

**Statement of Work:  
Vocational Skill Building Assistance and Supported Employment Services**

Target Geographical Area for Implementation:

- Arenac County                     
  Bay County                                     
  Other:

Consumer Populations to be Served:

Persons with Medicaid or Healthy Michigan in the following Populations:

- Adults with **Severe and Persistent** Mental Illnesses                     
  Adults with **Intellectual/Developmental** Disabilities                     
  Persons with Substance Use Disorders  
 Children with Serious Emotional Disturbances                     
  Other:   
  Other:

Services to be Provided:

Provider is engaged to render the Services listed and defined below to the consumer populations in the geographic areas identified herein.

<b>Vocational</b>			
<b>Service Title</b>	<b>HCPCS Code and modifiers</b>	<b>Unit Type</b>	<b>Unit Rate</b>
Community Living Supports 1:1*	H2015	1 unit=15 min	\$
For 1:2 staff ratio, add UN	UN		\$
For 1:3 staff ratio, add UP	UP		\$
For 1:4 staff ratio, add UQ	UQ		\$
For 1:5 staff ratio, add UR	UR		\$
For 1:6+ staff ratio, add US	US		\$
Skill Building Assistance (1 staff to multiple individuals)	H2014	1 unit=15 min	Community-based \$
For 1:2 staff ratio, add UN	UN		
For 1:3 staff ratio, add UP	UP		
For 1:4 staff ratio, add UQ	UQ		
For 1:5 staff ratio, add UR	UR		
For 1:6+ staff ratio, add US	US		
Career Planning/Discovery	H2023 1Y	1 unit=15 min	\$0.01
Job Development/Placement	H2023 2Y		\$0.01
Self-Employment Planning/Discovery	H2023 HX 3Y		\$
Self-Employment Maintenance	H2023 3Y		\$
Financial Planning	H2023 4Y		\$0.01
Job Coaching/Follow Along	H2025*		\$0.01

For 1:2 staff ratio, add UN For 1:3 staff ratio, add UP For 1:4 staff ratio, add UQ For 1:5 staff ratio, add UR For 1:6+ staff ratio, add US	UN UP UQ UR US		
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**JOB COACHING (H2023):**

Acuity level	0-11 months employed	12-24 months employed	25+ months employed
1 High	\$36.70/hr	\$30.90/hr	\$25.10/hr
2 Med	\$29.00/hr	\$21.25/hr	\$13.50/hr
3 Low	\$15.50/hr	\$9.70/hr	\$3.90/hr

**Job Coaching Services:**

Best practice for supported employment is to provide job coaching on average at the percentages identified in the below table to achieve the best long-term outcomes. There may be a higher amount of support provided initially which may fade within a two-year period. Although some individuals may require more or less job coaching than what best practice identifies, ongoing review and monitoring will be conducted by BABHA and the provider to assure adequate supports are provided to meet the individual's needs.

Acuity level	0-11 months	12-24	25+
1	95%	80%	65%
2	75%	55%	35%
3	40%	25%	10%

**Other conditions:**

1. Payments made to provider based on each individual's total hours worked in 1 month x tiered hourly rate. Proof of hours worked from the employer must be submitted monthly to the BABHA Program Manager and Finance Department prior to payment.
2. Face-to-Face **and approved telemedicine** Supported Employment services must be provided each month to qualify individual's hours for outcome-based payment.
3. Provider must submit claims/encounters at least monthly for face-to-face **and approved telemedicine** supported employment services prior to payment.
4. Provider is required to complete monthly billing using the form provided by BABHA.
5. Acuity level will be **monitored and updated as needed**. Ongoing monitoring of service provision will occur through review of the Clinical Assessment and Individual Plan of Service.

JOB DEVELOPMENT (H2023 1Y – 4Y):

Acuity level	Maximum Total payment	Initial referral and completion of the Vocational Profile	Obtaining job	30 days of employment	90 days of employment
Tier 1	\$2,820/one time	\$290	\$1,120	\$845	\$565
Tier 2	\$2,015/one time	\$290	\$720	\$605	\$400
Tier 3	\$1,205/one time	\$290	\$315	\$360	\$240

Other conditions:

1. Payments will be made only when each of these milestones are achieved (See details outlined below for the Vocational Profile payment).
2. Job Development payments will not qualify for client's placed prior to this amendment.
3. Vocational profiles are to be updated annually unless client is successfully employed. Profiles remain valid for at least 1 year regardless of transfer to a different vocational provider, thus will not automatically constitute initial referral payment of \$250 to the client's new provider. The Vocational Profile payment to be paid no more than once every 12 months.
4. Eligibility for the milestone payment of Obtaining a Job will be met after the individual's first worked day.
5. Provider must submit claims/encounters at least monthly prior to payment.
6. At the time an individual may become unemployed, the Provider may be eligible for payments 2-4 for that same individual as long as competitive integrated employment remains the goal.
7. Documentation of face to face and approved telemedicine time providing services will be kept in the individual's file and uploaded to the Phoenix EHR.

**Description:** The Provider shall provide Vocational Services to include Vocational Assessment, Skill Building, and Supported Employment Services such as Job Development, Job Placement, Job Coaching and Follow-along as identified in the Individual Plan of Service (IPOS). The goal is to assist the individual in developing skills that lead to obtaining and maintaining competitive integrated employment.

BABHA places great value on a person developing skills, having meaningful community-based skill building when required and helping people obtain competitive employment in integrated community settings where they are afforded the same opportunities as individuals without disabilities. Skill Building will not be needed for everyone and will be tightly authorized and monitored to be sure that it is necessary and time limited. Michigan is an Employment First State and thus we need to be quickly helping the person obtain a job following their indicated desire to work.

CLS for new individuals will be considered following the CLS policies and procedures. CLS services are assessed on an annual basis within the Person-Centered Planning process and identified in the Individual Plan of Service. Biopsychosocial Assessments, Level of Care Utilization System (LOCUS), Personal Care and CLS Assessment in Specialized Residential (3803), Level of Care Assessment for Community Living Support Services, CAFAS, Children's Waiver Decision Guide Table, as well as the Person-Centered Planning process may determine the medical necessity for CLS services. The CLS Assessment will be completed by the primary case holder based on the needs identified in the Person Centered Planning process to assure that the service is clinically appropriate and meets the needs of the individual consistent with the person's diagnosis, functioning level and symptomatology. CLS services will be regularly evaluated, assessed, approved, authorized and monitored by the BABHA CLS Committee at least annually.

## Service Definitions and Descriptions:

1. **Career Planning/Discovery and Vocational Profile (H2023 1Y)**- This service is designed to be time-limited and target services for an individual who wishes to pursue individual competitive integrated employment or individual self-employment but for whom more information is needed to support a job search including employment interests, skills, or strengths. Career Planning and Discovery services will result in a written profile and employment effectively outlining such interests. Utilization of the Vocational Profile is required. The Vocational Profile must be completed within 30 days of the first meeting scheduled with the individual referral, updated as changes occur and reviewed annually. The Profile will be scanned into Phoenix within 48 hours upon completion of the Vocational Profile. A specific employment goal must be identified in the profile before Job Development can begin. The process must include the opportunity for the person served to make their preferences known and they must have an opportunity to change their preferences.

2. **Skill Building Assistance (H2014)**. Skill Building Assistance consists of activities identified in the individual plan of services and designed by a professional within his/her scope of practice that assist an individual to increase his economic self-sufficiency and/or to engage in meaningful activities such as school, work, and/or volunteering (volunteering billed under this code is for purposes of obtaining employment). The services occur in community based and integrated settings and provide knowledge and specialized skill development and/or support. Skill training and development (HSW) takes place in a non-residential setting, separate from the home or facility in which the beneficiary resides. Skill Building is to be community based as much as possible, time limited and individualized. Job Development and Skill Building can be authorized at the same time. The intended outcome is individualized job in the community at a competitive wage. The PIHP and Vocational Providers must collaborate with Michigan Rehabilitation Services (MRS) and maintain documentation regarding the beneficiary's eligibility for MRS services. Refer to the Michigan Medicaid Manual for full definition of coverage. The person must have an employment goal in their IPOS. Skill Building can be provided outside of vocational settings and the intent of having a competitive employment goal helps to be clear between CLS and Skill Building in the vocational settings.

### 2.1 Skill Building Program Specifications:

#### 2.1.1 Skill Building Activities must be:

- a) Tailored to each person's individual needs
- b) Be medically necessary
- c) Presented to the person as part of the PCP process
- d) Individualized and customized with NO EXCEPTIONS
- e) Considered time-limited training opportunities
- f) Primarily community based
- g) Activities in the community may involve up to six (-6) people.
- h) The person must have a goal to be competitively employed
- i) The activity must be related to exploring, obtaining and maintaining competitive, integrated employment.

Note: Large group or facility wide social activities are not a billable Skill Building activity (e.g. picnics, holiday parties, outings to the zoo, sporting events, etc.) Questions about whether an activity is billable should be directed to the Program Manager prior to the event.

#### 2.1.2 Skill Building Activities may include:

- a) Community connections that are related to an employment goal. 1:1 or in small groups of 6 or less people
- b) Transportation training
- c) Mentoring

- d) Volunteering for purposes of exploring various competitive work opportunities and discovery of strengths, preferences and interests pertaining to competitive and integrated employment.
- e) Job shadowing
- f) Training experiences to include hotel cleaning and cleaning crews/enclaves (should be time limited and move to integrated employment when ready)
- g) Touring local businesses.

\*\*Other activities not listed must be approved by the Program Manager prior to implementation.

- 2.1.3 BABHA's goal is for people to move from skill building to competitive employment in the community. Skill Building and Job Development can be authorized at the same time. The Provider must have an assessment process in place to determine when a person is ready to move out of skill building to competitive jobs under supported employment. The goal should be a continuous assessment process so that people move quickly out of skill building when they are ready.
- 2.1.4 Persons who lose their job or quit shall not be returned to skill building for "something to do" nor should they attend skill building for something to do on days they do not work.
- 2.1.5 Skill Building in the community may include transportation time to and from the community site(s) Progress notes are required for all billable services. (Per HCPCS and Revenue Code Chart and Medicaid Provider Manual. Refer to the BABHA Transportation Billing Grid for guidance. Exhibit D)
- 2.1.6 The cost of staff time during meals is not a service that is billable for skill building. (Per Medicaid Provider Manual. Refer to BABHA Lunch Billing Requirements Grid for guidance. Exhibit E.)

**3. Supported Employment.** Is defined as competitive, integrated employment. It takes place in a typical work setting where the employee with a disability interacts or has the opportunity to interact continuously with co-workers without disabilities. It is individualized (one person-one job and not small groups even if the pay is competitive). The wages are competitive (at least minimum wage) with commensurate benefits. Competitive wage refers to wages that are the greater of minimum or prevailing wages. Prevailing wage is defined as the hourly wage, usual benefits and overtime, paid in the largest city in each county, to the majority of workers, laborers, and mechanics. Prevailing wages are determined by the Department of Labor and Industries, for each trade and occupation employed in the performance of public work. The employer is not the funder or provider of supported employment services for the individual. Supported Employment services include: vocational/job-related discovery or assessment, person-centered employment planning, job placement/job development with prospective employers, job analysis, customized employment and job carving, training and systematic instruction, benefits management, financial literacy, asset development and career advancement services, training and planning, transportation, other workplace support services, including services not specifically related to job skill training that enable the beneficiary to attain a job in a CIE setting of their choice. Support services are provided continuously, intermittently, and on a diminishing basis as needed throughout the period of employment. Capacity to intervene to provide assistance to the individual and/or employer in episodic occurrences of need is included in this service. **Coverage includes:**

- A. **Career Planning/Discovery (H2023 1Y):** This service is designed to be time-limited and target services for an individual who wishes to pursue individual competitive integrated employment or individual self-employment but for whom more information is needed to support a job search including employment interests, skills, or strengths. Career Planning and Discovery services will result in a written profile and employment effectively outlining such interests.
- B. **Job Development/Placement Services (H2023 2Y):** Defined as any activity that assists an individual in becoming competitively employed. This includes but is not limited to: assistance in looking for work through application development, resume building, interview preparation, and contact with the employers both with and on behalf of the participant. Per MDHHS-Medicaid policy, these services must be provided face to face with the individual in order to be reportable. Services or activities that occur without the person present must

be documented but are not reportable. This documentation will be kept in the individual's file and uploaded to Phoenix EHR. Payment for services will be made as noted above. Job Development is a time limited phase to assist a person in obtaining a competitive job in the community. Job Development should begin within the first 30 days after the first meeting with the individual. Integrated Team Meetings are encouraged throughout the Job Development/Employment process to ensure success and address any barriers. The meeting shall take place prior to new authorizations. For persons in Job Development, staff need to document clearly what activities have been done with and on behalf of the person served including but not limited to; businesses that the person has applied at and completed interviews.

- C. **Job Coaching/ Follow-Along Services (H2025)** - Includes activities on the job or in the community that assists the individual with learning the job they were hired to do including support in maintaining that job. Follow-Along Services must be performed at least monthly. - touching base with the employer (if appropriate) as well as the individual. The use of natural supports on the job must be encouraged so that fading may occur. The method of Follow-Along should be the decision of the individual and their employer (if appropriate) in consultation with the individual's support team. A Job Coaching/Follow Along Support Plan should be outlined in the IPOS and include interventions, amount, scope and duration.
- All job coaching/ follow along services require a prior authorization.
  - The Acuity Scale and the IPOS will help to identify what level of coaching an individual is likely to need. However, the individual must receive the level of job coaching the individual needs to obtain and maintain employment.
  - The Job Coach should be an individual that is employed by the provider. They cannot be employed by the competitive employer where the individual is working. Caseloads of Job Coaches need to be reasonable in order to provide the frequency of contact required.
  - For each individual that is working competitively in the community and is receiving any type of support service (job coaching or follow along) documentation must be completed to support the activities and services that are being provided. Transportation for Supported Employment is included in the rate for these services. Refer to the BABHA Transportation Billing Requirements Guidelines Grid. (Exhibit E)
  - The cost of staff time during meals is not a covered service and therefore not included in reportable Supported Employment services. Refer to BABHA Lunch Billing Requirements Grid for guidance. (Exhibit F)
- D. **Self Employed (H2023 3Y)** - The development of Self Employment is a billable service. **Self-employment refers to an individual-run business that nets the equivalent of a competitive wage, after a reasonable period for start-up, and is either home-based or takes place in regular integrated business, industry, or community based settings. This service supports sustained paid employment at or above the minimum wage in CIE in the general workforce in a job that meets personal and career goals.** Before work begins with an individual in this area the Program Manager at BABHA must be contacted. This service includes support to establish or maintain an IRS recognized self-employment business. **Self Employment services should** be reviewed at six months, and twelve months and achieved in no longer than 24 months from start of business as shown by IRS Schedule SE (Form 1040).
- E. **Financial Planning (H2023 4Y):** This service is designed to inform the individual (family, guardian, or other party, if applicable) of opportunities to best ensure, encourage, and support that individualized competitive integrated employment is feasible, almost always provides more income, and most often health coverage is retained.

**Coverage excludes:**

- Employment preparation; and
- Services otherwise available to the beneficiary under the Individuals with Disabilities Education Act (IDEA).

**4. Community Living Supports (CLS) (H2015); add appropriate U\* modifier for multiple individuals served) :** are used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his/her goals of community inclusion and participation, independence or productivity. The supports may be provided in the participant's residence or in community settings. All services must be identified through the -Person Centered Planning process and included in the Individual Plan of Service prior to providing this service. Types of CLS activities approved for the Vocational Provider includes:

- Volunteering, without the intent or desire to pursue competitive integrated employment
- Community connecting activities which promote community inclusion, relationship building, independence and skill development.
- Social Skills/Independent Living skills development
- Socialization and relationship building
- Money Management
- Skill development on use of transportation system
- Participation in regular community activities and recreational opportunities (attending classes, movies, concerts, health clubs, etc.

**Transportation:** Community Living Services in the community may include transportation from the individual's residence to community activities, among community activities and from the community activities back to the individual's residence. (Per HCPCS and Revenue Code Chart/Medicaid Provider Manual Refer to the BABHA Transportation Billing Requirements Grid for guidance – Exhibit D.)

Other Conditions:

1. **Treatment Planning code (H0032):** is for the Provider to use for attendance at Person Centered Planning meetings (PCP) only. The only time this is an approved code is if the staff person is a Professional with a NPI# *and* only for attendance at the actual PCP meeting which results in the development or amendment of the IPOS. The primary worker is responsible for identifying whether the meeting is a PCP meeting. (H0032).
2. **Medicaid Guidelines**  
(Source: PIHP/CMHSP Encounter Reporting – HCPCS and Revenue Codes)
  - Report Skill Building when there is a vocational or productivity goal in the IPOS and the individual is being taught skills he/she will need to be a worker (paid or unpaid).
  - Report Supported Employment when the goal is to obtain a job (competitive, integrated employment) and assistance is being provided to obtain and retain the job.
3. **Wage Increases:** Provider will adhere to State mandated wage increases and implementation of wage increases related to funding provided for such purposes. Compensation must be distributed to its direct care workers as soon as possible following the effective date of the wage adjustment. In addition, and upon request, Provider agrees to submit periodic reports to BABHA which shall include the range of rates of pay for employees providing direct care to BABH individuals served under contract. Direct care workers are those working in local residential settings and paraprofessionals and other non-professional direct care workers in (non-residential) settings where skill building, community living supports, employment, training and personal care services are provided. The reports will list each employee position or classification, together with the actual rate or rates of pay for each position or classification for the applicable time period, including the starting rate and each rate/step increase.

## A.1 Provider Specific Services Requirements.

In addition to the duties and obligations set forth in the Agreement, Provider shall comply with the following specific requirements for Services rendered by **Vocational Skill Building Assistance and Supported Employment Providers**:

Training:

- A.1.1 Skill Building, CLS and Employment Specialist staff must minimally meet the **Direct Support Professional (DSP)/Aide requirements** - Individual with specialized training, is able to perform basic first aid procedures; trained in the beneficiary's plan of service (i.e. training shall be provided by; the supports coordinator/case manager or other qualified staff that are responsible for monitoring the IPOS and are not providers of any other service to that individual and by each specialized professional within the scope of their practice, as appropriate), as applicable; is at least 18 years of age; able to prevent transmission of communicable disease; able to communicate expressively and receptively in order to follow individual plan requirements and beneficiary-specific emergency procedures, and to report on activities performed; and in good standing with the law.

All staff who work with individuals shall have, at a minimum, successfully completed the required training courses in **Exhibit D: Provider Training Requirements**. Training shall be arranged by the Provider and provided by BABHA (where available) or by training organizations or resources that follow a MDHHS curriculum and are approved in writing by BABHA.

- A.1.2 Provider understands and agrees that any untrained staff shall only work with individuals under the direct supervision of trained staff and any person engaged in direct care work shall successfully complete all required training within 90 days of hire, and complete all annual refreshers and updates.
- A.1.3 Training beyond what is required under contract is the financial responsibility of the Provider. Additional trainings secured through BABH will be based on a predetermined fee. Provider's internal training resources should be utilized whenever possible.
- A.1.4 Training in medications for designated staff is based on Provider's internal medication administration policies and procedures. These policies and procedures must be approved in writing by the BABHA Nursing Team Supervisor. Provider's lead trainer may attend the Basic Medications training class offered by BABHA. Medication will only be passed by a staff member who has been trained.
- A.1.4.1 BABHA requires that remedial education occur if an individual is identified as responsible for undesirable medication occurrences. Provider will develop and implement a remedial education process and retrain staff within 90 days of the medication error occurrence.
- A.1.5 A twenty-four (24) hour cancellation notice is required for all trainings conducted by the BABH Staff Development Center. The Provider will contact the Staff Development Center at (989) 895-2395, or via email to [staffdevelopment@babha.org](mailto:staffdevelopment@babha.org), immediately upon becoming aware of a cancellation, but no later than 24 hours. Continued no-shows may require a written corrective action plan be submitted by the Provider to BABHA.

### A.1.6 General Documentation:

- A.1.6.1 All documentation for any billable service must be on a Progress Note. Each Progress Note must contain the full name of the person receiving the service, the date including the month, day and year of the service provision and the time of service must be accurate (must match the time on the claim) and include am or

pm. Two client identifiers must be on each page of documentation. All Billable services must be approved and authorized in the Individual Plan of Service and have been identified as a need through the Person-Centered Planning process. Documentation must be descriptive and explain what services have been provided and match the billable code associated with the service description. The signature of the person completing the documentation and the date of completion shall all be included in the documentation.

A.1.6.2 BABHA may require a Provider to utilize standardized documentation forms.

#### A.1.7 Referrals and Unit Authorization.

A.1.7.1 Referrals for employment services will be generated by the Client Services Specialist at the referring agency. This contract only serves adults with Medicaid and Healthy Michigan that are receiving mental health services through BABHA or one of its contract agencies. The referrals will be sent to the Program Manager at BABHA. The Client Services Specialist will generate an authorization for units of service for up to 12 months which is connected to the Person-Centered Plan process and identified in the Individual Plan of Service.

A.1.7.2 Individuals involved in Skill Building will be recommended for Job Development upon their request and/or when they have shown job readiness skills. Michigan is an Employment First state and therefore the emphasis is on assisting the person to obtain employment quickly following the expressed desire to work. A person does not have to participate in skill building in order to receive services to obtain competitive employment.

#### A.1.8 Expectations and Outcomes.

A.1.8.1 It is the expectation to see people employed in diverse jobs and at a variety of different employers but always based on the person's preferences,

A.1.8.2 The Provider will monitor and submit required data reports timely with the assistance of BABHA Program Manager generating data from the EHR when available.

A.1.8.3 Ongoing meetings will occur with the Program Manager to monitor individual progress, program outcomes and to address barriers.

A.1.8.4 Community education and awareness must be a continuous goal. This includes educating persons served, their family, and the community about the appropriate use of skill building, the supports available for supported employment, and the benefits of employing people with mental health and developmental disabilities.

A.1.8.5 If it is determined that the goals were not met and community inclusion not occurring, sanctions and/ or a rate reduction may be imposed.

#### A.2 Performance Requirements and Indicators.

A.2.1 Community Inclusion:

Individuals who receive skill building assistance services shall be provided with programming to further the community inclusion objectives of the persons served that is consistent with the Inclusion Best Practice Guideline, the Consumerism Best Practice Guideline, the HCBS rules and the Personal Care Technical Requirement (please see the BABHA Provider Manual).

### A.2.3 Home and Community Based Services (HCBS):

The Provider will educate themselves and their staff about the new HCBS revised rules related to settings that do not isolate. The intent of the rules is to ensure that individuals are not isolated from their community, that they have a high level of choice and control in their lives and that they have regular and meaningful community-based activities. The Provider will work with BABHA to achieve and maintain full compliance with the rules. The Provider will cooperate with any assessments of their setting performed through the MDHHS, the PIHP and/or BABHA. If required by MDHHS, the Provider will submit required plans of correction in order to come in to compliance with the standards. Some of the key components that the vocational provider will need to address in achieving compliance are as follows (some of these items are normal contract requirements that we audit for and are not new):

- a) The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to see employment and work in competitive integrated settings, engage in community life, control personal resources and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.
  - The setting provides individuals with contact information, access to and training on the use of public transportation. The information is in a convenient location.
  - Provide individuals the opportunity to participate in negotiating his/her work schedule, break/lunch times and leave and medical benefits with his/her employer to the same extent as individuals not receiving Medicaid funded HCBS services.
  - The setting is physically accessible including access to bathrooms, break rooms, appliances, furniture, hallways and entrances, equipment, etc.
  - The setting is located in the community among other private businesses, professional offices, retail businesses, etc., that facilitates integration into the larger community.
  - The setting allows for individualized schedules that focus on the needs/preferences of the person and allow for individual growth.
  - The setting assures that tasks and activities are comparable to tasks and activities for people of similar ages who do not receive HCBS.
  
- b) The setting is selected by the individual from among setting options including non-disability specific settings...The setting options are identified and documented in the Individual plan of service and are based on the individual's needs and preferences.
  - The individual has a high level of choice and control about the services they receive (e.g. type of volunteer or work experience, type of employer, etc.). There is evidence the person made an informed choice meaning they know the options available.
  - The setting is selected by the individual from among setting options including non-disability specific settings.
  - Competitive employment is in a non-disability-specific setting. Volunteering, community connecting, and skill building is in the community in non-specific-disability settings.
  - The Provider has a process for ensuring that the person's preferences are honored and individuals are empowered to make decisions and to share their preferences and desires.
  
- c) The setting ensures an individual's right of privacy, dignity and respect and freedom from coercion and restraint.
  - Information about the person is kept private. There are no posted schedules for individuals on the walls in open areas and staff do not talk about the person in common areas.

- Persons receive personal care services in private and with dignity and respect.
  - Persons are treated with dignity and respect at all times
  - There is a secure location for the person's personal belongings.
- d) The setting optimizes but does not regiment, individual initiative, autonomy and independence in making life choices including but not limited to daily activities, physical environment and with whom to interact.
- The setting does not have barriers to prevent individuals from accessing certain areas (e.g. gates, velcro strips, locked doors, fences, etc.).
  - The setting allows for individuals to have a meal/snacks at the time and place of their choosing (access to a dining area, individuals are treated with dignity and respect (no bibs)).
  - The setting affords the opportunity for tasks and activities matched to individual skills, abilities and desires.
- e) The setting facilitates individual choice regarding services and supports and who provides them. This includes the opportunity to change their preferences.
- The setting ensures individuals are supported to make decisions and exercise autonomy to the greatest extent possible.
  - The setting affords the individual the opportunity to participate in meaningful activities in integrated community settings consistent with the person's needs and preferences.
  - Staff are knowledgeable about the person's capabilities, interests, preferences and needs.
  - Individuals are informed about how to change their services and preferences.

BABHA requires providers to be well informed of the rules, educate staff, assess where they need to change practices, protocols, documentation and policies and procedures and work toward persons receiving services most of the time in the community (not in the Provider building). The Provider will develop and implement plans to reduce time in congregate settings. Regular meetings and progress reports with BABHA will be required.