ADEO Statement of Work

1. Purpose

Services provided to DHS-referred Consumers, hereinafter referred to as "Consumers", are those covered in the In-Home Services Program (OAR Chapter 411, Division 030 rules), may include specific services required because of physical, limitations in meeting self-care needs. To assist Consumers toward more independent living, Contractor shall provide in-home support services for Consumers living in Contractor's apartment settings. Services shall be provided through the Specialized Living Program (SLP). These Specialized Living Services must be a coordinated effort toward meeting the Consumer1s person-centered service plan.

2. Contractor shall provide services at:

1220 SW 12th Street, Portland, OR 97201 5835 NE 122nd Street, Portland, OR 97230

3. Eligibility Criteria

Eligibility Criteria for the Specialized Living Program (SLP). Specialized Living Services are described in this section in conjunction with Title XIX OSIP Home and Community Based Waivered Services as described in OAR 411-030.

- a. Contractor shall provide Specialized Living Services provided only for those individuals, herein after referred to as "Consumers" for whom the service is appropriate and are:
- 1) Current recipients of Title XIX OSIP Home and Community Based Waivered Services;
- 2) Consumers who are severely disabled, spinal cord injured, brain injured or quadriplegic from accident; illness, or disease resulting in the inability to perform activities of daily living (ADL's) without the assistance of an attendant are eligible to receive services at the 1220 SW 12th St Portland location;
- 3) Consumers who require assistance with activity of daily living are eligible to receive services at 5835 NE 122nd Portland location:
- 4) Consumers who are at risk of institutionalization because of physical condition; and
- 5) Consumers who are unable to manage day to day activities alone without concern for safety for selves or others.
- b. DHS will have no financial responsibility for Consumers placed in the specialized living program until a service plan has been developed, eligibility has been

determined, and the placement and payment have been authorized. The DHS, Multnomah County Aging and Disabilities Services, hereinafter referred to as (MCADS) and MCADS case manager, hereinafter referred to as the Liaison Case Manager, shall evaluate the Consumers prior to moving into the apartment location and establish a service plan prior to admission.

c. Emergency Placement will be provided in situations if an emergency placement occurs after 5:00 PM or on a weekend or holiday, and meets all other criteria listed above, except eligibility for payment and approval of the service plan. Contractor will submit a request for eligibility determination and appropriate service plan on the first working day following the emergency payment. Upon approval, the service payment will become effective on the date of placement or effective date of eligibility as long as a current, signed Contract has been approved.

4. Admission Criteria

Contractor shall follow Consumer admission requirements are described in this section.

- a. Referral for admission of a Consumer for placement may be made when:
- 1) The Consumer meets requirements of eligibility and admission criteria outlined above;
- 2) Medical, social and rehabilitation planning can be carried out through this placement;
- 3) The Consumer must be stabilized in their physical and emotional adjustment to disability, e.g., they must not be in the initial stages of medical and/or psychiatric treatment following trauma;
- 4) The Consumer must be able to direct attendants in his/her own care;
- 5) The Consumer must be determined appropriate by a service assessment conducted by the local DHS/MCADS office; and
- 6) Referral is made by the DHS/MCADS designated case manager who will have liaison responsibility with the program.
- b. Contractor shall determine whether a Consumers meets Contractor's admission requirements and is accepted into the program. If placement of an eligible DHS Consumers is to occur; a conference will be arranged with DHS/MCADS and Contractor. Participants may include the Liaison Case Manager, the Consumer and Consumer's designated representative, and Contractor. The purpose of the conference is to:
- 1) Establish Contractor's roles and responsibilities regarding the Consumer;

- 2) Agreement upon the Consumers 's roles and responsibilities including the responsibility to apply financial resources towards the cost of care;
- 3) Establish the Liaison Case Manager's roles and responsibilities;
- 4) Discuss the services delivery model;
- 5) Develop initial person-centered goals and objectives for the Consumer. This Person-centered service plan, which is driven by the Consumer, will be formalized in writing by the Specialized Living Service Program with copies provided to the attending members;
- 6) Identify community services which may be important within the personcentered services plan such as medical, vocational, educational, and social services;
- 7) Identify Consumer's ability to perform ADL and self-management tasks, ability to address health and safety concerns, and ability to direct Contractor's staff in meeting the Consumer's care needs;
- 8) Confirm planning to meet the individual care needs of the Consumer;
- 9) Discuss the formal complaint process.
- c. Long Term Care Community Nursing Services, as defined in OAR Chapter 411, Division 48 rules and OAR 411-030-0050, may be authorized by the Liaison Case Manager and may become part of the Medicaid service plan.
- d. Contractor and Liaison Case Manager will annually review the person-centered service plan at the Consumer's place of residence as well as a review of any incident reports, APS complaint reports, potential referrals and Consumer-specific placement issues.

5. Staffing Requirements:

Contractor shall meet staffing requirements as described in this section.

- a. Ensure employees have completed and submitted a Criminal History Release Authorization form (DHS 0301AD) to the Referring Agency. All employees and volunteers must comply with the criminal history check rules in OAR 407-007-200 through 407-007-0380. Contractor shall conduct criminal history rechecks at least every other year from the date of employment.
- b. Ensure in-home services provided are rendered by qualified and trained employees under the supervision of Contractor's director or designee. Contractor shall provide in-home services as requested by the Consumer in accordance with this Contract, the Liaison Case Manager's Medicaid service plan and the personcentered service plan.

- c. Ensure that there are a sufficient number of qualified and trained employees to meet the needs of Consumers receiving services
- d. Ensure that Contractor's employees are at least 18 years of age and have sufficient communication and language skills to enable them to perform their duties and interact effectively with Consumers who are receiving in-home services and other Contractor staff.
- e. Ensure that Contractor's employees have completed a specialized living program specific orientation, conducted by the program administrator or designee, before independently providing in-home services to Consumers. This orientation must include, but is not limited to, the following subject areas:
- 1) duties and responsibilities;
- 2) Consumer's rights;
- 3) professional conduct, appropriate boundaries between Contractor's employees and Consumers, and confidentiality of Consumer information;
- 4) description of the in-home services provided by Contractor's specialized living program;
- 5) appropriate subject matter based on the needs of the special populations served by Contractor, including understanding, providing for, and meeting Consumer in-home service needs;
- 6) assisting Consumers to be successful within the framework of the personcentered service plan.

6. Home Care Services to be Provided by the Contractor

Home Care services shall be provided as described in this section.

- a. Develop and monitor a plan of which is agreed upon by Consumer, case manager, and other involved parties;
- b. Provide home care services based on each Consumer's individual service plan. Home care services include:
- 1) Assistance with bladder and/or bowel requirements, including set up for persons trained to catheterize themselves;
- 2) Assistance with prescribed medications ordered by the Consumer's physician, including injections;
- 3) Assistance with assistive devices and equipment;
- 4) Assistance with developing improvement of behavioral problems, cognitive deficiencies, and other disorders, including supervision, as needed;
- 5) Assistance with food, nutrition and diet, including preparation of meals; feeding and kitchen clean up, meal planning and grocery shopping;

- 6) Assistance with non-skilled activities related to occupational, physical, and speech therapy;
- 7) Assistance with transfer, turning and positioning by trained staff;
- 8) Assistance with personal hygiene, oral hygiene, hair care and nail care;
- 9) Assistance with range of motion exercises;
- 10) Assistance with palliative skin care and simple dressing changes;
- 11) Assistance with bathing based on Consumer choice of time and frequency;
- 12) Assistance with housekeeping tasks including laundry;
- 13) Intake assessment and service coordination;
- 14) Social and emotional support; and
- 15) Other necessary assistance, re-training and support with ADL's.
- c. Comply with regulations required by other agencies.
- d. Contractor shall provide staff, facilities, and equipment sufficient to perform the services agreed upon by DHS.

7. Termination of Service

Service termination requirements are described in this section.

- a. Contractor shall discuss termination procedures with the Liaison Case Manager, program staff, Consumer and care attendants. The goal of the discussion is to seek consultation from all parties determining planning to maintain placement or if service is no longer desired by the Consumer. If the contractor cannot meet the needs of the Consumer, or the Consumer wishes to end the services, alternative resources will be discussed. A Consumer will be terminated from the Special living program when:
- 1) Consumer's condition changes to the degree that service/medical needs can no longer be met;
- 2) Consumer does not contribute their share of costs;
- 3) Consumer request to leave the program;
- 4) Contractor is not providing agreed upon services;
- 5) Consumer has observable behavior which is deemed to be detrimental to self or other Consumers and is beyond the staff's ability to be safely managed; or
- 6) Consumer, after due notice and repeated efforts by staff, fails to consistently comply with house rules.
- b. Contractor shall ensure the written termination notices confirming the date of termination are reviewed and approved by the Medicaid service plan team with a copy of the notice sent to the Consumer and to the Liaison Case Manager. The date of termination, reason for termination, and recommendations for alternative

community resources must be included in the notice. Consumer's temporary absence, including periods of hospitalization or visits, are not considered termination if the intent is for Consumer to return to the specialized living services from this Contractor. Absence longer than seven days must be prior approved by the Liaison Case Manager.

c. Written notice indicating the specialized living services is no longer appropriate will be sent by the Contractor to the Consumer with a copy to the Liaison Case Manager. The date of termination, reason for termination, and recommendations for alternative community resources will be included in the notice. Temporary absence, including periods of hospitalization or visits, are not considered termination if the intent is to return to the facility. Absence longer than seven days must be prior approved by the case manager.

8. Contract Administration and Reporting

- a. Notify the Liaison Case Manager of pending discharge from the SLP or move from one SLP property to another and anticipated date of discharge or move b. Provide name(s) and phone numbers of Contractor's administrative staff to local DHS/MCAD. S office;
- c. Provide space and opportunity for the case manager to meet with Consumers in privacy;
- d. Support and supplement one another's efforts in planning and providing services to meet the needs of the Consumers;
- e. Schedule conferences as necessary with other health and social service agencies to evaluate mutual services for a Consumer and make any modifications to the Consumer's plan; and
- f. Work together as a team with the Consumer being served, the facility staff, other resource persons, and other persons who have a significant relationship to the Consumer. Evaluate the service objectives and modify them as increased understanding of the Consumer is gained.

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