

## COMMUNITY LIVING OPTIONS

The level of support an individual needs to be safe, healthy, and happy in their living situation is one of the most important issues Interdisciplinary Teams (IDT) must review and discuss at a person's annual Individual Program Plan (IPP) meeting. Listed below are the various options for community living arrangements that California regional centers are able to provide for consumers they serve and support.

### DEPARTMENT OF SOCIAL SERVICES/COMMUNITY CARE LICENSING - LICENSED RESIDENTIAL OPTIONS

**Community Care Facilities (CCF):** CCFs are licensed by the Community Care Licensing Division of the State Department of Social Services to provide 24-hour non-medical residential care to children and adults with developmental disabilities who are in need of personal services, supervision, and/or assistance essential for self-protection or sustaining the activities of daily living.

There are expectations that all CCF providers:

- Provide a supportive program of supervision and training using a staff to client ratio that can vary from a minimum of 1:6 to 1:1 (depending on the facility's program design) when people are under supervision at the facility;
- Participate with the IDT to develop the IPP which establishes objectives and training methods that will be implemented by the staff;
- Maintain written ongoing progress notes for the individual; and
- Prepare reports (monthly, quarterly, etc.) as required regarding progress toward meeting IPP objectives.

Based upon the types of services to be provided and individual needs, a CCF may be vendored by a regional center at one of the following Alternative Residential Model (ARM) service levels or as a Specialized Residential Facility.

- **ARM Service Level 1:** Care and supervision for persons with self-care skills.
- **ARM Services Level 2:** Care, supervision and incidental training for persons with some self-care skills and no major behavior challenges.
- **ARM Service Level 3:** Care, supervision and ongoing training for persons with significant deficits in self-help skills, and/or some limitations in physical coordination and mobility, and/or disruptive or self-injurious behavior.
- **ARM Service Level 4 A-I:** Care, supervision and training for persons with deficits in self-help skills, and/or severe impairments in physical coordination and mobility, and/or severely disruptive or self-injurious behavior. Service Level 4 is subdivided into Levels 4A through 4I in which staffing levels are increased to correspond to the individual needs.

**Specialized Residential Facilities:** Provide care, supervision and training for persons with deficits in self-help skills and/or severe impairments in physical coordination and mobility, and/or severely disruptive or self-injurious behavior whose needs cannot be appropriately met within the array of

other community living options available as determined by the planning team. Rates are negotiated between the regional center and vendor and cannot exceed the median rate for regional center or the state, whichever is lower.

**Adult Residential Facilities for Persons with Special Health Care Needs (ARFPSHN):** Adult residential facility that provides 24-hour health care and intensive support services in a homelike setting licensed by Community Care Licensing, certified by DDS, and vendored by Regional Centers associated with the closure of any developmental center statewide. (Also known as 962/853 homes.)

**Delayed Egress/Secured Perimeter Homes:** Limited authority now exists for residential facilities to be equipped with both delayed egress devices and secured perimeter fences. These safety features are carefully designed for individuals who, due to difficult-to-manage behaviors or a lack of hazard awareness and impulse control, would pose a risk of harm to themselves or others. The addition of a secured perimeter ensures that individuals are supervised when they wish to go outside the property limits. The statutory authority and program standards identify a number of safeguards and protections for utilizing secured perimeters.

These homes have a delayed exit door, or doors, of the time delay type, which will automatically open after a programmed amount of time, not to exceed 30 seconds. Additionally, the facility has a perimeter fence (typically non-scalable) which is locked. There must be sufficient space within the fenced perimeter to provide for a safe gathering place at a minimum of 50 feet from the building in case of fire. The delayed egress is automatically disabled in the case of fire. The house must have a fire sprinkler system. The secured perimeter program for the home must be certified by DDS before it can be licensed by DSS, and is limited to a combined total of 150 beds. A minimum of 50 beds shall be available for programs designed for individuals who are designated incompetent to stand trial pursuant to 1370.1 of the Penal Code. Homes with delayed egress devices need not have secured perimeters; however, secured perimeter homes must also utilize delayed egress devices.

**Enhanced Behavioral Supports Homes:** A pilot project certified by DDS and licensed by DSS. These homes provide non-medical care for individuals who require enhanced behavioral supports, staffing and supervision in a homelike setting. They also have enhanced monitoring by regional center case managers, regional center behavior professionals, and DDS. Additional enhancements include more staffing and staff training. Regulations for the Enhanced Behavioral Supports Homes were released for public comment in January 2016.

**Community Crisis Homes (CCH):** A facility certified by DDS and licensed by DSS as an adult residential facility, providing 24-hour non-medical care to individuals in need of crisis intervention services, who would otherwise be at risk of admission to the acute crisis center at Fairview or Sonoma Developmental Center, an out-of-state placement, a general acute hospital, an acute psychiatric hospital, or an institution for mental disease. A CCH shall have a maximum capacity of eight consumers; however, based on stakeholder input, regional centers are developing homes with a maximum capacity of four. Regulations are under development.

## **DEPARTMENT OF PUBLIC HEALTH - LICENSED OPTIONS**

**Health Facilities:** These facilities are licensed by the Licensing and Certification Division of the California Department of Public Health to provide 24 hours per day services. These facilities are typically funded through Medi-Cal and serve consumers of varying ages.

**Intermediate Care Facility – Developmentally Disabled (ICF-DD):** An ICF-DD is a 24-hour health care facility that serves 15 or more people and provides personal care, habilitation, developmental and supportive health services to consumers whose primary need is for developmental services and who have a recurring, but intermittent, need for skilled nursing services. ICF-DD facilities are generally larger facilities staffed 24 hours a day by a registered nurse or licensed vocational nurse, who must be on residence eight hours a day with on-call nursing after the eight hour on-site requirement has been met. Living units at the state developmental centers are licensed as ICF-DD facilities or Nursing Facilities.

**Intermediate Care Facility – Developmentally Disabled/Habilitative (ICF-DD/H):** An ICF-DD/H provides 24-hour personal care, developmental services, and nursing supervision. They may serve up to 15 people but typically serve no more than 6 consumers with developmental disabilities. These homes may serve individuals who have intermittent, recurring needs for nursing services, but have been certified by a physician and surgeon as not requiring availability of continuous skilled nursing care.

**Intermediate Care Facility – Developmentally Disabled/Nursing (ICF-DD/N):** An ICF-DD/N provides 24-hour personal care, developmental services, and nursing supervision for consumers who have intermittent recurring needs for skilled nursing care but have been certified by a physician and surgeon as not requiring continuous skilled nursing care. These consumers may have chronic, non-acute medical conditions that require more regular nursing and monitoring (tube feedings, suctioning, etc.) than an ICF-DD/H. This type of facility may have 15 or fewer beds and must provide a minimum of 1.5 hours per day direct service (RN) nursing staff for each resident, in addition to the consultant hours which are defined by consumer need.

**Intermediate Care Facility – Developmentally Disabled/Continuous Nursing (ICF-DD/CN):** The ICF-DD/CN program provides continuous nursing care to medically fragile beneficiaries in a small community-based residential setting, avoiding more restrictive care in hospitals, sub-acute facilities and developmental centers. Currently about 44 consumers reside in 7 homes located in Santa Rosa, San Bruno, Fresno, Northridge, Gardena, Desert Hot Springs, and San Jose. This is a limited option with room for growth.

**Nursing Facility (NF):** An NF provides continuous skilled nursing and supportive care to consumers whose primary need is for skilled nursing care on an extended basis. It provides 24-hour in-patient care and minimally would include a physician; skilled nursing, dietary, and pharmaceutical services; and an activity program.

## **OTHER COMMUNITY LIVING OPTIONS**

**Parent/Family Member's Home:** Some consumers may live with parents or relatives. Regional centers generally provide additional supports for the family which include, but are not limited to: Day Services; In-Home or Out-of-Home Respite Services; Consultant Services; Behavior Intervention; Transportation; and/or, Independent Living Training. Various generic services, such as In-Home Support Services may also be available to the consumer.

**Independent Living Skills (ILS):** Regional centers provide ILS services to an adult consumer, consistent with his or her IPP, that provide the consumer with functional skills training that enables him or her to acquire or maintain skills to live independently in his or her own home, or to achieve greater independence while living in the home of a parent, family member, or other person. ILS are provided in non-licensed living arrangements. Individuals most often live alone or with roommates in their own homes or apartments. Independent living programs, which are vendored and monitored by regional centers, provide or coordinate support services for individuals in independent living settings. They focus on functional skills training for adults who generally have acquired basic self-help skills or who, because of their physical disabilities, do not possess basic self-help skills, but who employ and supervise aides to assist them in meeting their personal needs. ILS training may include money management, shopping, meal preparation, health/medical, laundry, advocacy, psycho-social support, etc. Living expenses are paid from Supplemental Security Income or other benefits/income. Consumers may also receive rental assistance through HUD's Section 8 Housing Program.

**Supported Living Services (SLS):** SLS consist of a broad range of services to adults with developmental disabilities who, through the IPP process, choose to live in homes they themselves own, rent or lease in the community. SLS may include assistance with: selecting and moving into a home; choosing personal attendants and housemates; acquiring household furnishings; common daily living activities and emergencies; becoming a participating member in community life; and, managing personal financial affairs, as well as other supports. These services help individuals exercise meaningful choice and control in relationships, full membership in the community, and work toward their long-range personal goals. Because these may be life-long concerns, SLS are offered for as long and as often as needed, with the flexibility required to meet a person's changing needs over time, and without regard solely to the level of disability. Typically, a SLS agency works with the individual to establish and maintain a safe, stable, and independent life in his or her own home, but it is also possible for some individuals to supervise their services themselves. Support services are funded by the regional center and/or In-Home Support Services. Living expenses are paid by the consumer through Supplemental Security Income or other benefits/income. Consumers utilizing SLS are also eligible for HUD's Section 8 Housing Program and must be 18 years or older to participate in this living arrangement.

**Family Home Agency (FHA):** An FHA is an agency that approves Adult Family Homes and Family Teaching Homes for individuals with developmental disabilities. An Adult Family Home may serve two individuals in the same home; a Family Teaching Home may serve up to three individuals. These individuals reside with a family and share in the interaction and responsibilities of being part of a family. The individual with developmental disabilities receives the necessary services and supports from the family, agencies, and the community to enable him/her to be a participating member of the family and the community where the family resides. The FHA arrangement allows the sharing of food, shelter, experience, and responsibilities. The FHA is a

private organization under contract to, and vendored by, a regional center. FHAs are responsible for recruiting, training, approving, and monitoring Adult Family Homes and Family Teaching Homes, as well as providing ongoing support to the homes. Social service staff employed by the FHA makes regular visits to the Adult Family Home and Family Teaching Home to ensure that necessary services and supports are in place and that the match between the family and the new family member is viable and continues to be viable. FHA and Adult Family Home/Family Teaching Home services and supports are among the newer options which enable adults with developmental disabilities to enter into partnerships with families that promote self-determination and interdependence. Along with the regional centers, the Department of Developmental Services (DDS) has monitoring responsibility for these homes.

**Self-Determination Program:** The Department of Developmental Services is developing a new program, called the Self-Determination Program, that will let participants have more control over selecting their services and supports. One of the ways this can be done is by giving participants (or their parents or legal representatives) a specific budget to purchase the services and supports that they need to make their person centered plan work better for them. Participants may choose their services and pick which providers deliver those services. Participants are responsible for staying within their annual budget.

The Self-Determination Program is based on beliefs that people --

- Plan their own lives and make their own decisions
- Determine how funding is spent for their services and supports
- Plan and choose their own formal and informal supports
- Take responsibility for the decisions made
- Validate those decisions through maintaining ongoing control