

## Provision of Community Supports Services

This Appendix defines general expectations applicable to the provision of Community Support Services to eligible appropriate individuals funded by the Department for Aging and Rehabilitative Services (DARS).

### I. Service Description

- A. Community Support Services (CSS) involves the provision of intensive one-to-one services that assist individuals with disabilities to live and participate as independently and effectively as possible in their home, work, and community settings of choice. Services include comprehensive Community Support Services Assessment, individualized CSS Plan, and one-to-one community based ESO coaching and behavioral skills training supports. Services are designed, and delivered on a short-term basis, with frequency and intensity of services fading as skills are developed.
- B. Community Support Services provided to Vocational Rehabilitation customers should be provided ideally in the environment in which the skills and abilities will be used, i.e., home and community settings. Community Support Services provided through Vocational Rehabilitation typically focuses on the development and implementation of strategies to function effectively despite impairments.
- C. Services may include education, life skills training, assessment and instruction related to the use of assistive technology, and development and implementation of strategies and techniques that allow an individual to live and participate successfully in community settings. Areas to be addressed by the provision of Community Support Services may include household and financial management, personal care/hygiene, coping and social skills, using transportation, and other similar skills and tasks.
- D. Services should include an initial comprehensive **assessment** and development of an individualized **plan of services** (*Section VI*) that includes a description of methods, strategies, and approaches to be used. Agency-funded Community Support Services are intended to be provided on a short-term basis, with frequency and intensity of services decreasing gradually as the Community Support Services provider fades his/her presence and the individual becomes more independent in carrying out the specific tasks or activities (similar to the provision of job coaching services).

### II. Scope of Services

- A. **Expectations and Responsibilities** of CSS Vendors for coordinating, service delivery, reporting and billing are summarized below
  - a. Conduct a comprehensive CSS Assessment to identify current functional levels and support needs.
  - b. Draft a CSS Plan that includes a description of specific interventions, desired outcomes, and strategy for skill retention
  - c. Participate in a team meeting to review assessment findings and finalize the plan
  - d. Provide intensive one-to-one services outlined in the plan

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- e. Communicate routinely with VRC to identify barriers to achieving goals, problem-solve, amend the CSS Plan, and arrange/participate in team meetings
- f. Send written documentation to include CSS Assessment and Plan, RFAs, and monthly reports in a timely manner

#### III. Provision of Services

- A. Areas to be addressed by the provision of CSS should be related **to serious functional limitations such as: communication, interpersonal skills, mobility, self-care, self-direction, work skills, and work tolerance**
- B. The **CSS Plan** should focus on supporting on-going success and sustainability.
- C. CSS may include education, as well as the development and implementation of strategies and techniques that allow the consumer to live, work, and participate successfully in community settings
- D. Services should include an initial comprehensive **Community Support Assessment** and development of an individualized **CSS Plan** (*Section 3*) that includes a description of methods, strategies, and approaches to be used. CSS are intended to be provided on a short-term basis, with frequency and intensity of services decreasing gradually as the CSS provider fades his/her presence and the consumer becomes more independent in carrying out the specific tasks or activities.

#### IV. Community Support Assessment / Service Plan

- A. Assessment is implemented using a person centered comprehensive ecological approach that includes:
  - a. Use a comprehensive community approach relevant to the individual's environments and needs
  - b. Considers information from multiple sources and validity/importance of each
  - c. Utilizing and gathering data from various sources (assessment data, observations, interviews)
  - d. Interviews with parents and/or stakeholders to gather information about functional, daily adaptive behavior.
  - e. As relevant use of adaptive behavior scales and or other formal assessments related to specific skills (social skills, maladaptive behaviors, etc.) and or disability groups (ex. Autism, ID/DD, brain injury, etc.)
  - f. Direct, performance-based observation and or assessment of adaptive skills (direct tasks requiring self-care, money management, etc.
- B. The **CSS Plan** should include the following:
  - a. Identification of needs, desired outcomes, and interventions related to each functional limitation:
  - b. the staff responsible for the provision of CSS (i.e., the ESO Provider);
  - c. the method(s) of instruction/intervention used in the provision of specific skills training;
  - d. final outcomes based on interventions, strategies, and summary of skills at the conclusion of services; and
  - e. specific techniques for skill retention after initial CSS intervention.

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- C. A copy of the final report should be shared with the participant and relevant team members, particularly when specific steps for skill retention have been identified.

### V. **Quality Characteristics.**

- A. CSS services should be subject to DRS informed choice policy and provided using a collaborative support team approach in age-appropriate, integrated community settings including.
  - a. A team approach that facilitates Integrate and continuity of services provided by case managers, residential providers, counselors, behavioral support providers, and other nonpaid supports as relevant to achieving goals outline in the IPE
  - b. the provision of supports and services in community-based settings that are age-appropriate, and which include a diversity of people in naturally occurring proportions, including people with and without identified disabilities.
  - c. Allow for the maximum participation of the participant.
- B. Services should be person-centered, client directed, natural, non-intrusive, non-stigmatizing, and non-punitive.

### IV. **Staffing Requirements**

- A. **Direct Services Provider.** All Community Support Services provided to DARS customers must be provided by a qualified individual who meets the following minimum requirements: an undergraduate degree or state licensure or certification or registration in a related clinical field such as rehabilitation counseling, special education, psychology, occupational therapy, speech language pathology, or other relevant rehabilitation or human services fields; and a minimum of two years of documented training and experience working directly with individuals with disabilities, which ideally should include training and experience in the provision of the services referred to in this document as “Community Support Services.” Relevant training and/or years of experience may be considered as partial fulfillment of these requirements on a case-by-case basis. It is recommended that vendors provide ongoing training to their Community Support Services staff on a quarterly, or at least annual, basis through attendance at workshops, conferences, in-service staff training, or on-site consultations.

### VI. **Reports and Billing**

- A. ESO are responsible for submitting written documentation to include CSS Assessment and Plan, RFAs, and monthly reports in a timely manner.
- B. Providers should be familiar with and follow the protocols below for RFAs, Service codes, required documentation and service coordination with the authorizing VRC
- C. **Authorization of Referral.** The VR Counselor may initially authorize two (2) hours for the service provider to have an initial meeting with the client, complete necessary paperwork, and discuss roles, expectations, and how services will be provided. Referral services should be authorized and billed under **DRS Service Item Code: A1205Ref - Community Support Services - Initial Consult and Referral - For services provided through and Employment Service Organization (ESO).**

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- D. **Authorization of Assessment / Plan.** The VR Counselor initially authorizes up to ten (10) hours for the service provider to conduct a comprehensive Community Support Assessment and to prepare a written CSS Plan. The initial authorization for assessment and development of a written plan is considered a direct service and is authorized and billed under **DRS Service Item Code: A1205Plan - Community Support Services - Assessment and Plan Development - For services provided through and Employment Service Organization (ESO)**. Requests for more than ten (10) hours should be approved by the supervisor and documented with an ASN.
- E. **Authorization of Services.** Once the VR Counselor, the provider, and the consumer have approved the CSS Plan, additional CSS hours can be authorized based on the plan. Implementation of planned services is considered a direct service and is authorized and billed under **DRS Service Item Code: A1205Svc - Community Support Services - Service Implementation - For services provided through and Employment Service Organization (ESO)**. While CSS are individualized to each consumer's needs, duration of services generally should not exceed six (6) months. Service providers who propose a plan exceeding this timeframe, or who request an authorization for additional hours after the end of a six (6) month period, should include written justification for the continued need for service provision. Requests for more than six (6) months of service should be approved by the supervisor and documented with an ASN.