

**TCRC-Supported Living Services Model**  
**Proposed Guidelines to TCRC Supported Living Services**

<b>Model Element Proposed Guideline</b>	<b>Description</b>
Referral Criteria	<p><b>The following considerations are to be utilized by the Planning Team as Criteria for Referral for Supported Living Services:</b></p> <ol style="list-style-type: none"> <li>1. Financial capability <sup>1, 2</sup></li> <li>2. Availability of Housing <sup>3</sup></li> <li>3. Person demonstrates ability to participate willingly in their own support <sup>4, 5</sup></li> <li>4. Person communicates own choices and decisions <sup>6, 7, 8</sup></li> </ol> <p>Note: Residential Level of Care Assessment as well as the TCRC SLS Budget will be used for new referrals to SLS.</p>
Definition of Service and Terms (including utilization of TH and PS)	<ol style="list-style-type: none"> <li>1. Providers will use a sample e-calendar to propose an individual's schedule. <b>The Planning Team will consider and approve, as appropriate, time that the individual desires to spend with family, friends, or on their own without paid support.</b> <del>There will be times when a person does not have paid supports.</del> <sup>9</sup></li> <li>2. The Guide for Service Development for Selection of Service Codes for Supported Living Services will be utilized to assign service codes, including those for shared services. (Title 17 language is referenced as a basis for determination of the service codes, Training and Habilitation (TH) and Personal Support (PS), for a person's day.) <sup>10</sup></li> <li>3. Standardized Supported Living Services contract to include PS, TH, PSB (overnight) (1, 2, 3). <sup>11, 12</sup></li> <li>4. An individual's progress will be monitored through the IPP process to determine when goals related to Training and Habilitation (TH) have been reached. <sup>13, 14</sup></li> <li>5. <b>Training and Habilitation (TH) goals will be reviewed by the Planning Team for progress, not to exceed one (1) year for the review. New TH goals, if appropriate may be developed when prior TH goals are met, acquisition of skills has peaked, or no significant progress has been made during the agreed upon time line. The Planning Team may amend the IPP to:</b> <del>If two quarterly report periods do not reflect reasonable progress toward goals funded under Training and Habilitation Services, the TCRC planning team may amend the IPP and authorize service hours to:</del> <sup>15, 16</sup>            modify TH hours or            replace all or some TH hours with natural supports or            fund hours under Personal Support.         </li> </ol>
Shared Supports (roommates, resources and staff)	<ol style="list-style-type: none"> <li>1. Every opportunity will be taken to share resources. {AB 104 4689(g)} <sup>17</sup>            shared dwelling            shared staff            shared other resources as available</li> <li>2. <b>Shared housing is encouraged, but not required, for the purposes of cost effectiveness if the residence has additional bedrooms.</b> <sup>18</sup>  <del>Every individual will live with a housemate for the purposes of cost effectiveness if the residence has additional bedrooms.</del></li> <li>3. Every individual will have the option of a private bedroom.</li> </ol>
IHSS	<ol style="list-style-type: none"> <li>1. Providers will demonstrate due diligence in accessing IHSS through evidence of application, acceptance and appeals of all denials. <sup>19, 20</sup></li> <li>2. Upon referral to IHSS, persons served will provide consent for regional center to release information to IHSS.</li> <li>3. Providers will communicate with TCRC through a standard electronic format regarding acceptance/denial.</li> <li>4. TCRC will utilize a third party advocate to support applications, appeal IHSS decisions and provide training for SCs and providers.</li> </ol>