Department of Health Services Division of Long Term Care F-XXXX (04/2012) STATE OF WISCONSIN Bureau of Long-Term Support Children's Services Section Page 1 of 2

# Children's Long-Term Support (CLTS) Waivers Qualified Provider Standards Verification Provider Service: Supportive Home Care

The information collected via this form is required to ensure the qualifications of unregulated providers and should be updated annually. While the completion of this form is voluntary, county waiver agencies must verify and document all of the information regarding provider standards that is collected on this form. In lieu of this form, agencies may use locally designed forms with prior approval from the Children's Services Section.

A. PROVIDER / EMPLOYEE INFORMATION							
Provider	/Employee Name Last	8	First		Middle Initial		
Ctrost ^	ddrogg	City		State	Zip Code		
Street A	uuicss	- City					
B. SE	RVICE DESCRIPTION						
living no person and accessivice an OT reason exercise perform cleaning those s	tive Home Care (SHC) is the provision of eeds, ensure adequate functioning in the al services such as activities of daily livin companying the participant to community s" means activities by the SHC worker thor PT. These include assistance with exes, having the SHC worker read the theraje plan or hands-on assistance with equipnance of household tasks and home maing. County agencies shall ensure that backupportive home care services not reimbursed using waiver funds.	ir home and permit sating, assistance in the use activities. It may also net assist the participarercise routines, range opist's directions, helpinoment/devices used in the nance activities, suckup arrangements for	fe access to the comre of adaptive equipment of the an extension of the at with follow through of motion exercises, so the participant remetthe therapy routine. He has meal preparation when a care provider	nunity. Supportive ent, mobility and cerapy services. "Eon a treatment platanding by during ember and follow thousehold servicen, shopping, laund is not available a	chome care includes communication aids extension of therapy an developed by either therapies for safety the steps of the s may include the dry and house re in place. Only		
C. OI	JALIFIED PROVIDER STANDARDS						
Providers of supportive home care services must meet the following minimum training and qualified provider standards in order to be authorized to deliver services and receive Medicaid waiver funding. By checking off each box below and signing at the bottom, employing entities (i.e., agencies or families) acknowledge the requirements of this service and have verified that the employee named above has met these standards.							
The employee named above meets the following CLTS Waiver qualified provider service standards:							
☐ a.	Is not listed on the Wisconsin Caregiver Misconduct Registry; does not have a substantiated finding of abuse, neglect or misappropriation, and has not committed a crime that is substantially related to the provision of care or supervision of this service.						
□ b.	. Is trained to safely delivering services, so as not to endanger the participant.						
☐ c.	Is trained to recognize and appropriate respond in the event of an emergency, including a protocol for contacting local emergency response systems and the prompt notification of the county waiver agency.						
d.	Is trained on participant-specific information, including individual needs, functional capacities, strengths, abilities and preferences. Understanding and respecting participant preferences in the provision of assistance with activities of daily living including such services as bathing, feeding, grooming, dressing, transfer, ambulation and the use of adaptive aids and equipment (Include these training details in Section E below).						
☐ e.	to serve ( DD PD SED/MH).						
☐ f.	Is trained in: working effectively with participants; developing professional ethics and interpersonal skills; understanding an respecting participant direction, individuality, independence, and rights; understanding procedures for handling conflict an complaints; respecting personal property, cultural differences and family relationships.				mandling conflict and		
☐ g.	and meal planning and preparation; und participant preferences in housekeeping	providing quality homemaking and household services, including understanding good nutrition, special diets inning and preparation; understanding and maintaining a clean, safe and healthy home environment; respecting references in housekeeping, -shopping and homemaking tasks.					
☐ h.	Is trained on the county waiver agency and contract agency policies, procedures and expectations for providers including confidentiality of participant information according to federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules. Training must address billing and payment processes, record keeping, incident reporting and other reporting requirements, arranging of back up services and must include the name and telephone number of both the waiver agency care manager/support and service coordinator and the primary contact person at the agency.						

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Prior to employment, the services training require	ements (Section C, e, f,	or contract agency may	exempt a prospecti it is determined tha	ve service provider from the personal at the provider already has sufficient					
a. The rationale for exempting a prospective provider from the personal services training requirements (Section C, e, f, and g above) must be described in writing. A copy of the exemption and the written rationale shall be maintained in the participant record or in another central location, as determined by the county waiver agency.									
□ b. When the participant/guardian functions as the employer s/he may exercise the authority to exempt providers from training requirements for reasons described above. However, the county waiver agency must document and maintain the written rationale for the exemption.									
E. PROVIDER / EMP	PLOYEE TRAINING AN	D EXPERIENCE							
List below the participa	ant-specific training and e included on a separat	or experience and date co	empleted by employ	yee named above (additional training					
Training	Date		rience	Date					
Trailing	Date	Expe	Honos						
F. COMPARABILIT	Y TRAINING STANDAR	RDS	10	Iin a posietant a licensed					
practical nurse, or a re training comparability	egistered nurse automat standard do not need a shall ensure that copies	ically meets the training co written rationale for the ex	omparability standa emption from train n or other docume	d nursing assistant, a licensed ards. Providers who have met the ing requirements. However, the ntation establishing that the ndividual is a:					
personal care wor	personal care worker home health aide certified nursing assistant								
☐ licensed practical nurse ☐ registered nurse									
G. SIGNATURES									
By signing below I att	est my qualifications for	this service meet all CLTS	Waivers standard	Is at this time.					
Signature of Employee	,	Date							
By signing below, I at	test the above named p	erson meets all necessary	provider standard	s for this service at this time.					
Signature of Employing	Entity Representative	Title Guard	lan	Date					

Medicaid Home and Community-Based Services (HCBS) Waiver Manual for the CLTS Waiver Program (10/2022): <a href="https://www.dhs.wisconsin.gov/publications/p02256.pdf">https://www.dhs.wisconsin.gov/publications/p02256.pdf</a>

# 4.6.24 Personal Supports

## 4.6.24.1 Definition

Personal supports directly and indirectly assist the participant with daily living activities and personal needs, to promote improved functioning and safety in their home and community.

Personal supports may be provided in the participant's home or in a community setting.

Personal Supports is related to assistance with functional skills and may help a child who has difficulties with these types of skills accomplish tasks including but not limited to:

- Appropriate social behaviors (such as checking out library books, ordering food from a menu, and paying for tickets to events)
- Communication skills (such as assistance with communication)
- Medication and health management (such as appropriate self-administration of medications)
- Mobility (such as arranging and using transportation)
- Money management (such as bill paying and other aspects of money management)

Personal supports includes supervision necessary to increase the participant's independence while ensuring safety at home and in the community, including supervision as the participant engages in other activities. Supervision may include a provider assisting the child or youth to utilize technology.

This service may include working with the child or youth to better understand and comprehend cause and effect and the correlation between behaviors and consequences. It may also take the form of repetitive directions and staying on task. It must account for levels of receptive language capabilities, with the goal of retaining information.

Personal supports covers services that consist of the performance of basic and intermittent household tasks within the participant's primary residence. Household tasks may be performed seasonally or in response to a natural or other periodic event for reasons of health and safety or the need to assure the participant's continued community living. This assistance must be due to the participant's disability that results in additional household tasks and increases the parent and/or caregiver's ability to provide care needed by the participant.

Personal supports includes pest control services to enhance safety, sanitation, and cleanliness of the participant's home or residence. Pest control services are designed to prevent, suppress, or eradicate anything that competes with humans for food and water, injures humans, spreads disease to humans and/or disturbs humans and is causing or is expected to cause more harm than is reasonable to accept. Pest control services must be related to the participant's disability and support the participant to remain in their home and community.

Personal supports may be delivered by remote services (refer to Chapter 4.3.2 Remote Services), as applicable and agreed upon by the child or youth and their family. Refer to the CLTS Waiver Program Benefit Code Crosswalk (P-02283) for the specific components of personal supports that may be delivered remotely.

Payment for the provision of personal supports is subject to statewide uniform rates. Refer to the Children's Long-Term Support (CLTS) Waiver Program Service Rates webpage for additional information.

## 4.6.24.2 Service Requirements

Assistance with basic and intermittent household tasks must be due to the participant's disability that results in additional household tasks and increases the parent and/or caregiver's ability to provide care needed by the participant.

Pest control services must be related to the participant's disability and support the participant to remain in their home and community.

In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, must be pursued prior to authorizing household tasks and/or pest control services.

All providers of personal supports services are required to communicate with designated county staff and other providers about any events or situations that meet the definition of an incident in Chapter 9 — Health and Safety, and in accordance with Children's Incident Reporting for Providers (P-02613). Any communication must follow federal confidentiality laws. Refer to Chapter 9 for additional information about incidents and incident reporting requirements.

### 4.6.24.3 Service Limitations

Personal supports are provided to address extraordinary care needs and does not include provision of supervision that would customarily be provided by the parent or guardian of a child without a disability. The assistance should increase the parent and/or caregiver's ability to provide care needed by the participant.

Personal supports are limited to those not already purchased in a licensed or certified substitute care setting.

Personal supports are limited to assistance with tasks the participant is unable to do without assistance and are not intended to teach skill acquisition. Refer to daily living skills training for services that may provide skill acquisition.

The scope of Personal Supports may include performing incidental personal care, including activities of daily living or instrumental activities of daily living. However, such activities may not comprise the entirety of the service.

The cost for transporting a participant during the provision of personal supports may be funded through transportation services in addition to the personal supports service rate. These transportation costs can be funded only as a mileage claim, and not as a per trip cost. (Refer to the transportation service description.)

The components of personal supports that may be delivered by remote services are limited to those outlined in the CLTS Waiver Program Benefit Code Crosswalk (P-02283).

This service may not duplicate any service that is provided under another waiver service category. The CLTS Waiver Program is the payer of last resort and is not a source of funding for any service that would otherwise be the responsibility of another public or private entity. The following programs and

services must be considered prior to using waiver funding and, where applicable, be incorporated into a comprehensive plan for participants:

- Public benefits, energy assistance, or other poverty-related services.
- Court-ordered, juvenile justice, or child protective services, including protective placement and guardianship or legal services.
- Any goods or services covered by a third party, including private insurance or Medicaid, such as:
  - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit (known in Wisconsin as HealthCheck Other Services), which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid or the Medicaid State Plan services.
  - Mental health services that are otherwise available.
- Educational or other services funded by the Department of Public Instruction or Individuals with Disabilities Education Act.
- Prevocational or other services offered through the Department of Workforce Development,
   Division of Vocational Rehabilitation.

# 4.6.24.4 Service Exclusions

This service excludes household maintenance that changes the physical structure of the home. Refer to home modifications for certain structural adaptations to the home that may be allowable.

This service excludes general home maintenance activities including painting, plumbing or electrical repairs, and exterior maintenance.

This service excludes personal care services covered by the Medicaid state plan.

#### 4.6.24.5 Provider Standards and Documentation

# General Provider Standards

Providers are subject to required licensing and credentialing verification, caregiver background checks, and hiring prohibitions described in Chapter 4. DHS collects and verifies required certification, license, education, experience, or other documentation during the provider registration process to initially qualify providers.

For more information related to CLTS Waiver Program service providers, refer to the *What is a CLTS Provider?* webpage.

### **Provider Types and Qualifications**

Supportive home care agency (agency provider)

Training begins prior to and during the first six months of employment. Training on critical procedures related to the participant's health and safety must be completed prior to the delivery of any services. Families share responsibility for oversight and monitoring the quality of care for the participant.

The CWA must ensure that persons providing personal support services receive training on at least the following subjects pertaining to the participant (s) served:

- Policies, procedures, and expectations of the contract agency, including training on participant and provider rights and responsibilities; record keeping and reporting; and other information deemed necessary and appropriate.
- Information specific to disabilities, abilities, needs, functional deficits, and strengths of the population to be served. This training should be person-specific for the participant to be served and generally focused.
- Recognizing and appropriately responding to all conditions that might adversely affect the
  participant's health and safety, including how to respond to emergencies and critical incidents
  as defined in Chapter 9.
- Developing interpersonal and communications skills that are appropriate and effective for
  working with the population to be served. These skills include understanding the principles of
  person-centered services; person rights; respect for age; cultural, linguistic, and ethnic
  differences; active listening, responding with emotional support and empathy; ethics in dealings
  with people, including family and other providers; conflict-resolution skills; ability to deal with
  death and dying; and other topics relevant to the specific population to be served.
- Understanding of all confidentiality and privacy laws and rules.
- Understanding of procedures for handling complaints.
- Understanding of the participant who needs support, including personal hygiene needs, preferences, and techniques for assisting with activities of daily living, including, where relevant, bathing, grooming, skin care, transfer, ambulation, exercise, feeding, dressing, and use of adaptive aids and equipment.
- Understanding the personal health and wellness-related needs of the participant needing supports, including nutrition, dietary needs, exercise needs, and weight monitoring and control.

Home health agency (agency provider)

Providers must be licensed under 42 C.F.R. § 484, Wis. Stat. § 50.49, and Wis. Admin. Code ch. DHS 131.

Commercial pesticide application provider (agency provider)

Providers must be licensed under Wis. Admin. Code § ATCP 29.20.

Other agency appropriately qualified as approved by the CWA and as related to the unique service being provided to the participant (agency provider)

Personal care worker (individual provider)

Providers must be certified under Wis. Admin. Code § DHS 105.17(3)(a).

Nurse aide (individual provider)

Providers must be certified under Wis. Stat. ch. 50 and Wis. Admin. Code ch. DHS 129.

Registered nurse (individual provider)

Providers must be licensed under Wis. Stat. § 441.06.

Licensed practical nurse (individual provider)

Providers must be licensed under Wis. Stat. § 441.10.

Licensed individual commercial pesticide applicator (individual provider)

Providers must be licensed under Wis. Admin. Code § ATCP 29.25.

Certified individual commercial pesticide applicator (individual provider) Providers must be licensed under Wis. Admin. Code § ATCP 29.26.

Other person appropriately qualified as approved by the county waiver agency (CWA) and as related to the unique service being provided to the child (individual provider)

For caregivers delivering personal supports services, see qualification description for supportive home.

For caregivers delivering personal supports services, see qualification description for supportive home care agency above. For individuals delivering personal supports services that are not caregivers, the CWA must approve the individual is qualified as related to the unique service they are delivering to the participant.

#### 4.6.24.6 Service Documentation

The CWA is required to maintain documentation to demonstrate this service does not supplant or duplicate supports or services that are otherwise available through one of the funding sources listed above. (Refer to Service Limitations.)