

Home and Community-Based Services
In-Home Operations Waiver

Standards of Participation

Community-Based Adult Services Centers

An existing Adult Day Health Care (ADHC) center with an active unencumbered license may apply to the Department of Health Care Services (DHCS), Long-Term Care Division, In-Home Operation (IHO) Branch to become a Home and Community-Based Services (HCBS) Waiver provider. Upon meeting the criteria for enrollment, the licensed ADHC center will be designated as a “Community-Based Adult Services (CBAS) center.” This specific HCBS provider designation will afford CBAS centers the opportunity to deliver outpatient waiver services to participants of the IHO Waiver and the Nursing Facility/Acute Hospital (NF/AH) Waiver that choose to receive outpatient waiver services in a community setting. This HCBS provider designation may also apply to other programs that choose to amend their individual waivers to designate CBAS centers as an approved HCBS provider.

As a HCBS waiver provider, a CBAS center provides an outpatient home-like setting for the delivery of waiver services. CBAS centers: 1) shall meet all applicable licensing and program standards; 2) are subject to these HCBS waiver Standards of Participation (SOPs); 3) shall provide services in accordance with a participant’s primary care physician-signed Plan of Treatment (POT); and 4) shall adhere to the documentation, training, and quality assurance requirements identified in the Centers for Medicare and Medicaid Services (CMS)-approved IHO Waiver.

NOTE: “Primary care physician” may include physician assistant and nurse practitioner within their scope of practice and under the appropriate supervision of the physician.

A CBAS center may provide the following array of services, pursuant to a participant’s POT:

- Existing IHO Waiver services provided at the CBAS center:
 - Case management/coordination.
 - Habilitation services, including therapeutic activities.
 - Waiver personal care services (WPCS).
 - Family/Caregiver training.
 - Private duty nursing.
- CBAS center-only services:
 - Non-medical transportation between the CBAS center and the participant’s home.
 - A bundled service package provided for a minimum of a four-hour stay at the CBAS center.

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NOTE: For any given waiver participant, on any given day, the bundled service package OR individual waiver services may be provided when specified on the participant's POT and authorized by the IHO nurse. Both the bundled service package and individual waiver services may NOT be provided on the same day for the same participant.

As needed, a CBAS center's multidisciplinary team shall assess IHO or NF/AH Waiver participants, who, pursuant to their POT have requested that services be provided at the CBAS center. This assessment may result in an Individual Plan of Care (IPC) that details the specific services and their scope and duration to provide a framework for the provision of services at the CBAS center.

1. Legal Authority and Requirements.

CBAS centers shall be licensed as ADHC centers in accordance with current Health and Safety (H&S) Codes and shall provide services in accordance with applicable sections of the CCR, Title 22 under Division 5, Chapter 10 and with IHO and/or NF/AH Waiver documents.

CBAS centers shall be enrolled as Medi-Cal waiver providers and shall meet the standards specified in applicable sections of the CCR, Title 22 and the standards set forth in these SOPs.

If there is a change in adopted laws or regulations governing ADHC or CBAS centers, these SOPs will be amended and shall be applicable to all current and future CBAS center waiver providers.

2. Physical Plant and Health and Safety Requirements.

To ensure the health and safety of the waiver participants the physical plant of each CBAS center shall conform to the requirements of applicable sections of the CCR, Title 22 as described in part by the following:

- a. Physical accommodations – Designed, equipped and maintained to provide for a safe and healthful environment. Each CBAS center shall:
 - Comply with state and local building requirements and codes.
 - Be maintained in conformity with the regulations adopted by the State Fire Marshal.
 - Have a working, listed telephone number.
 - Have a working heating and cooling system.

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- Have adequate lighting.
 - Have appropriate water supply and plumbing.
- b. Space Requirements – Demonstrate all of the following, to include but not be limited to:
- Available space sufficient to accommodate both indoor and outdoor activities and for storage of equipment and supplies.
 - A multipurpose room large enough for all participants to get together for large group activities and for meals.
 - A secluded area that is set aside for participants who require bed rest and for privacy during medical treatments or social service interventions.
 - Appropriate office area(s).
- c. Maintenance and Housekeeping – Be clean, safe and in good repair at all times; maintenance shall include provisions for cleaning and repair services.
- d. Safety – Appropriate protective devices to guard against hazards by means of supervision, instruction and installation.
- e. Supplies – Maintain sufficient supplies for functional operation and for meeting the needs of the participants.
- f. Solid Waste – Provide for the storage and disposal of solid waste according to the standards set forth Title 22.
3. Organization and Administration – Be organized and staffed to carry out the service and other requirements specified in the IHO and NF/AH Waivers. Such organization shall include:
- a. An administrator or program director on duty at all times.
“On duty” means physically present in the CBAS center at all times during the center’s program hours in which participants are present. The CBAS center shall have a policy for coverage of the administrator/program director during times of his/her absence.
 - b. Sufficient supportive staff to conduct the CBAS center’s daily business in an orderly manner.
 - c. Financial and accounting records that fully disclose the disposition of all funds.
 - d. CBAS staffing that meet the individual professional requirements specified in relevant state laws and regulations and in these SOPs.

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- e. The maintenance of appropriate participant health records and personnel records.
4. Emergency Services – Maintain updated written procedures for dealing with emergency situations. Such procedures shall include, at a minimum all of the following:
- a. Use of the local 911 system.
 - b. Appropriately trained personnel; at a minimum, all direct care staff shall be trained in first aid and certified in basic life support.
 - c. Written permission from all CBAS center participants for transfer to and treatment by local hospitals or other treatment facilities as needed.
5. Grievance Procedures and Processing of Incident Reports.
- a. Written grievance process whereby participants and family/caregivers can report and receive feedback regarding CBAS center services.
 - b. All incidents shall be documented in writing that includes the nature of the incident and its resolution. Such documentation shall be available to appropriate DHCS staff at all times.
6. Civil Rights and Confidentiality – Adhere to all laws and regulations regarding civil rights and confidentiality of both participants and CBAS center staff. CBAS centers are subject to Federal and State laws regarding discrimination and abuse and the reporting of such.
7. CBAS Centers Providing IHO and NF/AH Waiver Services.

As a provider of waiver services, a CBAS center shall employ or contract for a variety of providers and render services as described in these SOPs. The individuals providing waiver services to IHO and/or NF/AH Waiver participants shall meet all licensing requirements as specified in the California Business and Professions (B&P) Code as well as these SOPs, as appropriate to the individual provider of services.

Professional nursing coverage of the CBAS center shall include Registered Nurse (RN) staffing at a ratio of one RN for every 40 participants. A half-time Licensed Vocational Nurse (LVN) shall be provided for every increment of 10 in average daily attendance exceeding 40 participants.

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There shall be at least one RN physically present in the CBAS center at all times during the center's program hours in which participants are present; however for short intervals an LVN may be physically present with the RN immediately available if needed. The CBAS center may replace the RN staff with LVNs as stated above with at least one RN physically present in the center at all times during the center's program hours in which participants are present.

The program aide/nurse assistant staffing shall be at a ratio of one program aide/nurse assistant on duty for up to 16 participants present in the building. Any number of participants up to the next 16 shall require an additional program aide/nurse assistant (for example, 17 participants require an additional program aide/nurse assistant).

The needs of the participants shall supersede the minimum staffing requirements specified in these SOPs. The CBAS center shall be responsible for increasing staffing levels if necessary to maintain the health and safety of all participants and to assure that services are provided to all participants according to their POT and the IPC when appropriate.

Appropriate documentation in the participant's health record according to current health record standards shall be completed by all CBAS center staff providing services.

a. Existing IHO Waiver services (additional information, including definitions and descriptions of these services may be found in the IHO and NF/AH Waiver documents and in the Medi-Cal Provider Manual):

a-1. Case Management/Coordination.

- Case management services are designed to assess the participant and determine their need for medical, psychosocial, social and other services, and to assist them in gaining access to those needed services, regardless of the funding source, to ensure the participant's health and safety and support of his/her home and community-based program. Case management services do not include the direct delivery of any service.
- Case managers coordinate and work with the participant, his/her legal representative or circle of support, and the primary care physician in developing goals and identifying a course of action to respond to the assessed needs of the participant, and in the development and updating of the participant's primary care physician-signed POT.

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- When provided by a CBAS center, case management services must be consistent with the participant's choice and interests, the primary care physician's orders, and the participant's waiver POT.
 - The POT shall identify the choices and interests of the participant, the participant's health care needs, services rendered to meet those needs, the providers of those services and the expected outcomes.
 - In the capacity of the participant's case manager, the CBAS center shall facilitate the collaboration and assessment with the participant at the frequency described in the POT for progress and outcomes. The reassessment and update of the POT shall be at least every six months.
 - When rendered by a CBAS center, case management services may be provided by a RN, LVN, social worker or other licensed or unlicensed staff who have been appropriately trained and are supervised by a RN, social worker, or other appropriate staff in accordance with applicable sections of the CCR, Title 22 at the CBAS center.
- a-2. **Habilitation Services, including Therapeutic Activities.**
- Habilitation services are designed to assist the participant in acquiring, retaining, and improving self-help, socialization, and adaptive skills necessary to reside successfully in the person's community.
 - "Therapeutic activities" means group or individual activities to enhance the social, physical, or cognitive functioning of the participant; and facilitated participation in group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation in scheduled activities.
 - When rendered by a CBAS center, habilitation services may be provided by a RN, LVN, social worker or other licensed or unlicensed staff who have been appropriately trained and are supervised by a RN, social worker, or other appropriate staff in accordance with applicable sections of the CCR, Title 22 at the CBAS center.
- a-3. **Waiver Personal Care Services (WPCS).**
- WPCS are designed to assist the participant in performing and gaining independence in his/her activities of daily living, preventing social isolation and remaining in his/her residence and continuing to be part of the community. The CBAS center may provide WPCS to those waiver participants who have chosen to receive their WPCS benefit at a CBAS center only or in conjunction with those services being

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provided in the home through the In-Home Supportive Services program or other programs/services.

- When rendered by a CBAS center, WPCS may be provided by a program aide, nurse assistant or other licensed or unlicensed staff who have been appropriately trained and are supervised by the CBAS center.
- The program aide/nurse assistant staff shall be on duty at all times. “On duty” means performing the duties of the program aide/nurse assistant at all times during the CBAS center’s program hours in which participants are present. Such duties may include off-site responsibilities, such as during community activities.

a-4. Family/Caregiver Training.

- Family/caregiver training services are training and counseling for families and/or unlicensed caregivers of waiver participants. Training for family members includes instruction about medical treatment, use of durable medical equipment, and how to provide medical care services and specialized dietary plans for the participant in the absence of the paid care providers. All family training must be included in the participant’s primary physician-signed POT.
- Unlicensed caregivers should be evaluated to determine specific training needs that will meet the participant’s unique needs and the services to be provided. Family/caregiver training services should also assist the family, participant, and/or circle of support in ensuring the unlicensed caregiver has the necessary skills, competencies and qualifications to provide those services. All unlicensed caregiver training must be included in the participant’s primary care physician-signed POT.
- When provided by a CBAS center, family/caregiver training services may be provided by a RN, Registered Dietitian, a social worker, or other licensed or certified health care professional. To render family/caregiver training the CBAS center must document the training that is needed and the process to meet that need, and submit the documentation with a request for training to the DHCS RN. The DHCS RN will review the documentation and authorize the service when medically necessary to ensure the health and safety of the waiver participant. Upon completion of the training, the CBAS center will submit documentation of the training results to the DHCS RN.

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- a-5. Private Duty Nursing, including both RN and LVN services -- the professional nursing staff shall be on duty at all times, as specified elsewhere in these SOPs.
- b. CBAS Center-Only Services:
- b-1. Non-Medical Transportation between the CBAS center and the participant's home.
- Provided only as needed; participants shall be encouraged to walk and use other means of transportation whenever possible. Family and caregivers shall be encouraged to provide transportation as possible and appropriate.
 - May be provided either by the CBAS center or a contracted service.
 - Volunteers may be utilized to provide transportation.
 - Vehicles used for the transport of participants shall meet the requirements specified in Title 22.
 - Vehicle operators shall maintain good driving records; have a current vehicle operator's license appropriate to the vehicle being driven from the California Department of Motor Vehicles; and shall meet the requirements specified in the California Motor Vehicle Code.
 - Transportation shall be scheduled such that one-way transit for individual participants does not exceed one hour unless both the participant and the participant's primary care physician agree in writing.
 - The CBAS center shall immediately follow-up on any participant that does not appear for scheduled transportation to determine the cause and if the participant is well and safe.
- b-2. A bundled service package provided to a participant when authorized on the participant's POT.

NOTE: For any given waiver participant, on any given day, the bundled service package OR individual waiver services may be provided when specified on the participant's POT and authorized by the IHO nurse. Both the bundled service package and individual waiver services may NOT be provided on the same day for the same participant.

The bundled service package must provide the specific services that are authorized on a participant's POT. Descriptions of relevant services as specified in the above discussion pertain to the services in this list as well. If not described above, the service authorized on the participant's POT as

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part of the bundled package shall be provided according to the relevant sections in the CCR, Title 22.

- Professional nursing.
- Therapeutic activities.
- Social services.
- Personal care services.
- One meal per day.
- Physical therapy.
- Occupational therapy.
- Speech therapy.
- Mental health services.
- Registered dietitian services.
- Transportation to and from the CBAS center and the participant's place of residence.

8. Documentation.

- a. Waiver services provided in a CBAS center shall require prior authorization and reauthorization.
 - A Treatment Authorization Request (TAR) shall be prepared by the CBAS center and submitted to DHCS for each waiver participant seeking CBAS services. TARs for services for each waiver participant must be supported by the primary care physician-signed POT.
 - The initial TAR shall also include a copy of the CBAS center's current ADHC license.
 - Reauthorization TARs are required every six months and services shall continue to be supported by the primary care physician-signed POT.
- b. Each CBAS center shall maintain a health record for each waiver participant receiving waiver services that shall be available to appropriate DHCS staff for any scheduled or unscheduled visits.
 - This health record shall include documentation of all services provided, current POTs, IPCs as appropriate, referral requests and outcomes of said referral(s).
 - All CBAS center documentation shall be maintained in compliance with applicable Federal and State laws and Medi-Cal provider SOPs, and shall be retained by the CBAS center for three years.
 - The CBAS center shall also maintain records to document that the requirements of these SOPs have been met.

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9. Quality Control/Quality Assurance

Quality control/quality assurance reviews will be in accordance with the Long-Term Care Division/IHO Branch Quality Assurance Plan, as described in the CMS approved IHO and NF/AH Waivers.

10. Training Requirements

As a licensed ADHC center and a waiver service provider the CBAS center shall ensure that all CBAS center staff receives training regarding care appropriate for each waiver participant's diagnose and their individual care needs. Provision of training to CBAS staff is a requirement to be enrolled as a waiver provider and is not separately reimbursed by either Medi-Cal or the IHO or NF/AH Waiver.

- a. All CBAS centers shall maintain policies and procedures for the provision of supportive health care services to waiver participants, including those participants with special needs.
- b. Training of CBAS center staff shall include an initial orientation for new staff; review of all updated policies and procedures; hands-on instruction for new equipment and procedures; and regular updates on State and Federal requirements, such as abuse reporting and fire safety.
- c. Training shall be conducted and documented on a quarterly basis and shall include supporting documentation on the information taught, attendees, and the qualifications of the instructor(s).