. Your payment for services, then, would come in a timely manner that would allow you to use it for some start-up costs. Other options include lines of credit, loans from friends or family, grant possibilities from community service or other agencies, and any other creative resource you can find.

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Individual's Funds

If the regional center is the payee for the individual, have a straightforward discussion with the person handling the individual's funds. You will need to know when to expect funds for the individual's portion of groceries, rent, utilities, other personal expenses; how long it takes if you need to request funds; and how to coordinate with the regional center how bills will get paid. If you or the individual are the payee, your job is infinitely easier - usually. Discuss these issues with the individual, including how to make sure that banking and budgeting procedures are coordinated.

Other Technicalities

Remember, individualized supported living arrangements, even for one person, are essentially small businesses. The following information will help sort out some of the business aspects of the individual SLS arrangement.

Human resources ("HR")

Human resources issues can be complex and laws are constantly changing. It is vitally important that you maintain complete and accurate written records to document all employment-related matters. It is recommended that you have a resource for handling personnel questions and resolving problems that may come up. Workers' Comp and unemployment claims can be confusing and need immediate attention when they come up - and they will eventually come up, no matter how careful you are. Classes are offered periodically through EDD and other entities addressing HR issues, but in the long run it will pay to have a resource available to call if you need to. Absent any other expertise, the most important thing you can do to protect yourself is document everything!

Make sure you have submitted your federal and state employer forms to the IRS and EDD so you are ready to move forward as an employer. This was discussed in Section IV, which referred you to the websites for the IRS and EDD. The IRS form to get an Employer Identification Number is SS-4, and you can submit the form by mail, e-mail or do it by phone, which will get you an immediate number if you forgot to do this earlier. You can download or print the form, and many others, from the Forms and Publications section of www.irs.gov. The EDD form to fill out

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if you are providing services in a person's home is DE 1 HW (Household Workers) to get your employer number with the state; there is also the standard DE 1 for "commercial employers", and a DE 1 NP if you are a non-profit. Also, print out or get from EDD copies of their form DE 34, Report of New Employee(s), which **MUST** be filled out and faxed or mailed for each new employee within 20 days of the start of work. Again, this website is www.edd.ca.gov, and you will find lots of helpful information there about your responsibilities as an employer. You may also access the mandatory employer posters that must be posted at every "worksite" (yes, even a home - put them on the inside of the door to the staff bedroom or other place that is out of the site of visitors, but accessed daily by employees). Filing these forms will trigger other forms you will need for payroll tax reporting, quarterly and annual filings. You also need to access the OSHA website for information on what you need to put in place regarding workplace and employee safety plans. The site for OSHA is www.osha.gov.

In terms of health and/or dental insurance benefits for full time employees, there are options, but the cost and availability vary depending on where you are located. For example, Kaiser tends to be cheaper than Blue Cross, Blue Shield or Pacific Care, but Kaiser is unavailable in many areas. Changes in group insurance and the surge of people who are self-employed have created some options like the two-person group, which may be less expensive and have a little better coverage than paying for individual plans. Check this out with a good insurance agent, visit websites or call the insurers directly. Don't underestimate the importance of providing this benefit when you are trying to attract and retain quality people.

Accounting

Finalize your accounting decisions, software choices (if applicable), payroll dates and bank account. As the vendor, you will be responsible for collecting and approving time sheets, mileage reimbursements and other occasional reimbursement to employees; processing and distributing payroll; payroll and other tax reporting and payments; overseeing the use and tracking of all household funds; coordinating with the individual so you can assist with tracking of his or her personal funds (this helps at SSI re-determination time);

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and, everything else that no one else wants to do or that otherwise would be overlooked.

Also, set up your ledgers and logs for tracking household funds and the individual's personal funds (individual funds at the individual's discretion). Binders are a good way to handle these, with pouches for receipts, money and change from purchases. Examples of household ledgers and other binder contents are in the back of this manual.

While it is your responsibility to ensure proper fiscal documentation, how you handle or delegate it is up to you. A good house manager or community support facilitator hired to oversee things and work in concert with you can be a great gift and an efficient use of resources.

Employer insurances

Important disclaimer: Always check with your own insurance agent or attorney. This information is simply that - information - and is not intended to be legal or professional insurance advice.

The basics are: Workers' Compensation and general liability

Better to protect everyone: Umbrella liability policy and employer liability

The typical basic package for an individual vendor starts with renter's or homeowner's insurance, with the maximum (general) liability coverage (usually \$500,000), an "inservant" Workers' Comp rider for one or two individuals, and an umbrella policy for at least \$1,000,000. Even though the SLS Regulations omit renter's or homeowner's insurance, the regional center may make an exception and usually does. Why? This has been the least expensive way to provide necessary coverages. *Because the base policy is in the individual's name, make sure that the company writing the coverage allows you as an "additional insured". If not, choose an insurer who will.*

Talk with your agent about employer liability and additional coverages such as non-owned auto (relates to employees driving their own cars while working for you). Some regional centers still attempt to require professional liability

coverage for individual vendors. Investigate this with your agent. Most vendors have found that, if all other coverages are adequate and in place, the only practical thing that professional liability would cover you for that you don't already have is if your son or daughter, or the individual you serve, sues you. This roughly equates to an errors and omissions policy in the event that you use poor professional judgment. If the regional center wants to pay for it, and you want to purchase it, then you should do so.

Making it to "home"

This is the time to finalize a lease, rental agreement or purchase of housing; acquisition of household items and furniture; plan for stocking up the first groceries, cleaning supplies and everyday necessities; arrange for packers, boxes, movers and a truck; coordinate final dates for the move, utilities, phone and cable services; pay deposits (if not already done); and, handle all other little and big preparations for the actual move, like who will buy the pizza.

This can be a hectic and confusing time for everyone. Take special care to make sure that the individual is involved, supported in key decisions, and comforted through the times when it all seems a little overwhelming. This is also a perfect time for the circle of support to work together, both physically and emotionally. It is an opportunity to create a long-lasting bond as each person sees his or her contribution help to create a home and new life for the individual.

Schedules

People's schedules vary according to their preferences and needs, but it should be clear by now how to schedule for day-to-day household chores and errands, job responsibilities, entertainment and social activities, personal time, and specific individual needs. This is where the individual's planning with the circle of support will start paying off, as many needs should be obvious because discussions and updates from the circle of support will have prepared for this kind of detail.

Actually writing down suggested daily, weekly, monthly and annual schedules will be helpful. Don't forget medical appointments, check-ups, periodic household repairs

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and maintenance (such as carpet cleaning), and even veterinarian appointments if pets are involved. Planning for support will be easier if these dates can be set early in the process. Although daily and weekly schedules vary greatly, and we generally avoid set “schedules” of activities in favor of a more natural approach to daily life, we do have daily routines and responsibilities. Also, you and the individual need to be able to schedule the appropriate people for specific things in which the individual wants particular people to be involved. Support staff also need to have a predictable schedule, at least in terms of their own time commitment for availability, so they can plan their own personal lives as well. One example of a tentative schedule is included in the Forms and Samples section of this manual. When we think about it, we all have daily schedules and routines in our lives. When people need assistance it’s even more important for everyone to be able to plan ahead.

Hiring and training support persons

Now that you have a better idea about scheduling, the hiring process can begin. We have already addressed quite a bit about recruiting. However, this is an important subject, so we will share just a few reminders.

Some very competent support persons have been hired because they were attracted to an interesting job advertisement. When writing the ad, the circle should decide whether or not experience is necessary for the position, as there are pro and con thoughts regarding this requirement. Some applicants who have had no prior experience, but are enthusiastic, willing to learn and have other valuable traits or qualities, have proven to be excellent support staff and long-term friends. If the individual has a special interest such as boats, horses, sports, etc., post a flyer in an area where others with similar interests might be likely to see it. As with any relationship, common interests can be helpful.

In terms of logistics, your ad should ask the applicant to send, fax or e-mail a resume as a first step. Once resumes are received, initial screening can begin and interviews scheduled. Generally, a valid driver’s license, current auto insurance, and reliable transportation are requirements for the position; assisting the individual to shop, do errands and be in the community are part of the job, and public transportation is not always practical. To save everyone time, you may want to

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make this requirement part of the telephone screening you do prior to a face-to-face interview. The interview process should be written out so that everyone knows what to expect.

The first interview should begin with a brief history and overview of the philosophy of supported living. Although applicants may have all of the required qualities and some experience in this field, it should not be assumed that they have a full understanding of supported living - even if they say they do. If someone tells you they know about supported living, ask them to tell you what it means to them. You will be surprised at how much variation there can be in the definition of a simple phrase!

Going over the background, current status of services, and the individual's and your vision and plan for implementation can be valuable for everyone. It is wise to interview the applicants in a public place the first time you meet with them; this avoids letting someone unknown to you have the individual's address. Have him or her fill out an application that meets the requirements of the law. The individual will either do the interviewing with assistance, or be involved as much as he or she chooses. In some cases, individuals choose to have a member or two of their circle conduct the first interview, with or without the individual present (individual's choice). If, after explaining supported living, the applicant is interested in pursuing the position, a typical interview can take place. Questions should be asked that follow current laws. The vendor and circle of support should also assist the individual in making a list of questions that he or she want to ask. For example, one person was very interested in what foods the applicant likes to cook and eat. This is the type of question some of us may not think of, but is very important to someone who will be depending upon that staff for meals. Another excellent question to ask is about what types of hobbies and activities the applicant enjoys. If the applicant tends to be sedentary, it may not be a good match for an active person who loves to go out dancing.

Because this work sometimes has unusual hours, the person's availability, flexibility and schedule should be discussed. There should also be an opportunity for the applicant to ask questions and discuss any concerns he or she may have.

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Not all applicants will make it to the second interview; some will be screened out after the first interview. In some cases, individuals may decide immediately that there is something about the person that they do not like. It is critical to honor the individual's "gut reaction" in these cases, even if you feel that the person seems like a good prospect. Of course, if this happens with every applicant, there may be a need for more education about the interview & hiring processes.

Before scheduling the second interview for potential support staff, references should be checked following current laws. The second interview can be done in the place where the individual is currently living, working or spending his or her days so that the applicant can become familiar with daily routines. It is helpful if both the individual and the applicant have enough time together at this point so that they can ask each other questions and begin to get to know each other. One individual and his circle insist that the applicant go out to a public place, such as meeting at a restaurant or going bowling with the individual as part of the interview process. This helps to identify people who interview well, but are uncomfortable in public with a person who has disabilities. After a second this interview, the individual, vendor and circle can usually make a decision whether or not the applicant is someone they would like to hire. If there is still some indecision and a need for a third interview, it is wise to do that before jumping into a final decision. You are likely to find that after the individual, vendor and circle become more experienced in interviewing, their "gut" reactions will be a useful guide to making hiring decisions. Individuals are best at this, and we can all learn a great deal from watching and listening closely to their reactions to people. Above all, they are the ones who will be spending time with and depending most on the support person. The individual should always have veto power.

Hiring requirements

Other than the qualities and skills the individual is seeking, here are some nitty-gritty recommendations for what to require of or get from each new employee:

- Standard application, with signature
- Completed W-4 (W-9 for consultants) and I-9
- Social Security or green card

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- Valid California driver's license, if driving is required as part of the job
- (or) Valid State of California I.D. card
- Copy of DMV driving record report (costs the employee \$5.00 at DMV)
- Copy of certificate of auto insurance (California coverage, in the employee's name). You may also want to require that they add you as an additional insured on their policy, and pay for any additional cost as a valid expense of doing business - it's worth it.
- Copy of current CPR and First Aid certifications
- Signed Confidentiality Agreement
- Drug testing is an option you should discuss with a human resources (HR) consultant or labor law attorney.
- Background checking: optional in supported living. If you are not an agency, you may have trouble getting fingerprints and background check information on your own. Consider contracting with an agency vendor or group that you can access through an HR consultant.

Job Descriptions

Once you have job descriptions for all positions, each employee should be given one copy of the job description to keep, and one to give back to you with a signature.

It's a good idea to put a statement in the job description, or even on your application, that stipulates that all employees are "at-will", according to California labor law. This helps clarify that you are not creating an employment contract, and that either party may terminate the relationship at any time.

One important point worth saying and repeating is that, in order to ensure that the employee is working under Wage Order 15, the appropriate and preferred wage order for support positions, be sure that you title the job as a "personal attendant". It is a good idea to read through Wage Order 15, which is in the back of this manual, to make sure that you know what it says, and can ensure that the job the employee is really fits into that position. This is important because Wage Order 15 exempts you from paying overtime and providing off-site meal breaks and 15-minute breaks, which would be cost-prohibitive, especially for individuals requiring 24-hour support. Misclassifying an employee could cost an employer thousands of dollars in back wages, fines and penalties should you ever have an action brought against you.

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In addition, state in your job descriptions that the position is under Wage Order 15.

Although the terminology of “staff” and “personal attendant” are much more impersonal than “person/friend providing support”, which is more aligned with SLS philosophy, using the term “personal attendant” will help preserve the exemptions

Other pertinent documents

When there is live-in support, or a “housemate” or “roommate” (your choice of terms), it is a good idea to have a simple agreement - not a contract! - between the housemate and the individual. This can avoid misunderstandings and hurt feelings, as well as give the individual a foundation for those difficult conversations that happen when your housemate keeps leaving underwear in the living room. A grocery, utility and/or phone agreement might also be useful to clarify responsibilities and associated costs, if any.

Because of the constant nature of supported living services, employees are typically not able to go away from their “worksite” for meal breaks, as they would in many other jobs. In fact, the philosophies of SLS support individuals eating meals with their support staff, in a typical friend or family arrangement. California Wage Order 15 allows a meal break exemption for “personal attendants”, in recognition of this special situation. Having employees sign a meal break waiver, mirroring the language and terms of Wage Order 15, is a good idea. Lack of a waiver does not negate the exemption, but it’s a good idea to have a signature on a waiver, for the file, anyway.

At some point after things have settled down from the initial excitement of moving, you will want to produce a simple employee handbook. Basically, this will outline your standards, policies and procedures, giving employees a more clear understanding of things such as employee benefits, terms of vacation or sick time, unacceptable behavior, Workers’ Compensation procedures, and other policies, such as the terms of personal phone use during working time, long distance calls, etc. A human resources consultant can assist you, or you can check the web and the library for other resources.

Training

Training should start as soon as possible. The new employee should observe whoever is currently assisting the individual, or you, and then begin working with supervision until everyone is comfortable with the new relationship. Sometimes family members are very involved at this point, as they are the ones who know the individual needs the best. Other times, friends or others may help with the training. It is crucial that the new employee is not left alone with the individual until every detail possible has been covered, and the individual, vendor and employee are comfortable with the level of support and communication. Putting in time and effort now will be worth it later.

As soon as the employees are hired, they should become part of the circle of support, attend meetings and give input. They will be instrumental in assisting the individual with moving and all of the details involved with setting up his or her new home, as well as providing support whenever needed. These employees will be instrumental in the success of SLS, and will eventually have ideas that can be very helpful based on the relationships they build with the individual. In some cases, support staff have been able to assist people to do things no one else thought possible and, in most cases, advocacy efforts are strengthened as they add their support to the individual and collective efforts of the circle of support. [Note: Although circle members are not typically paid, employees who attend circle meetings generally expect to be paid. To err on the side of labor law, you may want to set a policy to pay for these hours. Consult a labor law specialist if you wish to investigate this issue further.]

Make sure that the required SLS training, Mandated Reporter and Special Incident Reporting trainings occur within the first two weeks of employment, along with the other required trainings during that time in the SLS Regulations! This was discussed in Section IV of this manual.

IHSS

Arrange a date for the IHSS assessment, or re-assessment if the person already has services (moving into supported living should always trigger a re-assessment). If the person has not or does not currently have IHSS, be sure that you tell the

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intake person you are making application “as of today”. This will preserve the individual’s services retroactive to the date of move-in, even if it is several weeks later when the assessment occurs. As the vendor, either you or someone who knows the individual well and whom you trust should always be at any assessment or re-assessment. Important information may be misconstrued if a person inexperienced in dealing with IHSS is the only person there other than the individual. This can result in fewer hours [of IHSS service], and your goal is to maximize supports from IHSS.

Regarding IHSS in relation to employees, remember that IHSS is a separate employer. IHSS workers still need to follow the individual’s rules, as they are working for the individual. Your connection to their oversight is that the individual has retained you, as the supported living vendor, to facilitate and assist in the management and coordination of all supports and services, regardless of employer. You might consider having a brief and concise “management agreement” with the individual that states this.

Individual standards and health & safety issues

We all have personal preferences and standards for the way we live. We have routines that often determine what kind of a day we have. We have particular places we like to spend our leisure time, and certain stores we like better than others. We have times we want company and times we enjoy quiet time. We all have pet peeves; we all want to look and smell good each day. Some of us hate having dishes in the sink. Eating and sleeping habits, personal care, dressing and exercise, travel and recreation are all examples of areas we each have individualized in our own lives.

The circle of support can assist the individual to create his or her own list of Personal Standards. This can be valuable as new support staff are hired and can ensure that the individual’s standard of living isn’t compromised, especially when there are new people in his or her life. Of course, every list is completely individualized, but each should include personal, domestic and recreational preferences, as well as schedules and relationship standards. Some people like to

include a document that outlines the individual's House Rules as well, which can include things like "no smoking" and other issues of importance to the individual.

Health and safety concerns are often seen as barriers to individuals who want to live on their own. Most people involved with SLS have seen that people are actually safer in SLS, if SLS support staff are available to assist them with safety techniques and to lead healthier lives. These concerns need to be addressed in the circle meetings. Plans for emergencies, disaster preparedness, and everyday safety need to be made and shared with everyone involved.

Address specific concerns

Life changes can be difficult for everyone. Before SLS can be successful, it is helpful to make sure that everyone involved has had a chance to share their fears and concerns. Individuals have a great new life ahead of them, but it can be frightening to actually make a change. Families and friends may be hesitant when they begin to think of all the changes that will take place. Members of the circle may begin to question the challenges involved with providing services. Support staff may feel overwhelmed with the challenges involved with providing SLS. Concerns need to be addressed and each person should have an opportunity to have his or her questions answered. If people are honest about their doubts or fears, the team can work together to support each other. This mutual support provides a stronger foundation for the person's success in this new home and new life.



CSLN : Home

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WELCOME to the California Supported Living Network Website. The Network is a statewide organization of people and agencies committed to the belief that every Californian with a developmental disability can live in his or her own home if provided the supports and services needed to be safe and successful.

We hope you will find this website informative and helpful. We welcome your comments and ideas on how the website can further meet your needs and provide you with information about Supported Living Services and the Network.

MISSION STATEMENT

Our mission is to advocate for the systemic development of quality supported living services for Californians with developmental disabilities.

<http://www.supportedliving.com>

Section VII: Training, Monitoring and Evaluation

DDS Department of Developmental Services
"Building Partnerships, Supporting Choices"

Affordable Housing

Affordable housing is a cornerstone to individuals with developmental disabilities residing in their local communities. Due to the high cost of housing in California, many individuals served by the regional centers require deep subsidies in order to make housing affordable. DDS is actively pursuing projects that will increase capacity and precipitate the construction of new affordable housing.

This site provides information about affordable housing projects in which DDS is involved. The site also links users to public and private agencies that can assist individuals with developmental disabilities in finding affordable housing.

DDS Projects:

- [DDS Affordable Housing \(DDS-AH\)](#)
- [DDS Rental \(DDS-R\) \(PDF\)](#)
- [2002 Housing Legislative Report \(PDF\)](#)

AFFORDABLE HOUSING LINKS AND INFORMATION:

- [Affordable Housing Coalitions and Agencies](#)
- [Affordable Housing Resources](#)
- [Affordable Housing Links](#)
- [Housing Element](#)
- [Housing Funding Resources](#)

http://www.dds.cahwnet.gov/AH/AH_Home.cfm

Section VII: Training, Monitoring and Evaluation

Training

Proper staff training is of vital importance in SLS. This is an area that cannot be compromised. The best of plans and intentions can fall apart when personalized training is not implemented. The additional hours paid to support staff for training hours is money well-spent.

At the beginning, the initial orientation and training described in the SLS Regulations (Article 6, Section 58651) needs to take place within the first two weeks of employment. This was described in Section IV of the manual. When starting up a supported living arrangement, training ideally begins even before SLS officially begins, if possible; this is an issue to discuss with the regional center. Thereafter, when new employees are hired, this training must occur within the first two weeks of their employment. The consumer and members of the circle of support, as well as others spending time with the consumer, should also have this orientation and ongoing training. There is a specific requirement for the consumer and circle/unpaid support to have certain trainings that are identified in the SLS Regulations (Article 6, Section 58653). If you have a person who helps you oversee the SLS arrangement, such as a manager or facilitator, that person would be ideal to deliver this training.

Of course, initial training should primarily focus on the consumer and how to best meet his or her individual goals, desires and needs, as well as the values and philosophies of SLS, consumer rights, mandatory reporter and special incidence reporting, and the regional center fair hearing process. The content of the two-week orientation training is intended to provide a solid foundation from which to continue learning about the person and supported living. When hiring someone who has “experience” in SLS, take care to ensure that they are properly trained in the basic values and philosophies of SLS. Previous employment in another SLS arrangement or agency providing SLS does not necessarily guarantee that the person has participated in good, solid SLS training.

First aid and CPR are offered through a variety of sources, including the American Red Cross. Keeping these certifications current are also legitimate training or health

Training, Monitoring and Evaluation

& safety expenditures. Your human resources records should detail the dates of employees' certifications for first aid and CPR, and your tracking system should be such that you can easily see who is due for re-certification.

Ongoing training

Ongoing training should include topics that are most relevant to the person being supported, and should include some training provided by the consumer, with support. It is important for personal attendants and others to remember that we have much to learn from each person we support. In fact, people using supported living services are the best trainers we could ask for; our most important lessons are taught by them.

A sample list of ongoing training topics is included in the Forms and Samples section of this manual. The SLS Regulations (Article 6, Section 58652) do outline continuing training requirements that vendors must meet. These are basic, and should be a minimum of the types of training that should occur.

Ongoing training is just as important as the initial training. Once employees know the consumer better, and become more familiar with the daily workings of SLS, they may hear and perceive information with more depth, and they will have more direct experience and feeling to draw from when hearing important information.

One of the best things about supported living is that training is specific to one individual and does not have to be generalized across a group. This is much more effective, interesting, and is likely to produce much more immediately useful results.

Staff interested in professional development should be encouraged to attend additional trainings and conferences whenever schedules and budget allow. Offering support staff opportunities to attend conferences, seminars and trainings will benefit everyone, and it can be a great eye-opener to see how others function in similar roles. Trainings, workshops and seminars attended by staff should be thoroughly documented.

Training, Monitoring and Evaluation

House meetings offer excellent opportunities for informal training. These meetings should be mandatory for all employees. They should be scheduled in advance and held weekly in the beginning, and no less than twice each month after that. Of course, if the consumer feels a need for more or less meetings, this topic should be discussed openly with the vendor and circle of support so a comfortable agreement can be met.

At house meetings, everyone should have input, and an agenda and meeting notes should be generated and kept on file. The minutes, or notes, and agendas are helpful for the vendor as documentation and for the consumer and staff for communication, as well as having a place to go to for recollection about a certain topic of conversation.

A portion of one meeting each month should be dedicated to a training topic. This is a great opportunity to go over consumer satisfaction and standards, bookkeeping and record keeping, IPP goals, health and safety issues, and staff concerns, as well as any changes in policies. Always start the meeting out with a focus on “What’s working/what isn’t?” and remember to dwell on the progress!

Monitoring and Evaluation

These go hand in hand, and are critical to ensuring quality services and supports that are fluid and responsive to the person receiving support. Ask, watch and listen. Pay attention to behavior changes, in the consumer and in support staff, and be available and approachable when someone needs technical assistance, or just a hug.

Living with a person every day, whether you sleep there or not, is a tough job - both for the support person and for the person being supported. We all get on each others’ nerves sometimes, and often all we need is a bit of a break. Try to stay sensitive to the unspoken issues as well as those that you hear loud and clear. They are all important. Handling a small thing today can keep it from being huge tomorrow.

Training, Monitoring and Evaluation

Several examples of consumer satisfaction and evaluation tools are included in the Forms and Samples section of this manual. The basic evaluation that needs to happen includes:

- Consumer satisfaction with individual employees
- Consumer satisfaction with the vendor and his or her supported living services
- Vendor evaluation of employees

Circle of support members can be valuable assets in the processes of regular monitoring and periodic, more formal, evaluation. It's important that someone other than the vendor or an employee facilitate the consumer satisfaction survey regarding the vendor and the person's services. This is, of course, a way of helping to ensure that the consumer is not unduly influenced and feels free to fully express his or her thoughts.

Evaluations are important feedback for everyone in the process. Some people want to evaluate their circles of support as well. Constructive sharing of ideas and feelings helps each person know better how to provide supports and friendship in the most meaningful and personalized ways.

Regional centers have various ways of monitoring services. Fiscal audits are one way that the regional center judges if you are doing your job as the vendor. Quality assurance monitoring assists them in meeting their responsibilities to the consumer, as well as their mandated responsibilities for monitoring compliance. Some regional centers require monthly reports, others require quarterly, six month or annual reports. Ask if your regional center uses a particular monitoring tool for quality assurance; if they use one, ask for a copy. This will give you a better idea of the regional center's expectations of you as a vendor, and of the SLS arrangement as a whole. You will find that some things are specific to SLS agencies serving many individual consumers and will not be applicable to individual vendors. Contact your regional center for clarification and assistance.

And In Conclusion...

Supported living services are exciting and challenging. Being an individual vendor is one of the most rewarding, fun and exhausting jobs many people have ever had. And, they wouldn't trade the richness of the experience for anything. The most important things we can do are to keep focusing on the person we are supporting, keep caring, keep learning, keep growing, keep listening and keep being available for truly meaningful relationships with this family we call a circle of support.



Deron's Dream

After frustrating experiences with group homes for her son, Joan Schmidt helped create a place that helps mentally disabled people

By David Barton and Bruce Dancis -- Bee Staff Writers
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It may not look like much, this tiny house set behind a low cyclone fence in a low-income Sacramento neighborhood south of City

College, but it is a dream home

It was a dream without a dreamer. Or so some thought.

For years, this home was hidden inside the mind of a man who, for most of his life, wasn't acknowledged even to have a mind worth noticing, let alone dreams worth pursuing.

And yet, as Deron Schmidt, the home's owner, wanders the grassy lot on a sunny November morning, there is a palpable sense of contentment. He is in near-constant motion, from his bedroom to the kitchen to the trampoline in the front yard.

The contentment is there in his relaxed but energetic demeanor, in his soft, dark eyes. Or is it?

To look into Deron's eyes is as much to wonder as to know. Even those closest to him have a tenuous connection with his inner world, even as they see his life improve as they pursue their stilted, but fruitful, dialogue with him.

Schmidt, 29, is autistic. Like many with this poorly understood developmental disability, he has never spoken a word, and until the past few years, he was prone to violent outbursts that made him difficult to handle, even to house.

"About 10 years ago, he was getting pretty violent," says his mother, Joan Schmidt. "We couldn't have him at home, and at

the group home, they were afraid he'd hurt somebody. I could see that the only remaining option for him was Sonoma State (a developmental center that is the hospital-like home for those who are unable to cope in private or group homes). I'd visited hospitals, and that just wasn't an option for us. So I said, 'What if we took the same money to maintain someone in a hospital and set him up in a supported, independent-living situation?'"

Behind Joan's thinking was the notion that Deron's outbursts were based on something real: frustration and anger that he had no control over his life.

"I don't know about you, but my worst nightmare would be to have my mother in charge of what I wore and did every day," says Joan, a robust mother of four adults whose lifelong work as a trainer and organizer in various business capacities, as well as her role raising an autistic son, has made her an appealing combination of authority and diplomacy, of kindness and resolve.

"Everyone is entitled to their decisions and choices," she says. "Everyone has an idea of what they want. When you see people who are very developmentally disabled, I think much of that glazed look is just that they've shut down because they aren't a part of what's going on.

"But when people get a chance to make their own choices, we see them come alive and wake up, because we ask them what they want to do and where they want to go."

With that in mind, Joan and her friend Kathi Campbell, who is also the mother of an autistic adult, have formed a nonprofit company, Creative Living Options, that aims to give people like Deron a chance to live their own lives.

Launched in March, the company is already serving four individuals -- not including Deron, for whom his mother is what is called a "parent vendor" -- and has a long waiting list. It is one of a dozen or so such agencies in the state Department of Developmental Services' Alta California area, which covers 10 Northern California counties, including Sacramento County.

Julia Mullen is the manager of the community development branch of DDS, which has an annual budget of \$2.1 billion to serve some 170,000 people in California with serious developmental disabilities.

Of those 170,000 people, she says, 67 percent live at home with a parent, even through adulthood, and 16 percent live in licensed care facilities (or group homes). Only 9 percent live in their own homes. The other 8 percent live in state hospitals or skilled nursing facilities.

But, she says, "Supported independent living is the fastest-growing living arrangement in the developmental disabilities service system. It's because our society has come to a greater appreciation of the fact that people with developmental disabilities are citizens, too, and that inclusion in the community is important for them and for the community at large.

"We all grow from their presence."

Deron moved into the community, into his own apartment, 10 years ago and became a homeowner in August of this year. He still needs around-the-clock assistance, but what has changed is his behavior and, those close to him believe, his sense of having his own life.

In the past few years, his violent outbursts have decreased from hundreds in a day to a few, if any, per month.

But since Deron doesn't speak, how did his mother know he even wanted his own home?

"He told us," she says.

The key to talking to Deron has been "facilitated communication," by which a question is

asked and the answer is given by the disabled person using a keyboard.

"When we sat down with Deron, we asked, what does he like?" she says. "He likes to go for walks, he likes jewelry, he has a great appreciation for art, and so you start building his life and how to make the supports. He doesn't like crowded places, so let's not put him in a place with a lot of people. It's just as you and I would do it: How do you want to structure your life?"

But facilitated communication is a controversial approach. Because many autistic people have poor motor control and therefore cannot type, their hands must be held in some fashion by a "facilitator." And this has led to accusations that it is the facilitator, not the autistic person, who is responding.

But Mark Grassinger, Deron's friend of 12 years and the house manager for his home, has no doubt about the usefulness of facilitated communication. The proof, he says, is in Deron's life.

"He was so aggressive and unhappy when we met," says Grassinger. "He had no voice, and through facilitated communication, we were able to find a voice, and through that he was able to start living.

"I understand the skepticism (about facilitated communication), I really do," says Grassinger, 37. "Society has taught us that if you don't speak the same as everyone else, you must not be all there. Speech is the communication people are willing to accept as a sign of intellect. And Deron has never formally learned to read, though he reads magazines all the time.

"But I know that FC works with Deron, because when Deron makes choices, they are sound choices," he says. He offers a couple of examples.

"When we go out to breakfast, and he types out what he wants, and then he demolishes it, he's made the choice he wanted," he says. "When he picks out a pair of shoes in the morning, he'll keep them on, whereas if they're the ones I choose, he'll take them off.

"I can tell by his actions that he is happy with his choices. The validation of his expression is truth enough for me."

Grassinger has been with Deron for 12 years, and the trust that they've developed is the key to not just the facilitated communication but to Deron's sense of being an individual, and an adult.

But adult responsibilities can chafe as much as they liberate.

"When we start doing things for him, he loses the desire and the ability to do things for himself," says Grassinger, who directs the household and keeps Deron on track. "So he needs to take responsibility for himself, and he does. He gets himself up now. He shaves, showers, he's fully included in his life -- and he has self-esteem now, he derives great pleasure from being able to accomplish things.

"I treat Deron as I treat anyone else," he adds. "In many ways, I don't treat him any differently from my other friends. I don't let my other friends hit me, and I don't let him.

It's like, 'Dude, if you want to hang, this is the way it is. Don't hit me.' And he gets that.

"If I went in and said, 'I'm just here to take care of him, love and nurture him,' Deron wouldn't have gotten where he is today."

And since Deron has 24-hour assistance, he has three roommate/helpers, each on an eight-hour shift, led by Grassinger. One is Joseph Sampaio, who, during his eight hours daily with Deron, takes him to his apartment complex to do some light weight training.

"He feels better if he looks well," says Sampaio. "He doesn't like to do it at times, but he feels good about himself."

Another helper is Gabe Jimenez, who has a relationship with Deron that's quite different from Grassinger's, Sampaio's or Joan Schmidt's.

Jimenez is a stocky, muscular man who, when not with Deron or his own family, is a professional wrestler known as Big Ugly. And part of his unique contribution to Deron's life is the way he avoids the common caregiver's trap of treating the charges like children. Jimenez doesn't buy that.

"He's a man, even though he's got a disability," Jimenez, 28, says as he and Deron make a fifth walking lap around the track at Hughes Stadium, where Deron works out three days a week. "He wants to be in control, but he also wants things done for him. So he has to learn that being in control means work."

And Jimenez is not a hugger or a hand-holder. He prefers instead to indulge Deron's predilection for giving high-fives, figuring that if Deron's going to become a part of society, he has to observe its social constraints.

"The general public doesn't want some 29-year-old man to walk up to them and give them a hug," says Jimenez. "Same way it's not OK for him to walk up to someone when they're eating and take food off their plate."

But while Deron is learning the most basic social rules and undertaking the mastery of activities most people don't even think about, he is also teaching those around him.

"Deron has been one of my greatest supports and continues to be," says Grassinger. "I see the struggles and challenges that he has, and it puts my own trivial problems into perspective. I derive great strength from Deron."

"And Deron has shown me that I have this ability to work with people with disabilities," he says. "You can go your whole life without knowing what you're going to do, and Deron has shown me what I have to do."

To that end, Grassinger has undertaken a social-work degree at Sacramento City College. As for Joan Schmidt, knowing that Deron is on his way to his own life has freed her to help those who may not know about their options to choose supported living.

"My thing isn't Deron now," she says. "I don't worry about what will happen to him if I drive off a cliff tomorrow. I want my kids to live to the highest sense of their desires rather than just keep them safe at home in bed. With someone with developmental disabilities, it

doesn't always happen that they ever get to grow up.

"And everyone deserves the chance to grow up and have his own life."

Deron agrees. Sitting down on the day before Thanksgiving to talk through his keyboard, he's not in as sunny a mood as he was the previous week. Some of the head-slapping behavior that was once the norm has returned, and his responses to questions are punctuated by yelps and cries and the random head movements that are a common feature of autism.

And yet he recognizes a visitor and, unprompted, types "Yim glad bto see you."

Asked how he likes his new house, he types, "it feelsright."

Writing like this, with Mark holding his wavering arm, is always difficult for Deron, but it his link with a world that otherwise would have no idea who he really is inside.

So, despite his pained expression and struggle to control his head and arms, he volunteers a closing comment.

"I have becomen real happy since i have received help yliving on myu own."

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Journey of Life

By Kathleen Campbell

The following article was originally published in 1999, updated in 2000 and again, with the Epilogue, in 2001.
Previously published as *Is There Life After Special Ed?*

Having a person with disabilities in your family changes your life forever. Moms, dads, siblings, grandparents, extended family and friends learn to adjust, adapt and regroup



Mike Bryson (left) and Jason Coon (right), 1998

from the time a child with disabilities enters the picture. Parents, especially, learn the intricacies of laws that we never knew - or ever wanted to know - existed. Terms like "IFSP", "IEP," "early intervention," "IPP", "fair hearing, please", and an impressive host of diagnoses roll off our tongues like a second language. We learn how to advocate for services; find small bits of support for ourselves; study behavior modification strategies -- for us, if not for the kids; and, learn to be resourceful beyond anything we ever dreamed we could be.

As the years go by, we are sure that we've pretty much heard it all, seen it all, and know it all. We've read the books, watched the videos, gone to the meetings, been devastated by the insensitive pediatrician or neurologist, talked to and cried with other parents, fielded the guarded phone calls from well-meaning professionals, brought flowers, cookies or both to the most intimidating administrator so she would like our child better, filled six binders with documentation, figured out special education, identified the difference between a "policy" and "the law", and learned our rights. This is, after all, survival of the ... well, OK ... most informed, articulate (the polite term), and well-known at school and the doctor's office. Nothing can surprise us anymore.

And then it happens. It happened to us over ten years ago. Just when we thought we knew all of the answers, they changed the questions. Suddenly - amazingly - our son, Jason, who has developmental disabilities, became an adult according to the laws

of nature and the State of California. It crept up on us through transition plans and discussions of “work experience”. Slowly the reality dawned that soon we wouldn’t have special ed to kick around anymore. We were entering the Twilight Zone of Adult Services! Overnight, the rules changed, and the familiar terrain that we were used to negotiating was dramatically different. New issues cropped up: agencies with different, and sometimes conflicting, rules; “supported employment,” “day programs” and SSI; reliance on regional center services and Medi-Cal; college classes (what are the laws about modifications THERE??); conservatorship or not; “consumer choice” (Who is making the decisions? Yikes!); and, perhaps the most basic of concerns - lifestyle, housing and meeting daily needs. If I was not there with Jason every day, who would handle everything? Our own mortality loomed. What will happen to him when I die? Who will advocate and negotiate for him? Who will be his “squeaky wheel”? How can he be most safe and secure? The questions were endless, and decisions that needed to be made seemed overwhelming!

In Jason’s case, our decision was to tackle housing before he left special education at the age of 22. This way, he wouldn’t have to make all of the big transitions at once. For over a year, we traveled the California countryside seeking out every possible adult placement. All of the options were group residences of one size or another; the nicest ones had waiting lists. None of the choices had room for Jason and his friend, Mike, and the guys had developed a great friendship - a first for each of them. Although very limited in their communication skills at that time (now both can use facilitated communication, a method of typing), they let us know that they wanted to live together. Finally, as is often necessary in group or congregate living situations, there was a lot of talk about daily “programs”. We knew that road; Jason and Mike were already living in a group situation with other kids at St. Vincent, a licensed children’s facility in Santa Barbara. The more we looked and talked, we and Mike’s parents realized that what Jason and Mike wanted - and what we wanted for them - was not a good residential program, but a good life.

“Supported living,” a new concept to California when we began our planning in 1991, was the answer for Jason and Mike. This is an option where people live in a home they have chosen (or apartment, condo, etc.) to rent or buy, with or without roommates or housemates, and are provided the supports and services they need at home and in the community to create a lifestyle specific to them. The person’s own wishes, dreams, strengths, needs and choices provide the foundation for planning the supports and services, including who will actually provide the training and assistance that is needed. The paid supports are funded through the California Department of Developmental Services (DDS) through local regional centers, as well as In-Home Supportive Services (IHSS), a county-based program of the California Department of Social Services. The person’s own income, even if it is only SSI, is used for personal expenses such as housing, clothing, groceries, utilities and other typical monthly personal expenses. Actually, the option of supported living was never offered to Jason and Mike. In fact, several key people pronounced them “too severely disabled” to ever live in their

own homes. Undaunted, we created a proposal to work with the regional center in helping Jason and Mike develop a plan. And since we were already pushing the envelope, we decided to function as the agency, or “parent vendor.” When you’re breaking new ground, you might as well go all the way! Thanks to Jason and Mike’s tenacity (“Move! Move!”), a forward thinking regional center director, and our unmitigated audacity, Jason and Mike are currently enjoying yet one more wonderful year in their own home in Santa Barbara.

They live in a four bedroom, 3-bath home near the beach. Several shopping centers, many restaurants and bus stops are within walking distance. The downtown area and City College are minutes away. They have jobs and go to classes. Two housemates live with them and are paid to provide support. All four share the rent, utilities and groceries, with Jason’s and Mike’s shares coming out of their SSI and sometimes some other small wages. On weekends, housemates or other friends provide paid support. Through the variety of people providing support and the friends that they introduce to Jason and Mike, as well as their unlimited opportunities to participate in the community, there is an ever-expanding circle of friends.

It is now impossible to go to any busy area of Santa Barbara or Goleta with Jason without someone saying “hi” or stopping to chat. No one is hired or fired without Jason’s and/or Mike’s approval. They participate, at varying individual levels based on their interest, in interviews, weekly meetings, evaluations and other typical daily decisions. They have gained experience in making choices, and have become active self-advocates. The people supporting them have also become advocates. Of course, there are still difficult days, excessive laundry and lots of coordination to make things come together. And Mike’s mom and I must constantly resist the impulse to hang kitchen curtains and re-fold the towels.

But, most importantly, it isn’t a program. While it is not a perfect life, it is, by Jason’s typed account, “... a life with peace. It is good.”

Here are a few key points that help define supported living:

- Everyone is “ready”. This is different from traditional services such as independent living, where a person has to prove his readiness to live in his own home. Even people with what are considered the most severe disabilities, challenges or reputations can succeed in their own homes with the right supports, services and training. No one can be denied supported living services by the regional center based solely on the nature or severity of their disability. Through appropriate planning, implementation and flexibility of support, we make the services meet the person’s needs and wishes instead of fitting the person into someone’s pre-determined program goals. People don’t fail at living in their own homes; we fail to provide the appropriate types and levels of support at the right times.

- Individual choices drive services and supports. The person receiving services should be supported and encouraged to make, or be significantly involved in making, the choices and decisions about his or her life, supports and services. Each supported living arrangement should be different from the next, by design. Circles of support, including families, often play an important role in assisting the person in making decisions and supporting those decisions.
- Separate housing from provision of services. In group situations, for example, the housing and services are often, if not usually, provided by one entity. When irresolvable problems arise with a consumer's services or her needs change, typically she is asked to move to another placement. In supported living, she stays in her own home and familiar surroundings, and the services change as necessary. In fact, by regulation, the provider of services (the regional center "vendor" or agency) cannot control the home of a person they are supporting in a supported living arrangement.
- No licensing. The person's home is just that -- his home. There is no community care licensing in supported living. Not having to deal with licensing gives more freedom in planning supports (for example, learning to spend time alone, if that is a goal), and more time to spend on developing and utilizing true measures of the person's satisfaction with his life.
- Services and supports evolve and change as the person's wishes and needs change. Flexibility in supports and services is key in supported living arrangements. Hopefully, the person's desires and needs will evolve and change in many areas of life as that person experiences growth and gains self-confidence. None of us want lives that are stagnant. Supported living services must be adaptable and responsive to each individual.
- More opportunities for independence and individualized support. Even though Jason and Mike live together, we specifically planned for them to have individual supports. This maximizes their learning to make choices and decisions, their senses of independence and self- confidence, and their ability to have the differing types of support they want, need and have a right to receive.

As with other services, some service coordinators are better informed than others and some regional centers are more supportive than others, but all must follow the law and regulations. If you are interested in supported living, call your service coordinator to request information and to schedule a meeting to discuss supported living or add it to your IPP as a goal. Make sure you include an estimated timeline for moving in; you can change this if you need to later, but it helps everyone to know what your expectations and wishes are. It may take some work to get there, but having a home to call your own is worth it. For Jason, it is freedom, independence and opportunity. For me, it is the

security of knowing that he has a place to call home, that he is growing and achieving new things each day and that he is happy. And seeing Jason's pride as we celebrate special times, such as Thanksgiving, with him as our host.

The numbers of people choosing supported living as a lifestyle option are increasing. We now know many individuals who experience a degree of opportunity and independence that no one would have predicted before they were receiving supported living services. This is especially true for some of our friends with, shall we say, "severe reputations" in regards to behavior. Remember, supported living is an option available statewide to regional center clients; its availability is not dependent upon the whim, training or opinion of anyone professional.

Our next great adventure is home ownership for Jason and Mike, and others with developmental disabilities. Many programs are becoming available to provide purchase and/or down payment assistance just for this purpose, and we have been spending quite a lot of time tracking down these resources. What better way to ensure your

place in the community than become a homeowner? Besides, we can always use more "adventure" in our lives.

We all feel fortunate to be a part of Jason's and Mike's lives. It is our hope that we will, together, be able to continue supporting them as they determine their life directions and achieve their hopes and dreams.



Vanessa (left), Jason and Susan (right) have been sharing a house for several years in Santa Barbara, CA.

Epilogue

On August 19, 2000, just one day after Jason's birthday, his dear friend and housemate, Mike, lapsed into a coma and died. There was no warning, no good-bye. He was 29 years old and we all miss him every day. For Jason, he has lost a soul mate with whom he shared his life and home for over thirteen years, first as roommates at St. Vincent's, a group facility ("home") for children with developmental disabilities in Santa Barbara, and later as just two cool guys living in their own place near the beach. For us, we have lost part of our family, as sure as if Mike were our own son.

There has been much grieving over these past years by many people in Mike's life, including the other friends that shared his daily life and, often, his home – the people providing support to him each day. They were there when Mike collapsed. They stayed with him, talking, reassuring, making him laugh, holding his hand, advocating for him with the medical staff. They were the last people he saw, gracing them with one of his typical "Mike" smiles before he slipped into the coma. They comforted and cried with Mike's other friends and family, and they carried on for Jason and our family when all of our hearts were breaking. Indeed, they are much more than "support people", "personal attendants", or "staff." These young people were truly a part of Mike's family. He was their friend, their equal ... they loved him, challenged him, respected him, and they still grieve for him. Mike taught them lessons they would never have learned without him. He has changed their lives.

Jason tells us through his typing that, "Mike stayed as long as he could... Mike's gift to us was what he taught us about love and family. Now his lessons will shine through us. He loved us all and wants us to love each other." In death, as in life, their connection with each other is strong. "Mike will always be my best friend. He watches over us."

We have weathered cleaning out Mike's room, grief counseling, and memorial celebrations where we gathered to remember the wonderful, funny and not-so-funny moments of his life with us. Life does go on. But for all of us, Mike will stay in our hearts. Mike has made his mark on this world and it is indelible. He was one of the pioneers, a successful example of unexpected independence, a valued member of his community. He has helped to pave the way for others who will come after him. I am grateful for the honor of having known and loved him. Our lives are certainly richer for being a part of his life.



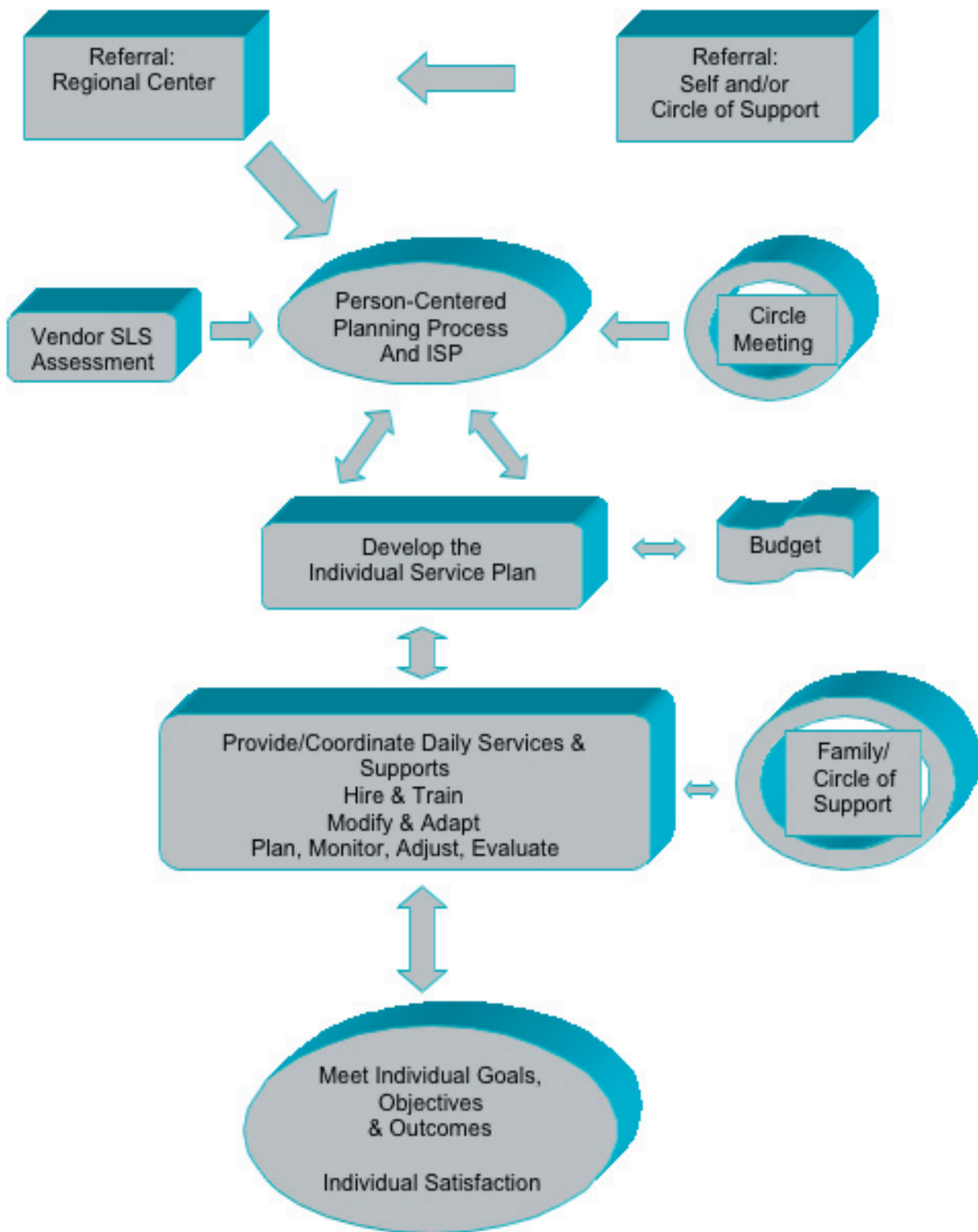
Some lessons are hard to learn. Letting go is hard. Finding out that we cannot protect our children from all the hurt in the world – although we knew it all along – is hard. But as difficult as real life can be, it would be worse to be isolated from the experiences and, yes, risks that provide us the freedom and opportunity to grow. This is part of the circle of life. Disability, or marching to the beat of a drummer no one else has ever heard, should not be a barrier to these powerful experiences that enrich and deepen our lives.

Mike did not miss any of life. He had the chance to make his own decisions, chart his own course. Thank goodness we didn't wait until someone, somewhere thought he was "ready" to live in his own home and in his own community. He might have still been waiting for a life when his came to an end. We never know what tomorrow will bring.

Michael Jackson's music has always been a favorite of Mike's and Jason's. He sings a song, "Gone Too Soon" that will always remind us of Mike. "...Shiny and sparkly, and splendidly bright, here one day, gone one night. Like the loss of sunlight on a cloudy afternoon, gone too soon." Gone too soon ...

Examples and Forms

Supported Living Process



D.D.S. Program Advisory



DEPARTMENT OF DEVELOPMENTAL SERVICES PROGRAM SERVICES BRANCH PROGRAM ADVISORY

PSB 00-3

May 24, 2000

CHANGES IN THE SUPPORTED LIVING SERVICE (SLS) REGULATIONS

INTRODUCTION

Several changes to the Supported Living Service (SLS) Regulations became effective on May 18, 2000, implementing the first phase of the Department's long-range Service Delivery Reform effort as it applies to SLS. As explained in greater detail below, these changes provide most importantly for the following:

- Only those services performed under the SLS Regulations are "supported living" services.
- A single service code will encompass all SLS direct services.
- A special process permits vendors who provide "services similar to SLS" to become SLS vendors.
- All SLS vendors must offer comprehensive services.

All "SLS" Now Under the SLS Regulations

Language has been removed that had permitted providers other than those vendored under the SLS Regulations to offer services and supports "similar to SLS." Under this provision, the term "supported living" had assumed a generic meaning broader than that in the SLS Regulations, with regional centers designating and reporting providers services as "supported living" whether or not they were performed under the SLS Regulations. This made it very difficult to gather and interpret standardized data across the state regarding the availability, use, costs, and quality of services.

The change does not in itself require regional centers and non-SLS service providers to alter their services or change vendorization. However, such services will no longer be recognized as "supported living services," which must now be done exclusively under the regulations.

A Single Code for SLS direct services

Until now, SLS was divided into four services, including three direct services: Personal Support (Service Code 891); Training and Habilitation (Service Code 892); and 24-Hour Emergency Assistance (Service Code 893). These three services are going to be combined into a single new direct service, called simply "Supported Living Service" (Service Code 896). The regulatory description of this new, single direct service reflects more closely the definition of Supported Living Service in the state's revised Hone and Community-based Waiver. This will help avoid misunderstandings that might adversely affect federal financial participation in the funding of services. While the wording of the new combined service differs from that used for the formerly three separate services that comprise it, all the service and support components remain included. The one minor exception is noted below (see **Less Significant Changes**).

The change to the single direct service code will occur on July 1, 2000, to coordinate with the annual POS rollover process. Until then Service Codes 891, 892, and 893 will continue in use. Direct service rate provisions of current SLS contracts will not need to be changed, although cost reporting to the Department must reflect the new unified code. The mechanics for the cost reporting changes are explained in technical instruction sheet that has been distributed to each regional center. Contracts agreed upon or renewed after June 30, 2000, must include only a single rate for all direct service.

The fourth service category alluded to at the beginning of this section is reserved for vendor administration services (Service Code 894). It is unaffected by the changes.

Special Vendor Conversion Process

A significant number of non-SLS vendors (particularly Independent Living Program providers) have been providing sex-vices similar to SLS.' For this reason the changes include a special F°°5 by which these vendors may immediately elect reconvert to SLS vendorization, and then take up to a calendar year to meet fully all SLS vendorization requirements. (As stated earlier, non-SLS service providers are not required to become SLS vendors in order to continue delivering the services they now deliver, but from now on those services will not be recognized as 'supported living services.')

A regional center may, for good cause, extend the one-year time limit allowed for vendor conversion.

SLS Vendors to Offer Comprehensive Service

Although there is only a single SLS vendor definition, until now service providers had been allowed to specify limitations to the services they provided. The new changes no longer permit this All SLS vendors now have to be ready to offer the bill spectrum of component services and support that comprise supported living service. This change will help regularize service provider capabilities and standards, and make it easier for consumers to select among them.

Less Significant Changes

Several changes of relatively minor significance have also occurred in the SLS regulations:

- References to the distinction between "Training and Habilitation" and "Personal Support" service have been deleted, because the collapsing of the three direct services into a single direct service has ended the need for clarification between them.
- "Incidental costs" have been added to the listing of appropriate expenses for which the SLS vendor may be reimbursed.
- Emergency assistance services no longer include purchase of the consumer's equipment. A separate, non-SLS, service is now being used for this purpose. This is the only change to the spectrum of services defined under SLS: SLS continues to include all the other services related to emergency equipment (such as training, installation, repair and maintenance.)
- When the SLS Regulations were first adopted in 1995, they provided for immediate and automatic SLS vendoring for California Supported Living Arrangements (CSLA) pilot project service providers. This provision no longer has any application and has been deleted.

Looking Ahead

The changes described in this Program Advisory were made in partial fulfillment of Welfare and Institutions Code Section 4689.7(c), hich requires the Department to "establish by regulation, an equitable and cost-effective methodology for the determination of supported living costs and a methodology of payment for providers of supported living service"

To comply with this statutory requirement, in October 1998 the Department of Developmental Services convened a committee comprised of stakeholder organization representatives. Known as the Supported Living Strvice (SLS) Workgroup of the Service Delivery Reform Committee, this stakeholder group held a series of meetings aimed at reaching consensus on a cost-effective methodology for the determination of supported living costs and a methodology of payment to providers. The regulatory changes described here resulted from a consensus reached on some matters closely related to the main legislative charge of Welfare and Institutions Code Section 4689 7(c). Discussions and Department staff work continue on the main issues related to the reform of the SLS cost and rate methodologies.

For additional information, or a copy of the regulatory sections affected by the changes, please contact Marvin Brienese, Services and Supports Section, at 916-654-1553, or mbrienesdds.ca.gov

Organization Chart Community Connections



"MONTHLY BUDGET" Supported Living Services

Direct Service	
<i>Position 1</i>	
#Hours / Day × #Days / Week = #Hours/Week × 4.33 = #Hours/Month × \$Rate /Hour =	\$ _____
<i>Position 2 (if applicable)</i>	
#Hours / Day × #Days / Week = #Hours/Week × 4.33 = #Hours/Month × \$Rate /Hour =	\$ _____
Week Ends, Meetings, Training, etc. #Hours /Month × Rate /Hour =	\$ _____
<i>Position 1</i>	
Vacation/Sick Days/Year × Rate/Hour	\$ _____
<i>Position 2 (if applicable)</i>	
Vacation/Sick Days/Year × Rate/Hour	\$ _____
Sub-Total	\$ -
Less Maximum IHSS Funding (IHSS Monthly Hours × Rate /Hour)	\$ _____
Cost of Training, Consulting, and Educational Conferences	\$ _____
Sub-Total Direct Service	\$ _____
Fringe Benefits	
Payroll taxes & costs (FICA, Medicare, SDI, EDD, UI)	\$ _____
Insurance (Worker's Compensation)	\$ _____
Mileage Reimbursement	\$ _____
Community Access Reimbursement	\$ _____
Insurance (Health)	\$ _____
Sub-Total Fringe Benefits	\$ _____
Total Direct Service/Fringe Benefits Costs	\$ _____
Administration	
Administrative Fee	\$ _____
Accounting Fee	\$ _____
Bank Fees	\$ _____
Supplies, equipment, photocopying, postage, phone, pages, etc.	\$ _____
Discretionary background checks for staff	\$ _____
Sub-Total Administration Costs	\$ _____
TOTAL MONTHLY BUDGET	\$ _____

*Note these line items reflect a basic SLS budget. Additional line items and other considerations should vary with each individual budget. This budget was excerpted from **A Guide to Single Household Supported Living Services**

Sample Authorization for Representation

WRITTEN AUTHORIZATION FOR REPRESENTATION

I, _____ (*consumer*), update my authorization of my
 _____ (*Relationship i.e. mother, sister*), _____ (*name*)
 to be the Authorized Representative for me in any matter, including health/medical
 services, legal representation, financial issues, services from any agency, and any
 other personal matter. In her/her absence, _____ (*name*), may
 represent me in these same matters.

 (Consumer's Name)

 (Date)

 (Authorized)

Letter to Prospective Landlord

Mike's & Jason's Place
xxx Beach Rd.
Santa Barbara, CA 93109

Dear Prospective Landlord:

I am writing this letter because we are looking for a unique, stable housing situation, and I believe this could be a mutually beneficial arrangement for you as a property owner as well as for our son, Jason, an applicant for tenant status at your property. Jason and his house mate, Mike, are long-time residents of the Santa Barbara area and are currently looking for a new home to rent. Both young men have developmental disabilities and strive to be as independent in their daily lives as possible. For the past xx years they have lived successfully in the Santa Barbara/Goleta community with two 24-hour personal attendants. This is *not* a student housing situation; it is, instead, a family-like home arrangement, designed to provide a typical, quiet life for two young men who require assistance in their daily home and social activities. We are currently in need of a new house in a family neighborhood for them to rent and make their home.

First, I would like to offer a brief introduction to our family. My name is Kathleen Campbell, and I am Jason's mom. My husband, Patrick, and I live in Rancho Murieta, CA, which is a small community in the Sacramento area. Although we have been homeowners for years, we have owned our current home for over ten years. I have also been both a landlord and property manager in the past, and understand the complex issues involved in offering and maintaining a rental property, including pride of ownership and protecting the value of one's property. In fact, I lived in Santa Barbara from 1984 - 1989, listing, selling and renting residential properties until I moved to the San Diego area as a manager for Prudential California Realty (formerly Merrill Lynch).

Jason and Mike have been in the home that they rent in Santa Barbara for one year. The landlords have decided to move back into their home, which had been their primary residence for over 28 years prior to last summer. For the six prior years, Jason and Mike had rented a home in Goleta. We felt very fortunate to have been able to stay for such a long time in one home, and we would be very pleased to once again find a long-term rental. This is particularly beneficial to Jason and Mike because it allows them to develop relationships with neighbors and to become acquainted with the surrounding neighborhood, stores, bus system, etc. Of course, we would be happy to sign a one year lease for the right property, and hopefully renew that lease when the term ends.

In order to ensure timely monthly payments, I write and remit all checks for rent

Letter to Prospective Landlord

and utilities for Jason, Mike and their live-in support person(s). As the landlord, you would simply receive one check each month from a joint account in the names of Mike's mother and myself, rather than multiple checks from different people. Our experience is that this is much easier for the landlord's bookkeeping purposes; essentially the same as renting to a family. The current landlords, Mr. & Mrs. Tom Landlord, are happy to provide a reference for you through their property manager, John Propertymanager. He can be reached at 805-xxx-xxxx.

Because Jason and Mike have done so well in their own home for the last xx years, both families are committed to making sure that this continues to be a successful arrangement. I function as the employer of record for the people providing paid support to Jason and Mike. My CPA for the past xx or so years, Howard Accountant, has his offices on East Carrillo St. in Santa Barbara, and would be happy to give a reference for us. Sarah Drake, whom you may have met, is also employed by us in the capacity of a manager to oversee both the personal services and the home in which Jason and Mike live. She lives in Santa Barbara and is always available by phone or pager. In addition to consistent and trustworthy personal support, it is important to us that Jason and Mike live in an environment that meets or, when possible, exceeds the typical standard of their neighborhood. In order to meet the goal of a successful living arrangement, we know that a positive, open relationship with their landlord is critical. We will do everything we can to facilitate this relationship.

Since Jason has lived in Santa Barbara since 1984, and Mike since approximately 1986, they both know many long-term Santa Barbara and Goleta residents who can give a personal reference for each of them. Both families also have personal references local to Santa Barbara. We would be happy to speak directly to you by phone, or to come to Santa Barbara as soon as necessary, in order to answer any questions or work out mutually beneficial arrangements. Our home phone is 916-xxx-xxxx, and my car phone/pager is 916-xxx-xxxx. We would be happy to set a specific phone appointment for us to call you at your convenience, which can be arranged either through Sarah Coordinator at 805-xxx-xxxx, or directly with us.

Thank you very much for your consideration. We look forward to hearing from you.

Sincerely,

Kathleen Campbell

J o b s A v a i l a b l e

**Work with two independent young men with
developmental disabilities.**

**Both are active in the community and enjoy hiking,
basketball, cooking, bowling,
music and the beach.**

**You should enjoy such activities and be responsible with
good communication skills.**

Full-time, part-time and one live-in position available.

Morning, evening and weekend hours

Experience in the field desirable, but not necessary.

**VERY FLEXIBLE HOURS
(WILL WORK WITH SCHOOL SCHEDULES)**

GOOD PAY

**FULL BENEFIT PACKAGE
FOR FULL-TIME EMPLOYEES**

CONTACT SARAH AT 123-4567

Recruitment and Employment Forms

Live-in and work 30-35 hours per week.
Be part of a team committed to providing positive support to two young men with developmental disabilities.

Progressive environment - close-minded need not apply.

Must be active with great communication skills and be available 5 mornings per week from 7-9am and 3 or 4 evenings per week from 4-9pm.

Perfect job for students and beginning teachers. Competitive salary and benefits.

Recruitment and Employment Forms

Interview Process	
Step 1 Phone Screening	<input type="checkbox"/> Determine applicant's initial qualifications such as a form of automobile transportation, valid driver's license.
Step 2 Initial Interview	<input type="checkbox"/> Meet in a public place to explain the service and to interview applicant. <input type="checkbox"/> Forms: resume, application, purpose and vision.
Step 3 Second Interview	<input type="checkbox"/> Meet at individual's home or work place to determine compatibility. <input type="checkbox"/> Forms: DMV Record
Step 4 Third Interview	<input type="checkbox"/> Have applicant observe a day in the life of the individual (if agreed upon by individual).
Step 5 Offer Employment	<input type="checkbox"/> Have applicant fill out employment forms such as: I-9, W-4, Confidentiality Agreement. <input type="checkbox"/> Have applicant read and initial a copy of their Job Description. <input type="checkbox"/> Make a copy of their driver's license.

Recruitment and Employment Forms

Telephone Screening Questions

1. Do you have a current driver's license?
2. Do you have reliable automobile transportation?
3. Why are you interested in this position? What caused you to respond to our ad?
4. What work schedule would you like to have? (Weekends only, sleep hours only, part-time, full-time)? Are you flexible in the hours that you work?
5. Are you interested in a live-in support position?
6. Describe a difficult situation and what you did about it. (listen here for ability to get along with others and create relationships).
7. What are some of your hobbies or free time activities that you enjoy?
8. Where do you see yourself in one year?

Note: Don't ask questions or have a conversation about child care, marital status, age, religious preferences, disability, race, what country they are from, etc., even if the candidate brings it up first.

Application for Employment

PLEASE READ THIS APPLICATION THOROUGHLY AND COMPLETE IT HONESTLY. THIS EMPLOYER PERFORMS A DETAILED BACKGROUND INVESTIGATION ON ALL FINAL CANDIDATES.

Important Notice: Applicants should be extremely careful as they complete this application. This company utilizes a sophisticated and detailed background and pre-employment investigation process. This process frequently discloses inaccurate, false, and/or incomplete or omitted information. Should this process determine any inaccurate or incomplete information, it will cause you to be either disqualified for employment with this company as an applicant, or be grounds for termination if the inaccuracies are discovered subsequent to your employment with our firm. Accordingly, our company strongly suggests that you NOT complete this application until you have the requisite time and accurate information to do so.

This company is an equal opportunity employer and will not discriminate against any employee or applicant for employment in an unlawful manner. Employment is conditioned on the successful completion of the screening program. The information sought on this form is given voluntarily and may be used in filing reports required by state or federal governments. This company requires all individuals who are offered employment to submit to a drug and alcohol screening program, which may include hair, blood and/or urine samples. The results of such screening will be initially disclosed to decision-makers for VENDOR'S NAME and may be the basis for disqualifying any candidate for employment. Our company reserves the right to utilize this information in any way it deems necessary, such as but not limited to, unemployment hearings, civil cases, criminal cases, and other such similar administrative hearings. By completing this application for employment, the applicant authorizes this employer to conduct such screening for drug and/or alcohol use, and agrees to hold this employer harmless for any claims resulting from such screening.

Applicant name: _____ Date: _____

List other names you use or have used, including maiden names, nicknames, stage names, married names.

Position(s) applied for or type of work desired: _____

Address: _____

Telephone #: _____ Social Security #: _____

Type of employment desired: _____ full-time _____ part-time _____
temporary

Date you will be available to start work: _____

Driver's License # _____ Salary Requirements _____ / _____

Are you able to meet the attendance requirements? _____ Yes _____ No

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Can you work evenings and weekends? _____ Yes _____ No

Have you ever been previously employed by our organization? _____ Yes _____ No

If hired, can you show proof that you may legally work in the USA? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is required? _____ Yes _____ No

How were you referred to us? _____

Employment Application

Emergency Contact:

_____ / _____	
Name	Relationship
(_____) _____ Home Phone Number	_____ Address
_____ Work Phone Number/ext	_____ City _____ State _____ Zip

Employment History

Please provide all employment information for the past seven years employment starting with the most recent. You may use another sheet if necessary.

Employer: _____ Position held: _____
 Address: _____ Telephone #: _____
 Immediate supervisor and title: _____
 Dates employed: from _____ to _____ Salary: _____
 Job summary: _____
 Reason for leaving: _____

Employer: _____ Position held: _____
 Address: _____ Telephone #: _____
 Immediate supervisor and title: _____
 Dates employed: from _____ to _____ Salary: _____
 Job summary: _____
 Reason for leaving: _____

Employer: _____ Position held: _____
 Address: _____ Telephone #: _____
 Immediate supervisor and title: _____
 Dates employed: from _____ to _____ Salary: _____
 Job summary: _____
 Reason for leaving: _____

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List school name and location, number of years completed, course of study, and any degrees earned:

High school: _____
 College: _____
 Technical Training: _____
 Other: _____

References

List 3 people who can comment on your character and work habits, including telephone numbers, and years known (do not include relatives or employers):

Employment Application

Except for the offense of possession of less than an ounce of marijuana for your personal use more than two years ago, have you ever been convicted of a crime? _____ Yes _____ No. If yes, please state the circumstances* _____

Have you ever been convicted of the crime of possession of more than an ounce of marijuana for personal use within the past two years? _____ Yes _____ No. If yes, please state the circumstances.* _____

Are you currently under arrest for any crime, other than the aforementioned crime of possession of less than one ounce of marijuana more than two years ago, which has yet to be adjudicated, pending trial? _____ Yes _____ No. If yes, please state the circumstances.* _____

*NOTE: Answering 'yes' to any of these questions may not necessarily disqualify you from the position desired. Each action and explanation will be weighted/considered in relationship to the position for which you are applying.

Please comment on why we should consider you for employment: _____

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I, or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature

Date

Employment Application

Release And Disclaimer From Drug Testing

I, _____, hereby voluntarily agree to submit to any lawful drug test requested and conducted by VENDOR'S NAME which VENDOR'S NAME deems, in its sole discretion, to be reasonably necessary to provide its workers with a safe working environment.

I, _____, acknowledge that in the course of my employment, and as a prerequisite of employment with VENDOR'S NAME, may be asked to submit to a random drug test and provide a urine, blood or breath sample as part of a substance abuse screening test. I hereby consent to such tests and also agree to allow VENDOR'S NAME the right to make lawful searches of my work area and my vehicle while on company property, and other lawful surveillance activities, in an effort to keep the workplace drug free.

I authorize that the results of any drug test be communicated and disclosed to third parties. As a consequence of any positive result obtained by said test, I understand that I may not be offered a job with VENDOR'S or may be disciplined leading up to or including immediate discharge if currently employed by VENDOR'S NAME.

I hereby indemnify, release and forever discharge and hold VENDOR'S NAME and its subsidiaries and affiliated companies, agents and employees harmless from any and all claims, demands, judgments and legal fees arising out of or in connection with such tests, the results, or any lawful use of the results.

Applicant or Employee Signature

Date

Printed Name of Applicant or Employee

Position Applied for

SSN#

Name of Witness

Employment Application

Applicant Consent Form to Investigate and Disclose Data

I, _____, hereby allow the Company the right to contact and investigate my former and current employers, and all other pertinent parties, including, but not limited to educational institutions where I enrolled, to fully investigate my background.

I understand that as part of the interview process, since I am applying for the position of _____

the Company requires all applicants to disclose pertinent data concerning previous work history, police and military records, and educational activities.

The purpose and procedures used in this investigation have been fully described to me and I completely understand the reasons and potential uses of such investigations. I authorize VENDOR'S NAME to use any and all information acquired to make decisions regarding my employment, which may be disclosed to third parties.

I understand and agree that if any material facts are discovered which differ from those facts stated by me on my employment application, at my interview, or at any time prior to my commencing employment at the Company (if I am offered a position with the Company), I will not be offered the job. Furthermore, I understand and agree that if material facts are later discovered which are inconsistent with or differ from facts I furnished before taking the job, I will be disciplined, including immediate discharge without warning.

VENDOR'S NAME will pay the cost of this investigation. Nonetheless, I hereby indemnify, release and forever discharge and hold the Company and its subsidiaries and affiliated companies, agents and employees, as well as all third parties supplying such information, harmless from any and all claims, demands, judgments and legal fees arising out of or in connection with this investigation, the results, or any lawful use of the results or disclosure thereto.

Applicant Signature

Date

Printed Name of Applicant

SSN#

Name of Witness

Orientation Outline

Vendor's Name Orientation Training

Employee Name: _____

Date of Hire: _____

Description of Training	Date Completed	Trainee Initials	Trainer Name
Overview of VENDOR'S NAME mission, policies, practices and SLS philosophy & values			
IPP objectives of each consumer with whom staff member works directly			
Practical use of SLS to promote consumer self-reliance			
Rights and protections of consumers			
VENDOR'S NAME internal grievance procedure			
Fair hearing provisions			
Special Incident Reporting (SIR)			
Mandated reporter provisions / Protection from abuse, neglect & financial exploitation / Related documentation & reporting			
Appropriate conduct of staff in establishing and maintaining personal relationships with consumers			
Participation of consumers in a teaching, consulting or other instructional resource capacity			
Other: _____ _____ _____			

Employee Signature: _____ Date: _____

Vendor Signature: _____ Date: _____

Individual Rights

Supported Living Services Individual Rights

Consumer Preferences and Leadership

Individuals receiving SLS shall have the right to make decisions that shape the nature and quality of their lives in accordance with their preferences, and consistent with the goals of the consumer's IPP. These rights shall include, but are not limited to, the following:

- (a) Choosing where and with whom to live;
- (b) Controlling the character and appearance of the environment within their home;
- (c) Choosing and changing their SLS vendors and direct service staff;
- (d) Participating actively in their IPP process so that the SLS they receive is based on their needs and preferences;
- (e) Receiving services appropriate to their evolving needs and preferences for support without having to move from the home of their choice, for as long as SLS remains the preferred objective, as determined in the consumer's IPP process; and
- (f) Informing the regional center about how satisfied they are with the services they are receiving, and to have this information taken into account in the regional center's periodic evaluation of the SLS vendor's service.

Right to Information

To assure opportunities for making informed decisions as people supported in community settings, SLS consumers shall have a right to information, in an understandable and accessible form. Such information shall include, but not be limited to:

- (a) An explanation of the general concepts, purposes, and practices of SLS;
- (b) Training in the philosophy and objectives of SLS, available from the SLS vendor;
- (c) Information from the SLS vendor describing any change in the SLS vendor's service design that would affect the services being received by the consumer; and,
- (d) Notice in writing from the regional center when their SLS is affected by the termination of a contract with a SLS vendor, within 10 days of a notification of contract termination.

Excerpted from Supported Living Service Regulations, Article 3, Sections 58620 and 58621.

Supported Living Principles

Supported Living Principles

The Department of Developmental Services' implementation of supported living is guided by the principles enumerated in Section 4689(a) of the Lanterman Act:

- ⊙ Individuals shall be supported in living arrangements which are typical of those in which persons without disabilities reside.
- ⊙ The services or supports that a individual receives shall change as his or her needs change without the individual having to move elsewhere.
- ⊙ The individual's preference shall guide decisions concerning where and with whom he or she lives.
- ⊙ Individuals shall have control over the environment within their own home.
- ⊙ The purpose of furnishing services and supports to a individual shall be to assist that individual to exercise choice in his or her life while building critical and durable relationships with other individuals.
- ⊙ The services or supports shall be flexible and tailored to a individual's needs and preferences.
- ⊙ Services and supports are most effective when furnished where a person lives and within the context of his or her day-to-day activities.
- ⊙ Individuals shall not be excluded from Supported Living Service arrangements based solely on the nature and severity of their disabilities.

Excerpted from the
California Department of Developmental Services
Supported Living Policy Statement, April, 1994

Grievance Procedure

Consumer Grievance Procedures

Consumers who have complaints will be encouraged to first communicate the complaint or grievance to their House Manager. Best efforts will be made to resolve issues or complaints with the House Manager. As is typical of the role of circles of support, individual members of the circle, or the entire circle, may be involved in this process on behalf of the consumer at any time.

Should the consumer be dissatisfied with the outcome of the communication with the House Manager, the individual, his/her circle of support, person-centered planning team and/or other advocate may request a meeting with Vendor. A meeting will be held no more than three working days after the request is made. The Vendor will respond with a decision no later than 5 working days after the meeting. The decision of the Vendor will be final.

Grievances of Vendor Name personal attendants are subject to the standard Internal Grievance Procedure in effect for all employees.

Employee Initials_____

Suspected Abuse Reporting Form

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CONFIDENTIAL REPORT -

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

NOT SUBJECT TO PUBLIC DISCLOSURE

REPORT OF SUSPECTED DEPENDENT ADULT/ELDER ABUSE

TO BE COMPLETED BY REPORTING PARTY. PLEASE PRINT OR TYPE. SEE GENERAL INSTRUCTIONS.

COUNTY APS/OMBUDSMAN CASE NUMBER

LAW ENFORCEMENT CASE/FILE NUMBER

RECEIVING AGENCY USE ONLY

A. VICTIM [As applicable under Welfare and Institutions Code (WIC) 15629 (a)] ☐ CHECK THIS BOX IF VICTIM CONSENTS TO DISCLOSURE OF INFORMATION (Ombudsman use only)

*NAME (LAST NAME FIRST) *AGE *DATE OF BIRTH *SSN *SEX ☐ M ☐ F *ETHNICITY *LANGUAGE (✓ CHECK ONE)

☐ NON-VERBAL ☐ ENGLISH ☐ OTHER (SPECIFY)

*ADDRESS (IF FACILITY, INCLUDE NAME) *CITY *ZIP CODE *TELEPHONE

*PRESENT LOCATION (IF DIFFERENT FROM ABOVE) *CITY *ZIP CODE *TELEPHONE

☐ (ELDERLY (80+)) ☐ DEVELOPMENTALLY DISABLED ☐ MENTALLY ILL/DISABLED ☐ PHYSICALLY DISABLED ☐ UNKNOWN/OTHER ☐ LIVES ALONE ☐ LIVES WITH OTHERS

*B. REPORTING PARTY: Check Appropriate Box if Reporting Party Waives Confidentiality: ☐ ALL ☐ All but victim ☐ All but Perpetrator

*NAME (PRINT) *SIGNATURE *OCCUPATION *AGENCY

RELATION TO VICTIM/HOW KNOWS OF ABUSE WHERE TO CONTACT (STREET) (CITY) (ZIP CODE) TELEPHONE

()

C. INCIDENT INFORMATION - Address where Incident Occurred:

*DATE/TIME OF INCIDENT(S) *PLACE OF INCIDENT (✓ CHECK ONE)

☐ OWN HOME ☐ COMMUNITY CARE FACILITY ☐ HOSPITAL/OUTPATIENT HOSPITAL

☐ HOME OF ANOTHER ☐ NURSING FACILITY/SWING BED ☐ OTHER (SPECIFY)

D. REPORTED TYPES OF ABUSE (✓ CHECK ALL THAT APPLY).

1. PERPETRATED BY OTHERS (WIC 15610.07 & 15610.63)

a. PHYSICAL

☐ ASSAULT/BATTERY

☐ CONSTRAINT OR DEPRIVATION

☐ SEXUAL ASSAULT

☐ CHEMICAL RESTRAINT

☐ OVER OR UNDER MEDICATION

b. NEGLECT

☐ FINANCIAL

☐ ABANDONMENT

☐ ISOLATION

f. ABDUCTION

☐ OTHER (Non-Mandated: e.g.,

deprivation of goods and

services: psychological/mental)

2. SELF-NEGLECT (WIC 15610.57(b)(5))

☐ PHYSICAL CARE (e.g., personal hygiene, food, clothing, shelter)

☐ MEDICAL CARE (e.g., physical and mental health needs)

☐ HEALTH AND SAFETY HAZARDS

☐ MALNUTRITION/DEHYDRATION

☐ OTHER (Non-Mandated: e.g., financial)

ABUSE RESULTED IN (✓ CHECK ALL THAT APPLY) ☐ NO PHYSICAL INJURY ☐ MINOR MEDICAL CARE ☐ HOSPITALIZATION ☐ CARE PROVIDER REQUIRED

☐ DEATH ☐ MENTAL SUFFERING ☐ OTHER (SPECIFY) ☐ UNKNOWN

*E. REPORTER'S OBSERVATIONS, BELIEFS, AND STATEMENTS BY VICTIM IF AVAILABLE. LIST ANY POTENTIAL DANGER FOR INVESTIGATOR (E.G., ANIMALS, WEAPONS, COMMUNICABLE DISEASES, ETC.). ☐ CHECK IF MEDICAL, FINANCIAL, PHOTOGRAPHS OR OTHER SUPPLEMENTAL INFORMATION IS ATTACHED.

F. FAMILY MEMBER OR OTHER PERSON RESPONSIBLE FOR VICTIM'S CARE. (If unknown, list contact person).

*NAME IF CONTACT PERSON ONLY ✓ CHECK ☐ *RELATIONSHIP

*ADDRESS *CITY *ZIP CODE *TELEPHONE

()

G. OTHER PERSON BELIEVED TO HAVE KNOWLEDGE OF ABUSE. (e.g., family, significant others, neighbors, medical providers and agencies involved, etc.)

NAME ADDRESS TELEPHONE NO. RELATIONSHIP

()

H. SUSPECTED ABUSER ✓ Check if ☐ Self-Neglect

NAME OF SUSPECTED ABUSER ☐ CARE CUSTODIAN (type) ☐ PARENT ☐ SON/DAUGHTER ☐ OTHER

☐ HEALTH PRACTITIONER (type) ☐ SPOUSE ☐ OTHER RELATION

ADDRESS *ZIP CODE *TELEPHONE *SEX ☐ M ☐ F *ETHNICITY *AGE *DOB *HEIGHT *WEIGHT *EYES *HAIR

()

I. TELEPHONE REPORT MADE TO: ☐ APS ☐ Law Enforcement ☐ Ombudsman ☐ Calif. Dept. of Mental Health ☐ Calif. Dept. of Developmental Services

NAME OF OFFICIAL CONTACTED BY PHONE *TELEPHONE *DATE/TIME

()

J. WRITTEN REPORT ☐ Mailed or ☐ Faxed (DO NOT FAX REPORT TO CDSS) FAX to agency to which telephone report was made.

AGENCY NAME ADDRESS OR FAX # DATE RECEIVED OR FAXED

()

K. RECEIVING AGENCY USE ONLY ☐ Telephone Report ☐ Written Report

1. Report Received by: Date/Time:

2. Assigned ☐ Immediate Response ☐ Ten-day response ☐ No initial face-to-face required ☐ Not APS

Approved by: Assigned to (optional):

3. Cross-Reported to: ☐ CDHS, Licensing & Care; ☐ CDSS-CCL; ☐ CDA Ombudsman; ☐ Bureau of Medi-Cal Fraud & Elder Abuse; ☐ Mental Health; ☐ Law Enforcement;

☐ Professional Board; ☐ Developmental Services; ☐ APS; ☐ Other (Specify) Date of Cross-Report:

()

SOC 941 (8/98)

Suspected Abuse Reporting Form

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

REPORT OF SUSPECTED DEPENDENT ADULT/ELDER ABUSE GENERAL INSTRUCTIONS

PURPOSE OF FORM

This form, as adopted by the California Department of Social Services, is required under Welfare and Institutions Code (WIC) Sections 15630 and 15658(a)(1). This form documents the information given by the reporting party on the suspected incident of abuse of an elder or dependent adult. "Elder," as defined in WIC Section 15610.27 means any person residing in this state who is 65 years of age or older. "Dependent Adult," as defined in WIC 15610.23 means any person residing in this state, between the ages of 18 and 64, who has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have diminished because of age. Dependent adult includes any person between the ages of 18 and 64 who is admitted as an inpatient to a 24-hour health facility as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code (H & S).

REPORTING RESPONSIBILITIES

Mandated reporters¹ (see definition on p. 2 under "Reporting Party Definitions") shall complete this form for each report of a known or suspected instance of abuse (physical abuse, sexual abuse, financial abuse, abduction, neglect (including self-neglect), isolation, and abandonment (see definitions in WIC 15610) involving an elder or a dependent adult. The original of this report shall be submitted within two (2) working days of making the telephone report to the responsible agency as identified below:

- The county Adult Protective Services (APS) agency or the local law enforcement agency (if abuse occurred in a private residence, apartment, hotel or motel, or homeless shelter).
- Long-term care ombudsman (LTCO) program or the local law enforcement agency (if abuse occurred in a nursing home, adult residential facilities, adult day programs, residential care facility for the elderly, or adult day health care center).
- The California Department of Mental Health or the local law enforcement agency (if abuse occurred in Metropolitan State Hospital, Atascadero State Hospital, Napa State Hospital, or Patton State Hospital).
- The California Department of Developmental Services or the local law enforcement agency (if abuse occurred in Sonoma State Hospital, Lanterman State Hospital, Porterville State Hospital, Fairview State Hospital, or Agnews State Hospital).

WHAT TO REPORT

Any mandated reporter who, in his or her professional capacity, or within the scope of his or her employment has observed, suspects, or has knowledge of an incident that reasonably appears to be physical abuse (including sexual abuse), abandonment, isolation, financial abuse, abduction, or neglect (including self-neglect), or is told by an elder or a dependent adult that he or she has experienced behavior constituting physical abuse, abandonment, isolation, financial abuse, abduction, or neglect, shall report the known or suspected instance of abuse by telephone immediately or as soon as practically possible, and by written report (SOC 341) sent within two working days to the appropriate agency.

MULTIPLE REPORTERS

When two or more persons who are required to report are present and jointly have knowledge of a suspected instance of abuse of an elder or a dependent adult and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single written report may be made and signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so, shall thereafter make the report.

FAILURE TO REPORT

Failure to report physical abuse (including sexual abuse), abandonment, isolation, financial abuse, abduction, or neglect (including self-neglect) of an elder or a dependent adult is a misdemeanor, punishable by not more than six months in the county jail, or by a fine of not more than \$1,000, or by both imprisonment and fine. Any mandated reporter¹ who willfully fails to report abuse of an elder or a dependent adult, where the abuse results in death or great bodily injury, may be punished by up to one year in the county jail, or by a fine of up to \$5,000, or by both imprisonment and fine.

WRITTEN REPORT/TELEPHONE REPORT

1. This form may be used by the receiving agency to record information through a telephone report of suspected dependent adult/elder abuse. Complete asterisk (*) sections on the form when a telephone report of suspected abuse is received as required by statute and the California Department of Social Services (CDSS).
2. If any item of information is unknown, write "unknown" beside the item.
3. Part B. REPORTING PARTY - Please check if reporting party waives confidentiality.
4. Part B. REPORTING PARTY - Mandated reporters¹ are required to give their names and non-mandated reporters may report anonymously.
5. Part C. INCIDENT INFORMATION - Please provide best known time frame (e.g., 2 days, 1 week, or ongoing).
6. Part D. Please check all types of suspected abuse that apply.
7. Part E. Reporter may attach medical diagrams, photographs of injuries or environment, etc.
8. Part I. TELEPHONE REPORT MADE TO - The mandated reporter¹ completes this section after making the telephone report.
9. Part K. AGENCY USE ONLY - This section may be used by the agency receiving the written report.

DISTRIBUTION OF SOC 341 FORMS/COPIES

Mandated reporter - After making the telephone report send the original and 1 copy to the receiving agency, keep 1 copy for your file. DO NOT SEND A COPY TO THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES.

Receiving Agency - Place the original in the case file. The copy may be sent to a cross-reporting agency or it may be discarded.

SOC 341 (001) GENERAL INSTRUCTIONS

Suspected Abuse Reporting Form

GENERAL INSTRUCTIONS (continued)

IDENTITY OF THE REPORTER

The identity of all persons who report under WIC Chapter 11 shall be confidential and disclosed only between APS agencies, local law enforcement agencies, LTCO coordinators, Bureau of Medi-Cal Fraud and Elder Abuse of the Office of the Attorney-General, licensing agencies or their counsel, investigators of the Department of Consumer Affairs who investigate elder and dependent adult abuse, the office of the District Attorney, the Probate Court, the Public Guardian, or upon waiver of confidentiality by the reporter, or by court order.

REPORTING PARTY DEFINITIONS

"Mandated Reporters (WIC) *15630 (a) Any person who has assumed full or intermittent responsibility for care or custody of an elder or dependent adult, whether or not that person receives compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults, or any elder or dependent adult care custodian, health practitioner, clergy member, or employee of a county adult protective services agency or a local law enforcement agency, is a mandated reporter."

Care Custodian (WIC) *15610.17 'Care custodian' means an administrator or an employee of any of the following public or private facilities or agencies, or persons providing care or services for elders or dependent adults, including members of the support staff and maintenance staff: (a) Twenty-four-hour health facilities, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code. (b) Clinics. (c) Home health agencies. (d) Agencies providing publicly funded in-home supportive services, nutrition services, or other home and community-based support services. (e) Adult day health care centers and adult day care. (f) Secondary schools that serve 18- to 22-year-old dependent adults and postsecondary educational institutions that serve dependent adults or elders. (g) Independent living centers. (h) Camps. (i) Alzheimer's Disease day care resource centers. (j) Community care facilities, as defined in Section 1502 of the Health and Safety Code, and residential care facilities for the elderly, as defined in Section 1569.2 of the Health and Safety Code. (k) Respite care facilities. (l) Foster homes. (m) Vocational rehabilitation facilities and work activity centers. (n) Designated area agencies on aging. (o) Regional centers for persons with developmental disabilities. (p) State Department of Social Services and State Department of Health Services licensing divisions. (q) County welfare departments. (r) Offices of patients' rights advocates and clients' rights advocates, including attorneys. (s) The office of the long-term care ombudsman. (t) Offices of public conservators, public guardians, and court investigators. (u) Any protection or advocacy agency or entity that is designated by the Governor to fulfill the requirements and assurances of the following: (1) The federal Developmental Disabilities Assistance and Bill of Rights Act of 2000, contained in Chapter 144 (commencing with Section 15001) of Title 42 of the United States Code, for protection and advocacy of the rights of persons with developmental disabilities. (2) The Protection and Advocacy for the Mentally Ill Individuals Act of 1986, as amended, contained in Chapter 114 (commencing with Section 10801) of Title 42 of the United States Code, for the protection and advocacy of the rights of persons with mental illness. (v) Humane societies and animal control agencies. (w) Fire departments. (x) Offices of environmental health and building code enforcement. (y) Any other protective, public, sectarian, mental health, or private assistance or advocacy agency or person providing health services or social services to elders or dependent adults."

Health Practitioner (WIC) *15610.37 'Health practitioner' means a physician and surgeon, psychiatrist, psychologist, dentist, resident, intern, podiatrist, chiropractor, licensed nurse, dental hygienist, licensed clinical social worker or associate clinical social worker, marriage, family, and child counselor, or any other person who is currently licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, any emergency medical technician I or II, paramedic, or person certified pursuant to Division 2.5 (commencing with Section 1797) of the Health and Safety Code, a psychological assistant registered pursuant to Section 2913 of the Business and Professions Code, a marriage, family, and child counselor trainee, as defined in subdivision (c) of Section 4980.03 of the Business and Professions Code, or an unlicensed marriage, family, and child counselor intern registered under Section 4980.44 of the Business and Professions Code, state or county public health or social service employee who treats an elder or a dependent adult for any condition, or a coroner."

EXCEPTIONS TO REPORTING (WIC 15630 (b) (3) (A))

A mandated reporter who is a physician and surgeon, a registered nurse, or a psychotherapist, as defined in Section 1010 of the Evidence Code, shall not be required to report a suspected incident of abuse where all of the following conditions exist:

- (I) The mandated reporter^f has been told by an elder or a dependent adult that he or she has experienced behavior constituting physical abuse (including sexual abuse), abandonment, isolation, financial abuse, abduction, or neglect (including self-neglect).
- (II) The mandated reporter^f is not aware of any independent evidence that corroborates the statement that the abuse has occurred.
- (III) The elder or the dependent adult has been diagnosed with a mental illness or dementia, or is the subject of a court-ordered conservatorship because of a mental illness or dementia.
- (IV) In the exercise of clinical judgment, the physician and surgeon, the registered nurse, or the psychotherapist, as defined in Section 1010 of the Evidence Code, reasonably believes that the abuse did not occur.

In a long-term care facility, a mandated reporter^f who the California Department of Health Services determines, upon approval by the Bureau of Medi-Cal Fraud and the state office of the Long-term Care Ombudsman (LTCO), has access to plans of care and has the training and experience to determine whether all the conditions specified below have been met, shall not be required to report the suspected incident of abuse (WIC 15630 (b) (4) (A)):

- (I) The mandated reporter^f is aware that there is a proper plan of care.
- (II) The mandated reporter^f is aware that the plan of care was properly provided and executed.
- (III) A physical, mental, or medical injury occurred as a result of care pursuant to clause (I) or (II).
- (IV) The mandated reporter^f reasonably believes that the injury was not the result of abuse.

Confidentiality Policy

Consumer Confidentiality Policy

As an employee of **VENDOR'S NAME**, you may have access to consumer information and records. The information to which you may have access is confidential. It is your professional and legal obligation not to disclose information about a consumer to undesigned person or agencies. ALL reports, letters, memorandums and notations regarding a consumer are confidential.

Standards and Procedures to Protect Consumer Confidentiality

- ⊙ Information about consumers contained in all reports, letters, memorandums and notations are regarded as confidential, whether labeled confidential or not.
- ⊙ All reports, letters, memorandums and notations regarding a consumer are to be placed in a closed file jacket or face down on your desk when you are not reading it.
- ⊙ Use the consumer's first name only if you are posting information where it may be seen. If there are consumers with the same first name, you may use the consumer's first name and the first letter of the last name.
- ⊙ Notes, reports, letters or memorandums with information about consumers are not to be removed from the premises without proper authorization.
- ⊙ Notes, reports, letters or memorandums with information about consumers will be shredded before being thrown out.
- ⊙ Discussions of any consumer should take place privately and include only staff who are directly involved with the consumer.
- ⊙ Staff will sign an agreement to adhere to the consumer confidentiality policy and that agreement will be filed in the employee's personnel file.

Release of Consumer Information (*Section 4514 Welfare & Institutions Code Confidentiality and Disclosure*)

- ⊙ Information about a consumer may be released to parents or care providers only when there is a signed release from the consumer and/or conservator of the consumer.
- ⊙ Information about a consumer may be released without a consumer's and/or conservator's written release if required by a valid Court Order.
- ⊙ In case of a medical emergency, pertinent information may be released without the consumer's consent to any attending medical professional, including Emergency Medical Technicians and Firepersons.
- ⊙ Information may be released to a consumer's conservator without a consumer's consent.
- ⊙ Any person not honoring the laws regarding consumer confidentiality is subject to fines and penalties.

Acknowledgement of Policy

Acknowledgement of Consumer Confidentiality Policy

Employee Name: _____

Date: _____

I have received a copy of **VENDOR'S NAME** Consumer Confidentiality Policy. I understand that talking about a consumer outside of **VENDOR'S NAME** or outside of a professional context is a serious breach of confidentiality. Discussion of any consumer or their services and supports should take place privately and include only staff who are directly involved with the consumer. Any breach of confidentiality may be considered cause for disciplinary action, including termination of employment from **VENDOR'S NAME**.

I have read the **VENDOR'S NAME** Consumer Confidentiality Policy and agree to adhere to this policy as stated.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

Confidentiality Agreement

Confidentiality Agreement

The nature of services provided by VENDOR'S NAME requires information to be handled in a private, confidential manner.

Information about our business, employees, and the people we support can be released only to individuals or agencies with our written consent. Legal or regulatory guidelines provide the only exceptions to this policy. All reports, memorandum, notes, conversations, and documents will remain part of this company's confidential records.

The names, addresses, phone numbers or salaries of our employees will be released only to people authorized by the nature of their duties to receive this information and only with consent of both the management and the employee.

The undersigned employee agrees to abide by this confidentiality agreement.

Employee Signature

Date

Witness

Date

A Glossary of Words and Terms

Accessible: Activities or places which can be used by people with disabilities. Accessibility usually has to do with whether or not you can get to a place in a wheel chair.

Activities of Daily Living: Activities necessary for an individual to function as independently as possible in his/her environment.

Adult Foster Home: A foster home is a full-time living arrangement in which one or two residents live with a family in its own home. Training is provided principally by the foster parents and includes help in the daily routines of living, protection, security, and encouragement toward self-help and independence. Foster homes may be used for crisis and respite care, as well as for longer-term placement.

Advocacy: The act or process of representing the rights and interests of an individual or group, so as to realize the rights to which the individual or group is entitled, obtain needed services, and remove barriers to meeting identified needs. Advocacy may be performed by an individual on his or her own behalf (self-representation), by an individual on behalf of another (personal advocacy), by an individual or organization on behalf of a group with which they are concerned (class advocacy), or by individuals or organizations addressed to changing administrative practices or laws (systems advocacy).

Advocate: A person who represents an individual and acts on his/her behalf in order to protect his/her rights and interests.

Age-Appropriate: Activities or skills which are appropriate for a person with a developmental disability based on his/her chronological age. That is, those things that someone else the same age without a disability would be doing.

Area Boards: Mandated by the State of California to monitor the legal, civil and service rights of persons with developmental disabilities. Responsibilities include: advocacy; public information; program review/evaluation; and, resource planning.

California Department of Developmental Services: This department writes policies, supports legislation and a number of other activities which set standards in quality service for Californians with developmental disabilities. The department also provides the funding for regional center services and state developmental centers.

California Department of Rehabilitation: This department can help purchase many of the services needed for supported employment. The Vocational Rehabilitation section will help get the training needed to start a job and the section will help get the support needed to keep a job.

A Glossary of Words and Terms

Client Program Coordinator (CPC): A person responsible for the overall planning, coordination, and implementation of an Individual Program Plan. Regional Centers employ Client Program Coordinators.

Community Care Facilities: These are community residences which are licensed by the Community Care Licensing Section of the Department of Social Services.

Community Care Licensing: This is a section of the Department of Social Services which provides licenses and monitors community care facilities.

Community Classroom/Community-Based Training: Teaching and learning functional skills and activities in the place where it naturally occurs. This may mean the home, workplace, or the community.

Community-Based: Normalized settings in the community in which the number of individuals with disabilities approximates the normal occurrence of disabling conditions in the total population.

Competitive Employment: Employment within an integrated setting where the individual is receiving at least minimum wage and these wages are not being subsidized by any form of assistance nor are any additional forms of support service provided.

Conservatorship: A legal term to indicate that another person, usually a parent, has been given legal rights to make the decisions regarding another person's financial affairs.

Consumer: A person (Primary Consumer) or relative of a person (Secondary Consumer) who uses services. A primary consumer is any person believed to have a developmental disability, or a person believed to have a high risk of parenting a developmentally disabled infant, or any infant having a high risk of becoming developmentally disabled, who following intake and assessment by the regional center, is found eligible for, and in need of, regional center services.

Day Service Provider: A training program for persons with developmental disabilities funded by the California Department of Developmental Services. Training is provided in work, community access and independent living skills. Paid employment is often a part of the program.

Department of Health: This is the agency which licenses and monitors intermediate care facilities.

A Glossary of Words and Terms

Department of Labor: The federal agency which sets the standards for how much people get paid and has regulations for special wages, e.g. subminimum.

Developmental Disability: A severe, chronic disability of an individual which (1) is attributable to a mental or physical impairment or a combination of mental and physical impairments; (2) is manifest before the age of 22; (3) is likely to continue indefinitely; (4) results in substantial functional limitation in three or more of the following areas of life activity: self-care, receptive and expressive language, learning, mobility, self direction, capacity for independent living, or economic self sufficiency; and (5) reflects the need for a combination and sequence of special, interdisciplinary or generic care, treatment or other services which are of lifelong or extended duration and individually planned and coordinated. The above Federal definition is slightly different from the definition used by the State of California which is (1) a severe, chronic disability of an individual which (1) is attributable to a mental or physical impairment or a combination of mental and physical impairments; (2) is manifest before the age of 18; (3) is likely to continue indefinitely; (4) results in substantial limitation; (5) includes mental retardation, autism, cerebral palsy, epilepsy or conditions similar to mental retardation; and (6) is not solely physical in nature.

Disability: A functional limitation resulting from a physical or mental condition. A person with a disability does not necessarily imply that there is also a handicap. It is not until the disability impedes the person from achieving his/her maximum ability in a given area that it is then considered a handicap.

Earned Income: A Social Security term which refers to money a person earns by performing work.

Employment Development Specialist/Job Developer: Staff of a Supported Employment service who complete all of the up-front work involved in finding a job.

Employment Training Specialist/Job Coach: Staff of a Supported Employment service provide on-the-job training, ongoing assistance and follow-along support for persons with disabilities who are working in the community.

Enclave: A work situation where there is a small group of people with developmental disabilities working in a community business with a supervisor who assists them.

Family Support Services: Those services which supplement and enhance the family's resources as it cares for the individual with developmental disabilities. These may include such services as respite care (both in and outside of the home), parent counseling, homemakers, informational peer groups, family education, home training, and social networks.

A Glossary of Words and Terms

Follow-Along/Follow-up: After initial job training is completed and someone is performing a job to the standards of the employer, follow-along/follow-up support services begin.

Functional Skills and Activities: Those skills and activities which have value to the individual and are used or required for participation in the individual's environment. These skills and activities are determined by the parent interview and educational staff.

Group Home or Small Family Care Home: Group Homes and small family homes provide supervision and training services for children and adults to enable residents to move to more independent settings.

Group Placements: An employment option where a small group of persons with disabilities work in a community business alongside people who are not disabled with a supervisor who assists them.

Habilitation Specialist: Department of Rehabilitation staff who provide and fund a plan for follow-along services for persons who are eligible for regional center services and are working.

IHP/IWRP: Individual Habilitation Plan or Individual Written Rehabilitation Plan which is required by law if an individual is receiving services from a state rehabilitation agency; contains individual employment goals and training.

Impairment Related Work Expenses: Work expenses which can be deducted from earnings. If approved by Social Security, IRWEs may include: follow-along support services; job training; medical devices; certain attendant care services (to get ready, and to get to or from work); out of the ordinary transportation costs; work-related equipment; drugs and medical services; some home modifications; and, other expenses (e.g., cost of keeping a guide dog, expendable medical supplies). An IRWE helps reimburse someone 50% of the cost of these services.

Independent Living Program: This is a service which provides people who live on their own with the types of support that will keep them living independently.

Individual Education Plan: A written plan which tells a student's present strengths, and goals and objectives for the school year. The I.E.P. is written for students who receive special education services.

Individual Habilitation Plan: A written plan which states a person's goals for work and the kind of training it will take to reach those goals. The I.H.P. is written for people who receive services from the California Department of Rehabilitation.

A Glossary of Words and Terms

Individual Placement: The placement of one individual with a disability into a community job.

Individual Program Plan (IPP): An individualized, written plan developed by the regional center which is based on a person's strengths and needs. It is a written plan of action, developed by an Interdisciplinary Team, with parent and consumer participation. The plan should specify the goals and objectives and service strategies which help a person grow and develop. It is reviewed by the regional center on an annual basis and is modified throughout the year on a needs basis. It is similar in purpose to the IEP developed by the education system and the IHP developed by the Department of Rehabilitation and should be coordinated with these plans when they exist.

Individual Service Plan: This is a plan which is written when someone goes into out of home placement. It outlines the type of training and supervision that a person needs to live as independently as possible.

Individual Transition Plan: A written plan which tells what a person will need to live, work and play as an adult. It should be written at least four years before someone is leaving school. The I.T.P. is written with the help of the student, parent, teacher and others who might assist the student after graduation.

Individualized Written Rehabilitation Plan (IWRP): An individual program plan specifically for the development of vocational skills and abilities. The IWRP should be developed jointly by the individual or the individual's beneficiary or his/her representative and the service provider. The plan should outline services to be received, the time frame in which goals should be accomplished, the duration of time involved, the expected outcome, and a method of evaluating progress.

Integration: The result of all persons with disabilities working, living, and recreating in the same community environments as everyone else. The opposite of segregation where people with disabilities are congregated into separate programs or environments and only interact with other persons with disabilities and agency staff.

Interdisciplinary Team (IDT): The group of people convened by the Regional Center for the purpose of preparing a client's individual program plan. An interdisciplinary team shall include, at a minimum, the client, one or more representatives of the regional center, and where appropriate, the client's parents, guardian, or conservator. Although the statute governing the participants only requires the Regional Center Client Program Coordinator and the client and/or his legal representative, Individual Program Plans frequently require the participation of all significant others in the client's life.

A Glossary of Words and Terms

Interdisciplinary Team Process: The interdisciplinary process is a team approach to diagnosis, evaluation, and individualized program planning and implementation. Each participant, utilizing the skills, competencies, insights, and perspectives his/her training and experience provide, focuses on identifying the developmental needs of the individual and devising ways to meet them, without the constraints imposed by assigning particular domains of behavior or development to particular disciplines only. Participants share all information and recommendations, and develop, as a team, a single, integrated individualized program plan to meet the individual's identified needs.

Intermediate Care Facility for the Developmentally Disabled/Habilitative (ICFDD/H): A group home for individuals who require assistance in meeting daily living needs. The facility's focus is to provide training to residents in a wide variety of skills ranging from self-help to independent living. The ultimate goal of the group home is to develop those skills required for the person to live in a more independent living situation. ICFDD/H residents require regular, but less than daily, medical and nursing care.

Job Development: The process of locating competitive jobs in the community that are appropriate for individuals with developmental disabilities. It consists of community job market screening, employer contact and job analysis.

Job Placement: The process of matching what the employer needs with what a person has to offer as a worker.

Job Related Skills: Skills needed to obtain or maintain a job but not necessarily related to the performance of a specific job duty. Such skills may include learning to ride a bus to and from work, dressing for the job, appropriate break-time behavior or depositing a paycheck in the bank.

Job Site Training/On-site Job Training: A component of supported employment services involving the direct instruction of job tasks and related skills by a job coach. This takes place on a worksite in the community.

Job-coach: The person who helps get people used to a new job. That means helping someone learn how to do the job in the way that's best for them.

Job-Site Training: A component of supported employment services involving the direct and systematic instruction of job tasks and related vocational skills provided by a job trainer to a worker who is disabled. This instruction takes place on a job-site in the community and utilizes behavioral training techniques. It is comprised of the following phases: job orientation/assessment; initial training/skill acquisition; and skill generalization and maintenance/fading. The trainer is an agency employee. The worker has already been hired for this job.

A Glossary of Words and Terms

Lanterman Developmental Disabilities Services Act of 1976: This California State law provides basic service rights to persons with developmental disabilities. It put in place the Department of Developmental Services, Regional Center, the State Council on Developmental Disabilities and Area Boards to establish needed services and monitor their delivery.

Medicaid/Medi-Care: Government-subsidized programs which provide assistance with health care expenses for eligible aged, blind, and disabled persons.

Medicaid/Medi-Care: Government-subsidized programs which provide assistance with health care expenses for eligible persons who are aged, blind, or disabled.

Mental Health Worker/Case Manager: Community mental health staff who assist in providing resources or ongoing support and advocacy for persons with mental health concerns.

Natural Family Placement: A living arrangement in which a disabled person lives with his/her own family, which might include the parental family, relatives, or spouse and/or children.

Normalization: A manifestation of a human right. Normalization requires making available to individuals with developmental disabilities patterns and conditions of everyday life that are as similar as possible to those of the mainstream of society. Such individuals are able to enjoy a manner of living that is as close as possible to that considered to be normal in the community and to assume socially valued roles.

Objectives: Are specific statements about what someone will learn, in what period of time, where the learning will take place and how to tell if learning has occurred.

Out of home placement: This is the process that occurs when someone leaves the home of their parents and moves into another living option.

Personal and Incidental funds: People who receive Social Security benefits, receive a part of that money for personal needs.

Placement: The process of matching what the employer needs with what a person has to offer as a worker. There are individual placements and placements with others such as work crews or enclaves.

Public Law 94-142: The federal law which established special education programs for students with special needs.

A Glossary of Words and Terms

Rates: This is the funding that residences receive for the training and supervision of people that live there.

Regional Centers: Regional centers are non-profit agencies which have contracts with the California State Department of Developmental Services. They help people who have developmental disabilities get the services they need through the Individual Program Plan. Twenty one centers provide people with residential, day, transportation, social, independent living, respite, medical, psychological, preschool and other services.

Regional Center Service Coordinator: Regional Center staff who to assist or fund ongoing support and advocacy for persons with developmental disabilities. Case managers are responsible for coordinating the overall support service plan.

Regional Occupational Center: When a regional occupational program is housed in a separate, identifiable facility, it is referred to as a regional occupational CENTER, called ROC. The intent of both the ROC and ROP is basically the same.

Regional Occupational Program: A regional occupational program, sometimes called ROP, is a special public educational unit established to assist students in preparing for categories of employment which require special or technical training or skills. A regional occupational program is typically contained in a variety of physical facilities and is not situated in one single plant or site.

Residential Service Provider: A person or persons who provide a place to live with varying amounts of training and supervision for people with developmental disabilities.

Residential Service Provider: Self-employed or staff member who provides living options for persons with disabilities who need basic care and supervision.

Room and Board Facilities: Room and board is a living arrangement in which a person purchases food, shelter, and household maintenance from a facility not required to be licensed by the Department of Health and Welfare. These arrangements are suitable for residents who need little or no assistance or supervision in their daily affairs and activities. These facilities are not directly involved in training of residents.

Segregation: The congregation of people with special needs in daytime programs and/or living situation where there is little or no interaction with people who do not have disabilities. This is the opposite of mainstreaming or integration.

A Glossary of Words and Terms

Semi-Independent Living: A residential facility for individuals who are able to care for themselves and who have adequate community living skills. The focus of the program is to encourage self-support abilities and to allow individuals to remain in the community in a family-style setting.

Service Coordination: Securing through purchase or referral, services specified in the person's individual program plan, coordination of service programs, information and dissemination, and measurement of progress toward objectives contained in the person's individual program plan.

Skilled Nursing Facility: A health care facility providing in-patient care to individuals with unstable health problems requiring nursing care. Provides restorative and rehabilitative care and assistance in meeting daily living needs. Medical supervision is provided on a regular, but not daily, basis. Placement of developmentally disabled persons in SNFs is unusual unless the person is elderly.

Small Family Care Home/Group Home: A licensed boarding home or private establishment for individuals who are unable to maintain a safe environment in an independent living arrangement or who require personal care and supervision.

Social Security Benefits: Many people with disabilities are eligible for Social Security benefits. These benefits help pay for the costs of out of home placement.

Special Education: Services for students who are not succeeding in regular education and need additional educational experiences in order to become independent, productive adults.

SSDI (Social Security Disability Insurance): A Social Security income support program administered to provide a minimum cash income for workers who are disabled and who have paid into Social Security through their own or their parent's payroll deduction. There are certain instances where a person with a disability may receive both SSDI and SSI, usually in the event the person is a dependent child of a person receiving SSDI payments.

SSI (Supplemental Security Income): SSI is a federal social security program that pays monthly cash payments to persons who are aged, disabled and blind who have limited income and assets. The aim of the program is to provide a minimum income for rent, food and clothing. The payment can vary according to formula.

SSI and SSDI: Supplemental Security Income and Social Security Disability Income - Federal income maintenance programs, run by the Social Security Administration, for the aged, blind, and disabled which provide monthly cash payments to eligible persons.

A Glossary of Words and Terms

State Developmental Centers: These are large residences also known as state hospitals. These are run by the State Department of Developmental Services.

Supported Employment Service Provider: Provides employment options for persons with developmental disabilities. This service is funded by the California Department of Rehabilitation.

Supported Employment: Paid employment which: (1) is for persons with developmental disabilities who because of their disabilities, need intensive ongoing support through the length of their employment to perform in a work setting; (2) is conducted in a variety of settings, particularly work sites in which persons without disabilities are employed; and (3) is supported by any activity needed to sustain paid work by persons with disabilities, including supervision, training and transportation.

Supported Living: Provides the services and supports needed for someone to live in their own home and be a part of their community.

Title XVII and Title XXII: These are the state laws which regulate community care facilities used by the regional center.

Transition: The transition from school to adult life calls for a range of choices about career options, living arrangements, social life, and economic goals that often have life-long consequences. The transition from school to working life is an outcome-oriented process encompassing a broad array of services and experiences that lead to employment and successful community living. The dimensions of community adjustment include the quality of a person's residential environment; level of employment; and the adequacy of his or her social and interpersonal network. Transition is a period that includes high school, the point of graduation, additional post-secondary education or adult services, and the initial years in employment. Transition is a bridge between the security and structure offered by the school and the opportunities and risks of adult life.

Transition Specialist: School district personnel who develop and implement a transition plan which facilitates the movement of a person with a disability from school-based to adult services.

Vendorization: Residential service providers who run community care facilities must be licensed by Community Care Licensing and vendored by the regional center. Vendorization allows the provider to accept state funds for the training and supervision of people who live in residences.

A Glossary of Words and Terms

Vocational Education: Public school vocational education consists of systematic, organized programs within the public school system and consists of class training in: 1) agriculture, 2) business, 3) home economics, 4) health occupations, 5) industrial arts, 6) marketing and distribution, and 7) trades and industry. Vocational education involves occupational awareness, exploration, and preparation. It emphasizes leadership development, practical hands-on experience or applications, entrepreneurship as well as a set of attitudes, knowledge, and skills relative to jobs and job tasks. Vocational education also prepares students for advanced training and education at the post secondary level.

Vocational Rehabilitation Counselor: Department of Rehabilitation staff or a private insurance company staff who develop and fund the plan for job development, placement and initial training and support for persons who need Supported Employment services.

Vocational Work Experience Education: A program that provides occupational preparation, through a cooperative arrangement between a school and an employer, for entry into a specific occupation.

Work Activity Program: The Department of Rehabilitation (Habilitation Section) funds and monitors those programs for people who have acquired basic vocational and independent living skills and need a work-oriented setting to prepare for a vocation. In practice, these programs are usually segregated, but need not be.

Work Crew: A small group of people with a supervisor who go from job to job in the community.

Work Incentives: There have been changes in the Federal law that provide incentives to people who receive SSI and SSDI and want to work. These incentives have removed some of the fears of losing essential cash and medical benefits.

Work Station in Industry: Also referred to as Enclave - paid work performed in a real work setting by workers with a disability. The work is supervised by an agency-trained and agency-paid person. The industry pays the agency for work produced. The agency pays workers, typically, on a piece-rate basis. The work station may be a good opportunity for some workers with severe disabilities to eventually move into part or full-time supported work in competitive employment.

Binders - Sample Individual Binder Content

- 1 Individual's Contacts**
- 2 Emergency - Contacts**
- 3 Emergency Plan / Safety Standards**
- 4 Individual Profile and Standards**
- 5 ISP**
- 6 IPP**
- 7 Individual Vendor & Staff Evaluation**
- 8 Miscellaneous**
- 9 Individual's Rental Agreement**
- 10 Individual's Grocery & Personal Expense Log**
- 11 Daily Communication Log**
- 12 Med Sheets, Observation, Maintenance Logs**
- 13 Rental Agreement**

Binders - Individual Binder Contact Sheet

Daily Communications Log

Date _____ Individual _____

Time _____ a.m. p.m. Support Person/PA _____

Each support person / PA should fill out his/her own separate log for the day.

Activities:

Choices Made Today:

Communication:

Training:

Nutrition/Food:

Medication:

Binders - Individual Binder Emergency Contacts

Contacts

Friends and Family		
Relationship	Name	Phone Number
Medical Contacts		
	Name	Phone Number
Physician		
Dentist		
Preferred Hospital		
Support Organizations		
	Name	Phone Number
Vendor		
Regional Center		
IHSS Coordinator		

Binders - Individual Binder Emergency Contacts

Emergency Contacts

Emergency Information

Date of Birth	_____
SSN:	_____
Allergies:	_____
Medications:	<i>(Medication-Dosage-Frequency)</i> _____
Medical Condition:	_____
Emergency Contact 1	_____
Emergency Contact 2	_____
Emergency Contact 3	_____
Physician Name/Number	_____
Insurance Provider 1	_____
Insurance Provider 2	_____

Authorization for Treatment

In the event of an accident or other emergency requiring medical treatment, including surgical care, while CONSUMER'S NAME is under the supervision of VENDOR'S NAME staff, the primary emergency phone numbers listed on this form must be contacted immediately. If the responsible party is unavailable or cannot be reached, I hereby authorize a representative of VENDOR'S NAME to make the arrangements he/she considers necessary for the above named individual to receive medical or hospital care, including necessary transportation. Furthermore, under such circumstances, I authorize any licensed physician or surgeon to provide necessary medical care and treatment to the above named individual. This notification is effective one year from the date of signature by the conservator or guardian.

_____	_____
Printed name of conservator	Date
_____	_____
Signature	Date

Binders - Sample of Staff Binder Contents

- 1 Purpose & Vision**
- 2 Individual Rights and Confidentiality Agreement**
- 3 Your Job Description**
- 4 Employee Performance Evaluation**
- 5 Memos and Notices**
- 6 Internal Grievance Procedure**
- 7 Special Incident & Mandated Reporter Procedure**
- 8 IHSS**
- 9 Miscellaneous**
- 10 Staff Expense Policies**
- 11 Staff Expense Log**
- 12 Forms**

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Suggested Training Topics

- ☐ Specific Job Description
- ☐ Philosophy, Values and Concepts of Supported Living
- ☐ INDIVIDUAL'S NAME Household Philosophy
- ☐ Individual Rights
- ☐ Emergency Procedures (medical, accidents, etc.)
- ☐ Disaster Preparedness (fire, earthquake, etc.)
- ☐ Abuse Reporting Requirements and Procedures
- ☐ Provision for CPR Training (if not currently certified)
- ☐ Roles of Paid and Unpaid Support
- ☐ Health & Safety Issues (including appropriate medical information)
- ☐ Personal Preferences & Daily Routines of INDIVIDUAL'S NAME
- ☐ Personal Care Routines specifically designed for INDIVIDUAL'S NAME
- ☐ Facilitated Communication
- ☐ Specific (non-aversive) Behavior Interventions (as appropriate)
- ☐ Communication & Interaction with Co-workers and Others
- ☐ Roles of INDIVIDUAL'S NAME family
- ☐ INDIVIDUAL'S NAME Communication with his/her family.
- ☐ Person-Centered (self-directed) Planning and IPPs
- ☐ Leisure, Recreation and Transportation Planning with INDIVIDUAL'S NAME
- ☐ Developing Circles of Support
- ☐ Accessing Community Resources
- ☐ Roles of NAME OF REGIONAL CENTER and other agencies
- ☐ Grievance Process
- ☐ Supporting INDIVIDUAL'S NAME in Making Choices and Decisions
- ☐ Handling of and Accountability for Household Monies
- ☐ Handling of and Accountability for INDIVIDUAL'S NAME Personal Money
- ☐ Assistance with Daily Household and Other Tasks
- ☐ Other _____
- ☐ Other _____
- ☐ Other _____

Binders - Staff Binder Training Attendance Form

Training Attendance Form

Name of Person Attending Training _____

- ☐ Employee
- ☐ Consultant
- ☐ Friend (unpaid)
- ☐ Other

Title of Training/Workshop _____

Topic _____ Date of Training _____

Name of Trainer _____

Two new things I learned:

1. _____

2. _____

Please indicate this training (1=Poor, 2=OK, 3=Very Good, 4=Great)

Helpful to me in my position/relationship with Individual'S NAME	1	2	3	4
Good background information and or review	1	2	3	4
Relevant topic: worth my time	1	2	3	4
Materials	1	2	3	4
Presentation of information and/or materials	1	2	3	4
Organization of training/workshop	1	2	3	4
Trainer was knowledgeable about the topic	1	2	3	4
Glad I was here and would recommend to others	1	2	3	4
I would like additional info/training (specify) on this topic	1	2	3	4
Comments:				

I certify that I attended this training.

 Signature

 Date

Binders - Staff Binder Wage Order 15

All employees in the state of California work under one of the seventeen Industrial Welfare Commission (IWC) Wage Orders, depending on the nature of their job, and or the industry in which the employee works.

As a personal attendant working for _____, you work under IWC wage order 15. As required by the provisions of wage order 15, personal attendants are not subject to the sections of the wage order that allow for the payment on overtime pay, or that require the employer to provide a duty free meal break during the employee's work shift.

Please complete, sign and date this acknowledgment.

I _____ understand that work I perform for _____ is worked under IWC wage order 15, and that as such, I am not required to take a duty free meal period, nor am I eligible to be paid overtime for hours worked in excess of 8 per day per 40 per week in accordance with the wage order. I also understand that I am able to have meals during my workday, but I will be paid for the time spent eating meals.

Employee Signature

Date

Supervisor Signature

Date

Training & Evaluation - Employee Evaluation

Employee Name: _____ Date: _____

Supervisor: _____ Dept: _____

Employee Preparing the Review: _____ For The Period (MM/YY) _____

Rating Scale: 1 = Significant Improvement Required

2 = Some Improvement Required

3 = Meets Requirements of Position

4 = Exceeds Requirements

5 = Superior Performance

Job Knowledge	N/A	1	2	3	4	5
Adheres to Connections for Life philosophy in promoting the individual's independence.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands his/her overall responsibilities.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands and attends to the needs of the individual.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows interest in acquiring additional job knowledge.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands and is able to express agency's supported living philosophy/values.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits agency's supported living philosophies and values in all work-related activities.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments _____						

Individual Support	N/A	1	2	3	4	5
Interacts with individual in an appropriate and respectful manner.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotes choices in the individual's daily activities.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates opportunities to expand the individual's life experiences.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides consistent approach supporting individual to attain goals as stated in IPP and ISP.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows through on individual plans and commitments.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates actively as requested or needed in:						
• individual's social activities	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• individual's financial/budget plan	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• individual's daily chores	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assists individual in developing meaningful relationships as requested or needed.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments _____						

Adapted from Creative Living Options

Training & Evaluation - Employee Evaluation

Time Management/Flexibility	<i>N/A</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>
Reports to work on time and is prepared to do his/her job effectively.	<input type="checkbox"/>					
Expresses willingness to work additional hours during extreme or emergency situations.	<input type="checkbox"/>					
Keeps scheduled work hours.	<input type="checkbox"/>					
Requests time off in advance.	<input type="checkbox"/>					
Attendance	<input type="checkbox"/>					
Comments _____						
<hr/>						
Administration	<i>N/A</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>
Completes all required documentation (daily logs, medication sheets, financial binder, etc.).	<input type="checkbox"/>					
Provides thorough, accurate, and meaningful documentation regarding activities.	<input type="checkbox"/>					
Attends required staff trainings.	<input type="checkbox"/>					
Submits neat, accurate time sheets.	<input type="checkbox"/>					
Follows through on assignments given by supervisor.	<input type="checkbox"/>					
Comments _____						
<hr/>						
Initiative	<i>N/A</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>
Willingly assumes additional responsibilities.	<input type="checkbox"/>					
Develops and shares ideas beneficial to the individual and the organization.	<input type="checkbox"/>					
Initiates activities that increase the individual's interest and participation levels.	<input type="checkbox"/>					
Comments _____						
<hr/>						
Communication	<i>N/A</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>
Communicates regularly with supervisor regarding the needs and progress of the individual.	<input type="checkbox"/>					
Keeps the lines of communication open with other staff members.	<input type="checkbox"/>					
Refrains from gossip and/or sharing personal information with other individuals and other employees.	<input type="checkbox"/>					
Comments _____						
<hr/>						

Training & Evaluation - Employee Evaluation

SUMMARY

EMPLOYEE STRENGTHS

RECOMMENDATIONS FOR GREATER PERFORMANCE

EMPLOYEE COMMENTS

I have reviewed this document and discussed the contents with my Supervisor. My signature means that I have been advised of my performance status, and does not necessarily imply that I agree with the evaluation.

Employee Signature

Date

Training & Evaluation - Individual Satisfaction

Community Connections Phone Survey

Hello, my name is [your name] and I work for Community Connections. We recently sent you a letter that said we would be calling you. We're trying to find out we're doing and if we can do better in supporting you. As we said in the letter, we will be putting your answers together in a report and we won't use your name.

Do you have a few minutes now to answer several questions? ☐ Yes ☐ No

If no, is there a better time to call? _____
Thanks, I will call back at that time.

If yes, Thanks, let's start:

I understand that [name of person or persons] is supporting you right now.

Is that right? ☐ Yes ☐ No

Does [he/she or they] show up on time? ☐ Yes ☐ No

Do they do what we say they will do? ☐ Yes ☐ No

In supporting you, what are we doing well?

What could we do better?

Do you need support that you are not getting from us?

Do you have anything else to tell me about the services that you get from Connections?

Thanks for your time! This information really helps us.

A Guide to Single Household Supported Living Services

**Developed for
Connections for Information and
Resources on Community Living (CIRCL)
4171 Starkes Grade Road
Placerville, CA 95667-9204**

**by
Kathleen Campbell
Joan Schmidt**

June, 2004