

VID#:

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
Annex A/Residential Program Description

PROGRAM DESCRIPTION OF A LICENSED COMMUNITY RESIDENCE
FOR PERSONS WITH DEVELOPMENTAL DISABILITIES

AGENCY NAME:

ADDRESS:

FEDERAL IDENTIFICATION NUMBER: _____

EXECUTIVE DIRECTOR: _____

CONTACT PERSON, TITLE: _____

TELEPHONE NUMBER(S): _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

PLEASE CHECK ONE OF THE FOLLOWING:

- 1. INITIAL PROGRAM DESCRIPTION (NEW PROGRAM IN DEVELOPMENT): X
- 2. REVISION OF PREVIOUSLY APPROVED PROGRAM DESCRIPTION: _____

PROGRAM ADDRESS (IF KNOWN):

THIS DOCUMENT MUST INCLUDE THIS COVER SHEET AND THE FOLLOWING:

- I. Agency Information
- II. General Description of Population
- III. Narrative Information
- IV. Residential Staffing
- V. Additional Provisions w/Signature

FOR DDD USE ONLY:

Program Description

Date of Initial Submission:	
Dates of Revisions:	
Date of Final Approval:	

ANY ADDITIONS OR DELETIONS TO THE LANGUAGE OF THIS DOCUMENT SHALL BE IDENTIFIED BY UNDERLINING AND **HIGH-LIGHTING**.

SECTION I. AGENCY INFORMATION

A. Type of Corporation operating the program or service. (Check one.)

Profit _____ Not for Profit X Religious Not for Profit _____
Limited Liability Corporation _____ Public _____

B. Program Type (check only one.)

1. Group Home _____
2. Supervised Apartment X
3. Supported Living _____
4. Other _____ Explain _____

C. Name of Agency holding title to the property:

D. Anticipated Funding Sources (Check one.)

Site Acquisition: DDD _____ Other X

If other, explain

Rental

Operating Funds: DDD X Other _____

If other, explain _____

E. Briefly list the programs and services provided by the Agency.

Residential Services such as group homes and supported living. Day Services such as site and community-based habilitation, Supported Employment, and Recreation Services.

F. The following municipalities or counties are being considered as possible sites (or current location of program):

SECTION II. GENERAL DESCRIPTION OF POPULATION TO BE SERVED - Please describe the range of characteristics of individuals who could be served within this residential program, as they relate to the following areas. Do not use any names or initials in this document.

A. Program Name: _____ **VID#** SA

B. Licensed Capacity: 2 **Gender:** male _____ female _____ co-ed X

C. Age Range –
You may select only one of the following:

_____ The program will serve children and youth up to 18 years of age.

_____ This program will initially serve young adults 16 and older, assuring that the individuals have no more than a six year age difference until all individuals reach the age of 21.

X The program will provide services to adult individuals age 21 and above.

_____ Other (Explain)

D. Range of Functioning Levels (*Select all that apply*)

(Note: To use boxes, double click on box, then select Default Value, Checked.)

The primary diagnosis of all individuals served in this program is a developmental disability.

Levels of intellectual disability: This program will serve consumers with functioning levels including the following:

<input type="checkbox"/> Mild	<input checked="" type="checkbox"/> Moderate	<input checked="" type="checkbox"/> Severe	<input checked="" type="checkbox"/> Profound
-------------------------------	--	--	--

Secondary diagnoses of individuals served may also include:

- | | |
|---|---|
| <input type="checkbox"/> Traumatic Brain Injury | <input checked="" type="checkbox"/> Psychiatric/Mental Health |
| <input checked="" type="checkbox"/> Autism Spectrum Disorders | <input checked="" type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Other (Specify) | |

E. Social Functioning

- **Peer relationships. *You may select only one of the following:***

 X Individuals may or may not have the capacity to engage and maintain peer relationships, and this is not a requirement for participation in this program. Individuals appropriate for this program may demonstrate a range of skills in relating to peers, from requiring varying levels of staff support and direction, to independence, in engaging peers in meaningful interaction,.

 Peer relationships among the individuals in this setting typically involve deficits in the ability to interact in an appropriate and positive manner with others. The group may demonstrate a wide variety of interactive skills ranging from purposeful, cooperative discourse with peers to self-focused actions involving attention-seeking behaviors to engage staff.

 OTHER: Explain

- **Authority relationships. *You may select only one of the following:***

 X Individuals may or may not recognize authority figures. To assure safety and to facilitate structure within individual or group living, staff may need to provide direct supervision and/or prompting. Minimally, individuals should be willing to accept instruction and assistance from staff. In the event of an emergency, they must respond to direction and comply with evacuation procedures.

 Individuals are expected to recognize authority figures and respond to instruction in case of emergency situations. Although every opportunity will be given to allow individuals to be as independent as possible, the individuals should be willing to accept assistance and guidance from staff as needed.

 It is expected that all individuals will recognize and respond to authority figures at home and in the community. Individuals in this program are expected to respond to direction from staff or other authority figures in any emergency situation. They should be able to recognize and avoid unsafe situations, identify various household and medical emergencies, contact staff, and demonstrate the ability to interact with strangers in a manner that is both safe and appropriate.

- **Prior community experience. *You may select only one of the following:***

 X Prior community experience is not a requirement for participation in the program. It is expected that some individuals will require moderate supervision while engaged in community based activities, while others may require direct support during an outing.

 Individuals served in this program should have previous experience living in the community; however, to do so they may require varying degrees of direct support. Although supervision may be required while engaged in certain community based activities, some individuals may have been determined able to spend some unsupervised time in the community.

- **Level of sexual awareness. *You may select only one of the following:***

Individuals in the program may demonstrate varying levels of sexual awareness. While individuals may currently demonstrate a minimal level of body awareness, appropriate sexual behavior in public would be expected and supported. Whatever the level, training will be provided in accordance with each person's needs.

Individuals are expected to have at least a basic level of awareness of human sexuality in terms of general knowledge, personal protection and levels of personal involvement. Appropriate sexual behavior in public will be supported as well as expected. Whatever the level, training will be provided in accordance with each person's needs.

F. Health/Medical

- **Overview of group medical status. *You may select only one of the following:***

This program can serve individuals who exhibit general good health, and who may present with a variety of medical issues, such as diabetes, special dietary issues, elevated cholesterol, hypertension, bowel disorder, ulcers, apnea, asthma, etc., which are controlled through diet, medications, and oversight/monitoring by residential staff (non-nursing) who have received appropriate training. The level of severity of any of these conditions must be such that they can be managed through routine oversight by a community-based physician. The program cannot serve individuals who require on-site nursing supports. Medical supports at Levels I – IV can be served in this category.

While the overall health and medical status of the individuals residing in this home is expected to be good, this program can serve individuals who present with a variety of medical issues which are controlled through diet and/or medications, as well as one (1) or two (2) individuals who have been assessed on the Developmental Disabilities Resource Tool (DDRT) as requiring medical supports at Level V or VI. These individuals have one or more medical conditions (i.e., respiratory, digestive, cardiovascular, etc.) that require on-site nursing care by a Registered Nurse (RN) or Licensed Practical Nurse (LPN). Needed nursing care treatments may include, but are not limited to: oral and/or nasal suctioning; Intravenous medications; tube feeding; and catheterization. Nurses may also be responsible for overseeing medication administration and medical management of care with community-based physicians.

OTHER: Explain

- **Pre-existing conditions (note allergies, hepatitis, communicable diseases, etc.)**

This program can support individuals with pre-existing conditions such as allergies, hepatitis and communicable diseases, which can be readily managed through a community-based primary care physician or clinic. Those with pre-existing conditions that are so severe as to require additional staffing or on-site nursing would only be considered on a case-by-case basis.

- **Seizure disorder (level of control) *You may select only one of the following:***

This program can serve individuals with no seizure activity, as well as those with an active seizure disorder controlled through oral medication and/or environmental adaptations.

OTHER: Explain

G. Physical Disabilities

- **Range of mobility. *You may select only one of the following:***

_____As this program is not handicapped accessible, only individuals who are fully ambulatory can be served.

_____Although this program site is not handicapped accessible individuals with varying methods of independent mobility, from individuals who are fully ambulatory to those who utilize various types of assistive devices such as walkers, canes, or a wheelchair for distance, can be served. The ambulation assistance needs of individuals served at this program must be such that all can be evacuated by available staff in 3 minutes or less.

 X This home is a barrier-free, wheelchair accessible environment, and can accept up to one (1) individual who is non-ambulatory and cannot self-transfer. Others requiring assistance ambulating, who ambulate with an unsteady gait, or who utilize a wheelchair for all ambulation and are independent in transferring can be served, as long as they can be managed safely and adequately with the level of staffing provided. All of the individuals in the home must be able to be evacuated from the residence by available staff in the case of an emergency within 3 minutes or less.

_____OTHER: Explain

- **Level of assistance required/physical aids involved, i.e., independent, one or two-person transfer, use of adaptive equipment.**

You may select only one of the following:

_____Individuals served in this program must be sufficiently ambulatory to independently negotiate two or more steps within, or leading to, the home. Individuals served may utilize various types of adaptive devices other than those for ambulation, such as modified table wear for independence in eating or a shower chair for hygiene.

_____The program can serve individuals who are independent in the use of canes, braces, walkers, molded foot and ankle orthotics, or wheelchairs. Individuals who require support with the use of a wheelchair for ambulation, such as for distances or for timely evacuation, will be considered on a case-by-case basis. Individuals served may utilize various types of adaptive devices other than those for ambulation, such as modified table ware for independence in eating or a shower chair for hygiene.

 X Individuals can range from being able to function without any physical aids for all activities of daily living and independently evacuating the program to individuals who use a wheelchair for complete mobility, a wheelchair for long distances, a rifton chair for positioning, modified table ware for independence in eating, Hoyer lift, and/or a shower chair for hygiene. This program can only serve individuals whose need for assistance during emergency evacuation is such that the available staffing complement can evacuate all individuals from the home in three minutes or less. ***Enter the maximum number of individuals that can be served:***

Requiring one-person transfer assistance: 1

Requiring two-person transfer assistance: ___

_____OTHER: Explain

- **Range of sight and hearing. *Select all that apply:***

_____ This program cannot serve individuals with severe vision impairments.

 X This program can serve individuals who range from having normal sight and hearing to individuals with visual and/or hearing impairment.

_____ Individuals who require assistance with ambulation due to their level of visual and/or hearing impairment can be served in this program.

_____ Individuals with sensory impairments will be considered on a case-by-case basis.

H. Behavioral

- **General range of behavioral characteristics**
(Select one or more, as applicable.)

_____ This home is not designed for individuals with severe behavioral challenges. Since some of the individuals served may not be able to defend themselves against aggressive individuals, this program cannot serve individuals who have an active history of being physically assaultive, dangerously destructive of property, sexually predatory, etc.

 X Individuals may demonstrate no, or minimal to moderate levels, of maladaptive behaviors. These may include some of the following: hoarding, non-compliance, verbal aggression, physical aggression that does not cause injury, social inappropriateness, disruption of routine, excessive bossiness or withdrawal, ripping items, elopement, self-injury, and/or overeating. This list is not all-inclusive and behaviors will be considered on a case-by-case basis. (DDRT Behavioral Levels I and II)

 X Individuals served in this program may demonstrate from severe maladaptive behavior to those requiring intensive behavioral supports and assessed on the Developmental Disabilities Resource Tool (DDRT) at Behavioral Supports Need Level III or IV. Behaviors may include, but are not limited to, sexual predatory behaviors, running away, eating or mouthing inedible objects, scratching self/others, hitting self/others, biting self/others, head-butting others, choking others, and/or kicking others. Needed supports may include one-on-one supervision, personal control techniques, and implementation of a formal behavior support plan.

_____ Individuals with active behaviors that would place the surrounding community or the individuals served at serious risk, such as fire setting, assaults (physical/sexual), severe physical aggression, persistent runaways, and other dangerous or high-risk behaviors, or those who have a history of pyromania, will only be considered for this program on a case-by-case basis

 X The program can serve individuals with dual diagnoses of developmental disability and stabilized mental illness. The individuals' behavioral characteristics may include symptoms of various psychiatric disorders such as personality disorders, depression, anxiety, low frustration tolerance and lack of impulse control.

_____ **OTHER:** Explain

I. Communication Skills

- **Receptive and expressive capabilities**

All participants would be expected to have a minimum level of receptive language that would allow them to understand and react to direction in an emergency situation, and should be able to communicate their needs in such a manner that, at a minimum, staff can recognize illness, pain, unhappiness, etc., through verbal speech, gestures, or facial expressions. Individuals with extensive communication deficits may be considered on a case-by-case basis.

- **Alternative methods of communication, (i.e., sign, gestures, communication board, etc.)** *You may select only one of the following:*

This program is able to serve individuals that range from using normal speech and gestures to those solely using facial expressions or sounds for communication. Individuals requiring the use of sign language, gestures, picture exchange communication system (PECS) or other augmentative communication devices can be served.

This program is designed to serve individuals whose communication abilities range from normal speech and gestures to those with minimal deficits in speech, and who demonstrate the ability to utilize the telephone to contact agency staff or community resources.

Individuals requiring the use of sign language, gestures, picture exchange communication system (PECS) or communication devices would be considered on a case-by-case basis.

OTHER: Explain

J. Adaptive Living Skill Needs

- **self-care, household skills, budgeting/financial management, self-medication, level of supervision, etc.** *You may select only one of the following:*

Individuals served in this program may have varying levels of ability relative to independence in bathing, toileting, and feeding themselves. Individuals in this setting are expected to require a consistent environment with structured programs. Direct support and skills training is expected to be needed in the areas of room care, basic kitchen and household skills, purposeful use of free time, community appropriateness and food and personal needs shopping. Higher level skills such as mobility/transportation, money management, banking and self-medication will be introduced to those individuals who are behaviorally and/or cognitively capable of learning such tasks.

All individuals in this program are likely to demonstrate moderate to high levels of independent action in the area of activities of daily living. The program anticipates the individuals would require minimal support to complete household tasks, grooming, bathing and other self-care tasks. Higher level activities of daily living such as shopping, banking, budgeting, self-medication, using communication devices (telephone, computer), and transportation may require a greater level of direct support.

Individuals served in this program must be independent and self-sufficient in all activities of daily living, including grooming, bathing and other self-care tasks, self-medication, meal preparation, self-preservation, basic kitchen and household skills, purposeful use of free time, community appropriateness and food and personal needs shopping. They may require regular or intermittent assistance with higher level skills such as money management and budgeting, menu planning and nutrition, and occasionally mobility/transportation.

_____ **OTHER:** Explain.

K. Day/Educational Program

- **Range of projected day programming needs**

Select all that apply:

_____ This program can serve individuals with any range of need in the area of educational or day programming. This includes, but is not limited to, individuals who attend school programs based on their educational entitlement, adult training programs, sheltered workshops, vocational training programs, and partial care day supports. Program staff will work with the sending education authority and the local education school district to secure appropriate educational supports, as appropriate. Individuals may attend an adult training program or medical day program ranging from two to five hours per day for two to five days per week, a program geared toward senior citizens one to three days per week, may be unable to obtain, or are awaiting, full time educational or day programming supports, may participate in a self-directed day program, may be retired, and/or may choose not to participate in day program. During these hours, the program will provide any needed levels of staff support and direction to assure that peers are engaged in meaningful individualized activities within the home and the community.

___ X ___ During the weekday, Monday through Friday, each individual is expected to participate in a day program out of the residence. The type of day program is in accordance with each individual's skills and goals as determined by the IDT, with the range of options to include, but not be limited to, vocational training, transitional supported employment, and supported employment. Individuals may also work non-traditional hours through supported or competitive employment, or volunteering.

SECTION III. NARRATIVE INFORMATION – This section addresses services to be provided to individuals described within the range of characteristics identified in Section II.- General Description.

A. The following describes how the needs of the group as a unit and the needs of the individuals within the group will be met.

It is the goal of this community residential program to provide the least restrictive environment while promoting a safe and nurturing home setting where participants can work on both general skill development and specific areas of need. With person centered planning driving the process, the individual and their Interdisciplinary Team (IDT) will establish specific goals and objectives to promote increased independence, which are detailed in their Individual Habilitation Plan (IHP) or Essential Life Plan (ELP). This program will also provide the structure and support required by each individual served to to successfully transition into the home, establish a comfortable and enriching daily routine, and work toward increasingly independent functioning.

Adjustment Goals:

- Transition into new residential setting
- Orient to environment, staff and housemates.

Short Term Goals:

- Establish routine for daily functioning
- Increase independence in tasks related to ADLs & household skills
- Develop self medication capabilities

Long Term Goals:

- Expand participation in the wider community
- Develop and enhance personal relationships
- Enhance independence in life skills towards the greatest level of community integration and independent living as possible.

All environmental modifications identified as necessary for the safety of the individuals served have been made, such as door and/or window chimes or alarms, Plexiglas windows, television covers, durable furniture, etc. A barrier-free setting is provided for individuals requiring enhanced accessibility.

A vehicle will be available to this program to meet the transportation needs of the individuals served. For programs that serve individuals who utilize wheelchairs for all mobility, an accessible vehicle will be provided.

B. The following describes how the daily activities of the household, such as maintenance of the common living areas, be utilized as training activities and opportunities for the individuals' development.

The program will capitalize on the natural rhythms of the day to teach personal and household maintenance skills. To the extent that they are able, all individuals will be expected to engage in the full spectrum of household maintenance tasks by rotating participation in the work related to the completion of household tasks such as vacuuming, dusting, laundry, cleaning the bathroom, and meal prep. For those who have IHP/ELP goals related to these tasks, time will be scheduled weekly to address the specific objectives to be met. For those who do not have specific goals in these areas participation will be encouraged and supported in order to develop a generalized framework of expectation for household maintenance in the event they eventually live in a more

independent setting. This training will be addressed both formally and informally through direct teaching and role modeling.

Opportunities may include, but are not limited to:

- Chores
- Daily routines
- Using "teachable moments" as opportunities for training
- Planned activities/training

C. The following describes how the social and recreational aspects of group living will be utilized to address the social functioning, communication skills and other needs of the individuals.

Residents will be given the opportunity to utilize community resources to satisfy many of their daily living and recreational needs. Regular shopping trips for food and sundries, banking, religious services and recreational activities will provide opportunities for individuals to practice community skills and to be exposed to expectations for appropriate social behaviors. Consumers will learn about the different ways one relates to shopkeepers, friends and family, staff will discuss and model community "codes of conduct" and individuals will practice and staff will reinforce these skills during frequent trips into the community. As these skill levels continue to increase, additional programs will be sought to fully meet each individual's interest.

The selection of recreational activities will be driven by the interests of the individuals as determined through group meetings, interest surveys and individual requests. It is expected that choosing activities along with their fellow program participants will enhance each individual's ability to express their desires in a constructive manner and to teach compromise with positive outcomes.

Social and recreational occasions and activities, both inside and outside the home, also become opportunities to model, expand and refine social, conversational and interpersonal skills. Individuals will be encouraged to participate in activities in the community that are of interest to them such as libraries, restaurants, shopping centers, theater, movies, concerts, spectator or participatory sporting events, etc., to give them the opportunity to share these experiences with their house mates, increase their presence in the community, enhance their socialization skills and provide additional opportunities to meet and develop relationships with other persons with similar interests.

D. The following describes what specialized services or interventions will be provided, including behavioral services.

All individuals will have access to any specialized medical/therapeutic service that is determined necessary and appropriate. Whenever possible these services will be provided through community-based providers. The agency will assure that individuals receive any specialized services identified as needed by the assessments conducted through the IHP/ELP process. The program is prepared to provide the support needed to engage in services provided by, but not limited to, medical practitioners such as general practitioner, psychiatrist, neurologist, dentist, ophthalmologist, etc. Whenever possible all services are provided through the community at large as per the individual's personal choice and needs. Physical, Occupational, and Speech Therapy services will be arranged for on an as-needed basis, as well as psychiatric and/or psychological services. The ability to provide support for other specialized services will be determined on a case-by-case basis.

Behavioral services will be provided for individuals served as determined by the IDT, in accordance with Division Circular #34, "Behavior Modification Programming". Behavior support plans will be developed in accordance with the agency's Division of Developmental Disabilities' approved policy and procedure, which complies with the requirements of Division Circular #34. The format of this policy and procedure will be determined by the Division, and may be either in the form of 1) an agency's Behavior Management Manual, 2) a signed Memorandum of Understanding (MOU) between the agency and the Division of Developmental Disabilities (DDD) which stipulates how the Division's Community Services Behavior Management Manual will be employed by the agency, or 3) an abbreviated behavior manual format identified as the DC#34 Appendix A.

Behavior support plans will be written and monitored by behavioral professionals who are qualified in accordance with Division Circular #34. The agency shall assure that an experienced trainer conducts all training for direct services staff in the implementation of individual behavior support plans. All behavior plans that restrict the rights of the individual will be reviewed and approved by the appropriate human rights and behavior management committee as well as the individual, case manager, and/or guardian.

_____ In accordance with the needs of individuals served in this program, and as identified in their IHP(s), access to some common household items, (i.e., food, sharps, paper or cleaning products), is restricted.

Where nurses are employed by the agency to provide direct services at the residential site, the agency shall assure the necessary nursing supervision. Where necessary, Licensed Practical Nurses (LPNs) shall be supervised by a Registered Nurse (RN) or physician, either directly or, as appropriate, available by telephone.

E. The following describes staff training, supervision, and skills and competencies.

Staff Training

Staff shall be required to successfully complete the following trainings:

Prior to working with individuals receiving services, new employee orientation, including, but not limited to:

- The organization's philosophy, goals, services and practices
- The prevention of abuse, neglect and exploitation
- Unusual incident reporting and investigation procedures
- Emergency evacuation procedure, emergency medical treatment, and use of fire extinguisher
- the Agency's approved policy and procedure for calling 911 in the event of a life-threatening emergency (Danielle's Law)
- An overview of developmental disabilities and any special needs of the individuals being served, for example, medical or behavioral problems requiring specific, tailored training
- As necessary, training in specialized diets, mobility and wheelchair lift training, wheelchair tie-downs, etc.

Within thirty days of employment:

- HIPAA

Within 120 days of employment:

- New Jersey Pre-Service, including Overview of Developmental Disabilities, Medication Training, Preventing Abuse & Neglect, American Red Cross Standard First Aid Training, and Cardio-pulmonary Resuscitation training.
- Specialized training required to meet individuals' needs: i.e., behavioral, medical, dietary, communication, etc.
- Use of special equipment, including but not limited to: wheelchairs, lifts, tie-downs, glucometers, adaptive utensils, etc.

Substitute staff and staff from temporary staffing agencies shall have the same training as agency employees. Only those staff persons who have successfully completed New Jersey Pre-Service Medication Training will administer medications. All staff transporting individuals in wheelchairs will have successfully completed training and maintain proficiency in mobility and wheelchair lift training, and wheelchair tie-downs.

If the program serves individuals with secondary psychiatric/mental health diagnoses, all staff will receive training in the specialized needs of such individuals, including signs and symptoms, common treatment modalities and commonly prescribed medications and their side effects.

If the program serves individuals with the secondary diagnosis of traumatic brain injury, all staff will receive training in the specialized needs of such individuals.

Structure of Staff Supervision/On-Call System

The agency will assure sufficient managerial and administrative supervision and oversight of its residential operations. Staff will be provided the means for direct access to a supervisor as needed. Therefore the agency will establish and implement an On-Call System to provide emergency administrative support to residential staff at all times. Oversight will include routine and exception-based monitoring and auditing of all critical functions.

As applicable, list any specialized skills and/or competencies required by the staff.

SECTION IV.

RESIDENTIAL STAFFING

VID #_SA

A. Staffing Description. As reflected on the staffing schedule grid and position lists, as well as expected variations.

1. For programs with 24-hour direct support staffing, **fill in the number** of staff working on each shift:

	1 st shift	2 nd shift	3 rd shift Awake/Asleep
Weekdays	0	1	1/0
Weekends	1	1	1/0

2. Explain daily variations, other shift configurations, and uncovered time periods/ shifts, if applicable.

From Sunday through Thursday, the Residential Staff (CS) on the overnight shift will work until 9am to assist with ADLs.

One RS, position #8, will vary their assignment as needed for medical appointments and/or other needs as directed by the Program Manager

A CSS will provide additional coverage for community-based activities from 5pm-8pm Monday through Friday and from 3pm to 7pm on Saturday and Sunday for each of the 5 apartments.

3. **Check all that apply:**

_____ One-to-one staffing will be provided, (explain):

_____ Increased direct support staff hours for first shift Monday through Friday reflect supports provided to individuals who do not regularly attend day programs.

X Staff will always be on-site when any individuals are present.

_____ The IDT's of some of the individuals served in this program have determined that they do not require that staff be present on site at all times.

_____ Managerial staff are shared between programs. Describe in detail.

X The agency employs an RN to provide general oversight, auditing and/or managerial functions related to the medical needs of the individuals served. See also **Section IV., C3**

_____ The site-specific manager and/or direct care staffing support at this program includes nurses, as follows (See also **Section IV., C1.**):

Registered Nurse(s) (RN)

Licensed Practical Nurse(s) (LPN), supervised by an RN or physician.

Minor variations in the approved staffing grid in **Section IV, B.**, may be implemented over time to address changes in the individuals' schedules. In these circumstances necessary staffing coverage for ongoing activities of daily living and to assure safety will be maintained at all times. The agency will assure that sufficient coverage is provided for doctor's appointments, emergencies, etc. The site manager/program supervisor shall provide sufficient oversight to assure that all shifts are staffed in accordance with the approved Program Description.

Staffing schedules may be adjusted in response to low census due to seasonal holidays and other absences. There will always be adequate staffing to maintain the level of supervision established for the individuals. If adjustments made in staffing results in cost fluctuations, these adjustments need to be reflected in the agency's expenditure report.

Supervised Apartment programs have a staff office located at the apartment site.

The agency has assured that all staff titles used in the Program Description, (i.e., Section IV, A & B., Residential Staff Schedule (grid) and the Position Listing), the Annex B, the Table of Organization, and Job Descriptions, correspond.

SECTION IV.

RESIDENTIAL STAFFING

VID #_SA

A. Staffing Grid

- Denote AM and PM (12 midnight is AM; 12 noon is PM)
- Whenever more than one staff person is on any given shift, indicate in-charge-person with an asterisk (*).
- Shifts that overlap days should be indicated on the day the shift begins

APT 1

Position:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1. Program Manager (8hrs/wk)			9am-5pm varied				
2. Lead Staff (40 hrs/wk)	3p-11pm*	3m-11pm*	3m-11pm*			3p-11pm*	3pm-11pm*
3. RS (24 hrs/wk)				3pm-11pm*		7am-3pm	7am-3pm
4. RS (30 hrs/wk)	11p-9am	11pm-9am	11pm-9am				
5. RS (36 hrs/wk)				11pm-9am	11pm-7am	11pm-7am	11pm-9am
6. RS (16hrs/wk)					3pm-11pm*	3pm-7pm	3pm-7pm
7. RS (15hrs/wk)	5pm-8pm	5pm-8pm	5pm-8pm	5pm-8pm	5pm-8pm		
8. RS (8hrs/wk)				7am-3pm varied			
Total hours 177	21	21	29	29	19	28	30

SECTION IV. RESIDENTIAL STAFFING

VID # SA

C. 1 Positions

	<u>Title:</u>	<u>Hours Worked:</u>
1.	Program Manager	8 (Varied)
2.	Lead Staff	40
3.	RS	24
4.	RS	30
5.	RS	36
6.	RS	16
7.	RS	15
8.	RS	8 (Varied)

Total: 177

C. 2 Substitutes

Total: 7

C. 3 Other Staff/Contracted Positions

List other staff or contracted positions required to meet the needs of the individuals in this residence.

1. This section shall identify all specialized or other staff providing services within the program, such as behaviorist, nurse, psychologist, substitutes, etc. If these services are subcontracted out to another agency, a copy of the subcontract shall be attached.

	<u>Title:</u>	<u>Hours per Week:</u>
1.	Behaviorist	1
2.	Community Connector	1
3.		
4.		
5.		

Total: 2

Grand Total: 186

SECTION V. ADDITIONAL PROVISIONS

Notices:

The Residential program operated under this contract shall meet or exceed the standards established in the Manual of Standards for Community Residences.

ADMISSION AND ELIGIBILITY

All referrals for admission must be from the Division of Developmental Disabilities. The Division:

- 1. Shall determine eligibility.**
- 2. Assumes responsibility for the placement of all persons declared eligible for service.**
- 3. Reserves the right to place and/or transfer residents under its charge, as appropriate, to and from all residential facilities operated by or under contract with the Division in accordance with Division regulations.**
- 4. Reserves the right to modify the profile of the program as Division priorities change.**

COMMUNITY RESIDENTIAL VACANCIES -(REQUIREMENTS CURRENTLY UNDER REVISION)

PROGRAM VEHICLE

The vehicle shall be available at all times. It shall be maintained in good working condition at all times. The State of New Jersey shall be named as co-insured in the vehicle insurance policy, if the vehicle was purchased with State funds. A copy of the indemnification document shall be available for review.

REPORTING REQUIREMENTS

If this is a cost reimbursement contract, the attendance report shall be submitted and certified electronically to the Consumer Services Reporting Website by the tenth of the month. Cumulative reports of expenditures are due ten days after the close of the quarterly report period.

If this is a fixed rate contract (or if you have been specifically asked to follow these instructions), an attendance report and State invoice shall be completed for each month of program operation and forwarded by the tenth of the month to the Division of Developmental Disabilities, Regional Assistant Director's Office, to the attention of your contract administrator. The contract administrator will be responsible for sending these reports to the Community Care Waiver Unit.

The agency will be responsible for compliance to all applicable Department of Human Services and Division of Developmental Disabilities Policies and Circulars.

PERSONNEL – ADMINISTRATIVE & RESIDENTIAL

The agency will advise the Division in writing of any changes in administrative and/or key residential personnel during the contract term. A job description with qualifications for all staff hired during the contract term must be attached.

MONITORING AND EVALUATION

The Division will provide monitoring and evaluation of all contracted services during the term of the contract through announced and unannounced visits. The Community Services case manager will review the services delivered in the residences to ensure that the program continues to meet individual needs. Other Department/Division Units including but not limited to Office of Licensing, Program Support, Program Development and Special Response Unit may monitor the program operation throughout the contract term.

GOALS AND OBJECTIVES

The purpose of this program is to implement the goals and objectives of the Plan of Care for each individual residing in the community residence. This shall include participation by the community residence staff at all IHP meetings. Residential staff are expected to actively participate in the IHP process by communicating with the case manager regularly, as well as maintaining contact with the individual's day program staff.

It is understood that all persons living in a Licensed Community Residence for the Developmentally Disabled under contract with the Division of Developmental Disabilities will be referred for placement by the Division of Developmental Disabilities. The actual number of individuals from State Facilities or Purchase of Care placements will be determined by the Division in keeping with the current goals of the Department of Human Services. It is also understood that no operating contract will be completed and signed until all of the individuals to be served in the project have been identified and accepted by the provider agency. The contract will require that the provider agency agrees to comply with all applicable federal, state and local laws, rules and regulations in the performance of the contract. The provider agency shall comply with all applicable policies and procedures issued by the Division of Developmental Disabilities. In addition, the program as proposed in this Program Description will be adjusted as necessary to address the specific needs of the individuals as they are identified.

The terms, descriptions and services set forth in this Annex A Program Description are accurate. It is understood that, once accepted by the Division, this Annex A Program Description is part of the contract.

Signature: _____

Print Name Above:

Title:

Agency:

Date: