



Policy Name	Consumer Directed Community Supports
Policy Number	3.501
Origination Date	6/19/12
Board Approval Date	02/20/2018
Policy Owner	Social Services Supervisor – Linda Erhardt
Responsible Personnel	Social Services Staff
Regulatory Requirement	<i>Federally approved CAC, CADI, DD and BI Waiver Plans. MN Stat 256B.0915, subd 8(c), MN Stat 256 B.0916 Subd 6(a), and MN Stat 256B.49 subd 16(c)(e)</i>
Cross References	(Includes but not limited to Department processes, workflows, guidelines or other policies etc...)
Attachments	

Policy Purpose

Pursuant to the above regulatory authorities. This policy clarifies the case management functions for Consumer Directed Community Support services available through Alternative Care and the Home and Community Based Waivers.

Definition: CDCS is a service option available under AC and the CAC, CADI, DD, EW, AC and BI waivers that gives persons more flexibility in planning, and responsibility for directly their services and supports, including hiring and managing direct care staff. CDCS may include conventional goods and services, as well as self-designed services that provide needed support to recipients.

Reference information;

CDCS Lead Agency Operations Manual – DHS 4270

CDCS Consumer Handbook – DHS 4317

CDCS Fact Sheet – DHS 4124

Disability Services Program Manual

Procedure

A. Plan Development and Approval

- a. The consumer develops a support plan that needs to be approved by the county agency. The plan can include conventional and self designed services, paid and unpaid support, and personal risk management plans to meet health and safety needs. The plan must include emergency and backup plans; and must define provide qualifications for personal assistance and the plan for monitoring service implementation and quality. The plan also needs to include results or outcomes the consumer wants to achieve by implementing this plan.
- b. The county agency will review plan and apply required criteria per the CDCS Lead Agency Operations Manual. This review will be completed by the Swift County Human Services Aging Unit. The review will evaluate appropriateness of the CSP and will include a review of the following elements and criteria:
 - i. Allowable Goods and services
 - ii. Health and Safety: Meeting assessed needs, Quality of Care
 - iii. Quality Plans: Consumer Outcomes

- iv. Cost effectiveness and Financial Accountability
- c. The county will make a decision within 30 calendar days from receipt of the proposed plan. The County agency can:
 - i. Approve the plan
 - ii. Recommend changes needed to approve the plan before a final decision
 - iii. Approve part of the plan
 - iv. Deny or refuse to approve the plan.
- d. When decision is to deny part or all of the proposed plan, the county agency will use DHS 2828 to notify the consumer and their legal representative of the decision. The denial must include specific reasons and appeal rights (Fair Hearing information).
- e. The signed and approved support plan is copied to the consumer, legal representative and the selected Fiscal Support Entity.

B. Additional Case Management Activities

- a. Service Authorization – authorize waiver services by completing the service agreement. Review and authorize additional funding for environmental modifications or assistive technology exceeding \$5,000 and additional quality assurance if it is manageable within the county's overall waiver allocation
- b. Manage waiver spending with the county's allowable waiver allocation
- c. Monitor and evaluate the implementation of the csp, including health and safety, satisfaction and the adequacy of the current plan and the possible need for revisions
- d. At a minimum, review the person's individual CDCS budget and spending before the 3rd, 6th, and 12th month of the first year CDCS services and at least annually thereafter
- e. Monitor the maintenance of financial records and the management of the budget and services
- f. Provide technical assistance regarding budget and fiscal records management and take correction action if needed
- g. Investigate reports related to vulnerability or misuse of public funds per jurisdiction
- h. Contract with providers and monitor provider's performance
- i. Assist the state agency in completing satisfaction measurements as requested

- j. Provide satisfaction, utilization, budget, and discharge summary information to the state agency as requested
- k. Have a system for consumers to contact the local agency on a 24 hour basis in the case of a service emergency or crisis

Violation of this Policy

No or only partial adherence to this policy or procedure may result in noncompliance with current regulatory requirements and subsequent penalties to Swift County Human Services Inc. Remediation for violators will include, but not be limited to, disciplinary action up to and including termination depending on the circumstances of the situation at the time.

Signatures:



Linda Erhardt, Policy Owner

2/20/18

Date



Catherine Lee, Director

2/20/18

Date

Board Approval: 

Eric Rudnigen, Board Chair

2/20/2018

Date