

*Behavioral
Supervised
Living
Requirements
5. 1.18*

*Supporting a Better
Tomorrow...
One Person at a Time*



Definition

- Intended to support people who:
 - Have high frequency disruptive behaviors that may pose threat of harm to self or others
 - Have destructive behaviors that may cause harm or injury to self or others

Definition

- Intended to support people who:
 - Have committed acts that may or have caused great emotional harm to self or others (e.g. sexual assault)
 - Are unable to control behaviors
 - Impede day-to-day functioning at home/in community living/day services

Definition

- Intended to support people who:
 - Engage in self-injurious behavior
 - Internal and/or external stimuli
 - Require 1:1 staffing to ensure health and safety of the person and others

Definition

- Documented history
- Likely to reoccur without supervision and structure in his/her living arrangement

DMH Specialized Needs Committee

- Makes determination of appropriateness for Behavioral Supervised Living
- Registered Nurse, Behavior Consultant, Advocate, BIDD staff person

DMH Specialized Needs Committee

- Will meet Mondays at 2:00
- Required documentation submitted at one time to the Support Coordinator who submits it to BIDD within 5 days via LTSS
 - Information will not be accepted in pieces
- Will review documentation submitted to BIDD on or before Wednesday of the prior week
- BIDD staff sends documentation to Specialized Needs Committee for review

Required Documentation/Responsible Party

- Someone already in Supervised Living
- Someone moving from home
- Someone moving from an institution

Someone already Receiving Supervised Living

Responsible Party: Supervised Living provider

- Detailed description of behavior to include:
 - Will it reoccur without increased supervision
 - Intervention of additional staff was necessary to secure health and safety of person and/or others
- Actions/interventions that have been tried and failed
- Other services that were requested/received
- Serious Incident reports
- List of all medications
- Service Notes for the past 3 months *(if the Supervised Living provider provides other services to the person, send those also)*
- Documentation from medical providers/specialists
- Other relevant documentation

Someone already Receiving Supervised Living

Responsible Party: Support Coordinator

- Plan of Services and Supports
- Other relevant documentation

Someone Moving from Home

Responsible Party: Support Coordinator/Family

- Detailed description of behavior including the need for increased supervision to secure the health and welfare of the person and/or others
 - Information from people who have direct contact with the person (family, providers, etc.)
- Actions/interventions that have been tried and failed
- Other services requested/received
- Service Notes from all providers for the past 3 months
Copy of the PSS

Someone Moving from Home

Responsible Party: Family

- List of all medications
- Documentation from medical providers/specialists
- Other relevant documentation

Someone Moving from an Institution

Responsible Party: Transition Coordinator

- A Detailed description of behavior to include:
 - Will it reoccur without increased supervision
 - Intervention of additional staff is necessary to secure health and safety of person and/or others
- Actions/interventions that have been tried and failed
- Evidence that higher staffing needed
- Current history and physical
- Annual psychological eval
- Functional Behavior Assessment

Someone Moving from an Institution

Responsible Party: Transition Coordinator

- Written Behavior Support Plans
- Progress Notes for the past 6 months
- Behavior Reports for the past 6 months
- Data about targeted behavior(s) for the past 6 months
- Complete list of all medication

Staff Requirements

- Team that consists of:
 - Licensed psychologist (to approve FBA and Behavior Support Plan)
 - Behavior Consultant (to conduct FBA and write Behavior Support Plan)
 - Behavior Interventionist to assist in monitoring and implementation of the BSP
 - Direct Support Staff with required specialized training

Staff Training for Someone Moving from Home or an Institution

- Certification in Mandt © or another nationally recognized and DMH approved program BEFORE beginning to work with the person
- Person-specific training BEFORE the person moves into the home

Staff Training for Someone Already Living in the Home

- Certification in Mandt © or another nationally recognized and DMH approved program BEFORE beginning to work with the person
- If the person is already in the Supervised Living home, the Behavior Consultant/Interventionist must re-train staff when Behavior Support Plan developed
- If the situation is immediate and extreme, and Behavioral Supervised Living has not been approved, contact Support Coordinator for referral to Crisis Support/ Crisis Intervention

Documentation of Staff Training

- Must be in the PERSON's record
 - Signed and dated by staff receiving training and Behavior Consultant/ Interventionist providing the training
- FBA must begin upon notice of approval from the Support Coordinator for the person to receive Behavioral Supervised Living
 - Must be completed within 15 days of approval
- Behavior Support Plan must be completed within 15 days of FBA completion

Additional Documentation Requirements

- This documentation is IN ADDITION to the requirements in the DMH Record Guide:
 - Service Notes
 - Must reflect person and staff's activities throughout the day while the person is awake and in the home or other day setting
 - Entries every 2 hours for waking hours
 - Entries every 4 hours while sleeping
 - Must indicate when/how long a person receives 1:1 staffing

Additional Documentation Requirements

- Data collection
 - Collected as directed by the Behavior Consultant
- Quarterly Review Reports
 - Supports provided and progress made
 - Medication changes
 - Target behavior(s)
 - Behavior Support Plan implementation/revisions
 - Narrative about baseline data, current quarter, and changes from previous quarter

Responsibilities for Services Provided Away from the Home

- Must send staff to the person's day program to ensure continuity of staff and interventions/support provided
- Behavior Consultant/Interventionist must train day program staff how to implement the Behavior Support Plan, even if provider of day services is different than provider of living services
- Provider must ensure the Behavior Support Plan is implemented in all settings

Responsibilities for Services Provided Away from the Home

- Behavioral Supervised Living staff can be faded from the day setting when:
 - Day setting staff is competent in implementation of the Behavior Support Plan
 - Identified behaviors begin to mitigate
- Must retrain staff or revise Behavior Support Plan if behaviors return/worsen

Ongoing Review for Need of Behavioral Supervised Living

- DMH Specialized Needs Committee reviews required documentation annually to determine ongoing need for the service
- Required documentation must be submitted to the person's Support Coordinator within 90 days of the end of the person's certification period
- Support Coordinator submits to Specialized Needs Committee via BIDD
- All required documentation must be sent as a whole to the Support Coordinator; partial submissions will not be accepted
- The Support Coordinator will submit the documentation to the DMH Specialized Needs Committee within five (5) days of receipt of all required documentation.

Required Documentation for Ongoing Review of Need for Behavioral Supervised Living

- Service Notes – previous 3 months
- Serious Incident Reports – previous 6 months
- Behavior Reports – previous 6 months
- Functional Behavior Assessment
- Behavior Support Plan
- Quarterly Reports – previous 2 quarters
- Any revisions to Behavior Support Plan
- Documentation of required staff training (both nationally recognized and person-specific)

Other Behavior Services

- People who receive Behavioral Supervised Living cannot also receive Behavior Support, Crisis Intervention or Crisis Support services
- Goal is for the provider's Behavioral Supervised Living Team to resolve/mitigate issues/behaviors where the person lives
- Alternate living arrangements may be used for short term purposes

Other Behavior Services

- If the issue is determined to be a medication issue which requires medical intervention, Crisis Support may be considered
- There must be adequate supporting documentation and Crisis Support must be prior approved by BIDD

Conclusion

- *The goal is for the provider's Behavioral Supervised Living Team to resolve/ mitigate issues/behaviors (as described in Section I) where the person lives and in their daily activities*
- *If a provider continually refers people receiving Behavioral Supervised Living to Crisis Support, the provider's ability to render the service may be suspended*

