

Community Transition: T2038

The purpose of Community Transition is to provide initial set-up expenses for adults to facilitate their transition from a Developmental Center (institution), community ICF-IID Group Home, nursing facility or another licensed living arrangement (group home, foster home, Psychiatric Residential Treatment Facility, alternative family living arrangement), or a family home / one person AFL (Alternative Family Living) to a living arrangement where the individual is directly responsible for his or her own living expenses. This service may be provided only in a private home or apartment with a lease in the individual's/legal guardian's/representative's name or a home owned by the individual. In situations where an individual lives with a roommate, Community Transition cannot duplicate items that are currently available.

Covered transition services are:

- a. Security deposits that are required to obtain a lease on an apartment or home;
- b. Essential furnishings, such as furniture, window coverings, food preparation items, bed/bath linens;
- c. Moving expenses required to occupy and use a community domicile;
- d. Set-up fees or deposits for utility or service access, such as telephone, electricity, heating and water; and/or
- e. Service necessary for the beneficiary's health and safety such as pest eradication and one-time cleaning prior to occupancy.

Community Transition expenses are furnished only to the extent that the beneficiary is unable to meet such expense or when the support cannot be obtained from other sources. These services are available only during the three-month period that commences one month in advance of the beneficiary's move to an integrated living arrangement.

The Community Transition Checklist is completed to document the items requested under this definition. The Checklist is submitted to the PIHP by the agency that is providing the services.

Exclusions

Community Transition does not cover monthly rental or mortgage expense; regular utility charges; and/or household appliances or diversional/recreational items such as televisions, VCR players and components and DVD players and components. Service and maintenance contracts and extended warranties are not covered. Community Transition services can be accessed only one time from either the 1915b or 1915c waiver over the life of the waiver.

Limits on amount, frequency, or duration

The cost of Community Transition has a life of the waiver limit of \$5,000.00 per beneficiary. Community Transition includes the actual cost of services and does not cover provider overhead charges.

Service Delivery Method	<input checked="" type="checkbox"/> Provider Directed <input type="checkbox"/> Individual/Family Directed
Specify whether the service may be provided by (check all that apply):	<input type="checkbox"/> Legally Responsible Person <input type="checkbox"/> Relative <input type="checkbox"/> Legal Guardian

Provider Type

Specialized Vendor Suppliers

License
Certification
Other Standard
Meets applicable state and local regulations for type of service that the provider/supplier is providing as approved by PIHP
Provider Type
Agencies that provide Community Navigator Services
License
Certification
Other Standard
NC G.S. 122C, as applicable Credentialed as a provider in the PIHP provider network Meets applicable regulations for type of service that the provider/supplier is providing as approved by PIHP
Provider Type
Commercial/Retail Businesses
License
Applicable state/local business license
Certification
Other Standard
Meets applicable regulations for type of service that the provider/supplier is providing as approved by PIHP

**Crisis Services: Crisis Intervention & Stabilization Supports-H2011;
Crisis Consultation-T2025-U3; Out of Home Crisis-T2034**

Crisis Supports provide intervention and stabilization for individuals experiencing a crisis. Crisis Supports are for individuals who experience acute crises and who present a threat to the person's health and safety or the health and safety of others. These behaviors may result in the person losing his or her home, job, or access to activities and community involvement. Crisis Supports promote prevention of crises as well as assistance in stabilizing the individual when a behavioral crisis occurs. Crisis Supports are an immediate intervention available 24 hours per day, 7 days per week, to support the individual. Service authorization can be granted verbally or planned through the ISP to meet the needs of the individual. Following service authorization, any needed modifications to the ISP and individual budget will occur within five (5) working days of the date of verbal service authorization. The Comprehensive Crisis Plan must be updated as warranted in collaboration with the team within 14 days of a crisis, in an effort to ensure it meets the individual's needs and is reflective of anything learned from the crisis.

Crisis Intervention & Stabilization Supports

Staff trained in Crisis Services Competencies is available to provide "first response" crisis services to individuals they support, in the event of a crisis. These activities are :

- a. Assess the nature of the crisis to determine whether the situation can be stabilized in the current location or if a higher-level intervention is needed
- b. Determine and contact agencies needed to secure higher level intervention or out-of-home services
- c. Provide direction to staff present at the crisis or provide direct intervention to de-escalate behavior or protect others living with the individual during behavioral or medical episodes.
- d. Contact the care coordinator within 48 hours following the intervention to arrange for a treatment team meeting for the individual and/or provide direction to service providers who may be supporting the individual in day programming and community settings, such as direct intervention to de-escalate behavior or protect others during behavioral episodes. This may consist of enhanced staffing provided by a QP to provide one additional staff person in settings where the participant may be receiving other services.

Out-of-Home Crisis Supports

- a. a.Out-of-home crisis is a short-term service for an individual experiencing a crisis and requiring a period of structured support and/or programming. The service takes place in a licensed facility. Out of-home crisis may be used when an individual cannot be safely supported in the home, due to his/her behavior, and implementation of formal behavior interventions have failed to stabilize the behaviors, and all other approaches to ensure health and safety have failed. In addition, the service may be used as a planned respite stay for waiver participants who have heightened behavioral needs.
- b. Out-of-Home Crisis services are authorized in increments of up to 30 calendar days
- c. Crisis Consultation
- d. Crisis consultation is for individuals that have significant, intensive, or challenging behaviors that have resulted or have the potential to result in a crisis situation. Consultation is provided by staff that meets the minimum staffing requirements of a Qualified Professional, who have crisis experience. Non-licensed staff must meet the core competency requirements outlined in the Waiver and the activities performed by non-licensed staff must be overseen by licensed staff with experience serving individuals with IDD and behavioral health needs.

- e. Crisis consultation may be used to:
1. Facilitate up to monthly treatment team meetings with other members of the treatment team to:
 - A. Discuss clinical findings / situations and recent crises regarding the individual;
 - B. Evaluate and refinement of the Comprehensive Crisis Plan after a crisis in collaboration with the beneficiary’s team to include unplanned and preplanned crisis management approaches to address crises before, during and after the crisis;
 - C. Communicate any changes that should occur to the Comprehensive Crisis Plan with the Care Coordinator
 2. Train, educate, and provide ongoing technical assistance to the natural supports and direct support professional on crisis interventions and strategies to mitigate issues that resulted in the crisis, and on implementation of the crisis plan;
 3. Develop and implement strategies to aid the person in returning home after an out of home crisis stay or hospitalization; and
 4. Referral for medication evaluation if appropriate.

Exclusions

This service may not duplicate services provided under Specialized Consultation Services.

Limits on amount, frequency, or duration

Crisis Intervention & Stabilization Supports may be authorized for periods of up to 14 calendar day increments per event.

Out-of-Home Crisis services may be authorized in increments of up to 30 calendar days

Service Delivery Method

- Provider Directed**
 Individual/Family Directed

Specify whether the service may be provided by (check all that apply):

- Legally Responsible Person**
 Relative
 Legal Guardian

Provider Type

Provider Agencies (Primary Crisis Response Services) Approved as a provider in the PIHP provider network

License

Certification

Other Standard

Agency staff that work with beneficiaries:

- a. Are at least 18 years old
- b. Provided by a qualified professional in the field of developmental disabilities, who meets competencies established by the PIHP
- c. If providing transportation, have a valid North Carolina or other valid driver’s license, a safe driving record and an acceptable level of automobile liability insurance
- d. Criminal background check presents no health or safety risk to beneficiary
- e. Not listed in the North Carolina Health Care Abuse Registry

- f. Must be qualified in CPR, First Aid and NCI
- g. Must be qualified in the customized needs of the participant as described in the ISP

Professional Competency

By 11/1/2018, Support Professionals have competency in the following areas:

- a. Communication - The Support Professional builds trust and productive relationships with people he/she supports, co-workers and others through respectful and clear verbal and written communication.
- b. Person-Centered Practices-The Support Professional uses person-centered practices, assisting individuals to make choices and plan goals, and provides services to help individuals achieve their goals.
- c. Evaluation and Observation-The Support Professional closely monitors an individual's physical and emotional health, gathers information about the individual, and communicates observations to guide services.
- d. Crisis Prevention and Intervention-The Support Professional identifies risk and behaviors that can lead to a crisis, and uses effective strategies to prevent or intervene in the crisis in collaboration with others.
- e. Professionalism and Ethics-The Support Professional works in a professional and ethical manner, maintaining confidentiality and respecting individual and family rights.
- f. Health and Wellness-The Support Professional plays a vital role in helping individuals' to achieve and maintain good physical and emotional health essential to their well-being.
- g. Community Inclusion and Networking-The Support Professional helps individuals to be a part of the community through valued roles and relationships, and assists individuals with major transitions that occur in community life.
- h. Cultural Competency-The Support Professional respects cultural differences, and provides services and supports that fit with an individual's preferences.
- i. Education, Training and Self-Development-The Support Professional obtains and maintains necessary certifications and seeks opportunities to improve their skills and work practices through further education and training.

Upon enrollment with the PIHP, the organization must have achieved national accreditation with at least one of the designated accrediting agencies. The organization must be established as a legally constituted entity capable of meeting all of the requirements of the PIHP. This includes national accreditation within the prescribed timeframe

Staff providing Crisis Services, including first response activities, shall demonstrate strong clinical skills, professional qualifications, experience, and competency. Staff must meet all applicable competency requirements including crisis prevention, intervention and resolution techniques and trauma-informed care.

Crisis Services staff must have access to a board-eligible or board certified psychiatrist OR psychiatric nurse practitioner with a minimum of one year of experience serving individuals with IDD and mental health needs OR a physician assistant with a minimum of one year of experience serving individuals with IDD and mental health needs.

In addition, all Crisis Services staff must have access to a licensed practicing psychologist with a minimum of one year of experience in working with individuals with IDD.

Provider Type

Independent Practitioners or Provider Agencies (Crisis Behavioral Consultation)

License

Licensure specific to discipline as

Certification

Other Standards

Approved by the PIHP as an Independent Practitioner or as a provider in the PIHP provider network

Staff that work with beneficiaries:

- a. Are at least 18 years old
- b. Criminal background check presents no health and safety risk to beneficiary
- c. Not listed in the North Carolina Health Care Abuse Registry
- d. Staff holds NC license for psychologist or psychological associate
- e. Meets Crisis Services Competencies specified by NC Medicaid.
- f. Qualified in customized needs of the beneficiary as described in the ISP

Professional Competency

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- a. Communication- The Support Professional builds trust and productive relationships with people he/she supports, co-workers and others through respectful and clear verbal and written communication.
- b. Person-Centered Practices-The Support Professional uses person-centered practices, assisting individuals to make choices and plan goals, and provides services to help individuals achieve their goals.
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Upon enrollment with the PIHP, the organization must have achieved national accreditation with at least one of the designated accreditation agencies.

If a provider agency the organization must be established as a legally constituted entity, capable of meeting all the requirements of the PIHP

Staff providing Crisis Services, including first response activities, shall demonstrate strong clinical skills, professional qualifications, experience, and competency. Staff must meet all applicable competency requirements including crisis prevention, intervention and resolution techniques and trauma-informed care.

Crisis Services staff must have access to a board-eligible or board certified psychiatrist OR psychiatric nurse practitioner with a minimum of one year of experience serving individuals with IDD and mental health needs OR a physician assistant with a minimum of one year of experience serving individuals with IDD and mental health needs.

Provider Type

Provider Agencies who operate licensed facilities approved as a provider in the PIHP provider network

License

NC G.S, 122C

10 NCAC 27G.5100 or waiver licensure granted by licensing agency

Certification

Other Standards

Agency staff that work with beneficiaries:

- a. Are at least 18 years old
- b. If providing transportation, have a valid North Carolina or other valid driver's license, a safe driving record and an acceptable level of automobile liability insurance
- c. Criminal background checks present no health and safety risk to beneficiary
- d. Not listed in the North Carolina Health Care Abuse Registry
- e. Qualified in CPR and First Aid
- f. Qualified in the customized needs of the beneficiary as described in the ISP
- g. High school diploma or high school equivalency (GED)
- h. Paraprofessionals providing this service must be supervised by a qualified professional. Supervision must be provided according to supervision requirements specified in 10A NCAC 27G.0204 (b) (c) (f) and according to licensure or certification requirements of the appropriate discipline.

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- i. Education, Training and Self-Development-The Support Professional obtains and maintains necessary certifications and seeks opportunities to improve their skills and work practices through further education and training.
- j. Upon enrollment with the PIHP, must have achieved national accreditation with at least one of the designated accrediting agencies. The organization must be established as a legally constituted entity capable of meeting all of the requirements of the PIHP.

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Crisis Services staff must have access to a board-eligible or board certified psychiatrist OR psychiatric nurse practitioner with a minimum of one year of experience serving individuals with IDD and mental health needs OR a physician assistant with a minimum of one year of experience serving individuals with IDD and mental health needs.

In addition, all Crisis Services staff must have access to a licensed practicing psychologist with a minimum of one year of experience in working with individuals with IDD.