



## **Adult Foster Care Scope of Services**

### **Program Philosophy**

It is the philosophy of CENTRO to assist individuals and families seeking to achieve self-sufficiency build purposeful lives through our unique mix of comprehensive integrated services, exceptional care, and an unequalled cultural and linguistic competence.

### **Purpose**

The information detailed by CENTRO Adult Foster Care is to be shared with AFC members, caregivers, referral sources, payers and funding sources and on our website.

#### **1. Program Description:**

CENTRO's Adult Foster Care Program provides assistance to adults 16 years or older who, because of illness, weakness, disability, or advanced age, cannot live safely at home alone. This program is designed for those who require a significant amount of daily assistance.

As an AFC client, persons served will live in either semi-independent or supported living environments with a trained Caregiver, who can be a relative of the person served or an unrelated, supportive person associated with the member served. The Caregiver will provide assistance, prompting, or supervision with bathing, dressing, toileting, transferring, ambulating/walking, and eating. The Caregiver will also provide transportation for medical appointments, support in the community, and provide companionship.

#### **2. Settings, Hours of Services and Days of Services:**

CENTRO is located at 11 Sycamore Street, Worcester. MA 01608. Office hours: M-F 9:00am-5:00pm., extended hours are offered dependent on AFC members or caregivers needs. On call services can be accessed 24 hours per day/365 days per year. Caregivers provide 24/7 care. In the event there is a non-medical leave of absent or medical leave of absent, caregiver is attended to and reports absence to the AFC Multidisciplinary Professional Team, (MDT). Client is able to be in suspension for 90 days without pay. After 90 days client will need to be discharged.



### **3. Frequency of Services:**

Members are served daily and a daily log completed by the caregiver documents the services. Monthly visits based on regulations and dependent on the level of care are made by a registered nurse and a case manager. Visits can be increased due to client's needs.

### **4. Payers, Fees, Referrals:**

Persons served are either self-referred or referred through Senior Whole Health Services, the state's Department of Developmental Services, community organizations, individuals, CENTRO's Outreach and Marketing department and internal family support services.

Payers allow CENTRO to bill and pay a stipend to caregivers based on a pay rate by level of care. Services are billed to Mass Health, Senior Whole Health, Fallon, Tufts, or Commonwealth Care Alliance, as determined by per person coverage and eligibility.

### **5. Program Goals:**

The overall goal of CENTRO's Adult Foster Care Program is to increase the quality of life through the provision of specialized daily assistance. Specific areas of focus may include:

- a. Activities of daily living, (ADL); fundamental personal-care tasks, performed daily as a part of individual's routine of self-care. ADL's include eating, toileting, dressing, bathing, transferring, and mobility/ambulation.
- b. Instrumental activities of daily living, (IADL); activities related to independent living that are incidental to the care of the member and that include household-management tasks, laundry, shopping, housekeeping, meal preparation and clean up, transportation, care and maintenance of wheelchairs and adaptive devices, medication management, and any paperwork required for receiving prescribed medications within the AFC setting, or any other medical need determined by the AFC provider.



## **6. Program Objectives:**

CENTRO's Adult Foster Care Program seeks to achieve the following specific objectives:

- a. Provide direct care to persons served in a qualified setting, as described in the Commonwealth of Massachusetts, MassHealth Adult Foster Care Program regulations (130 CMR 408.435) by a qualified AFC caregiver, as described in 130 CMR 408.434, who lives in the residence and who is selected, supervised, and paid by the AFC provider.
- b. AFC services must be recommended by a PCP and delivered by a qualified AFC caregiver under the supervision of the Multidisciplinary Professional Team, (MDT) in accordance with each person's served written plan of care. Direct care includes 24-hour supervision, daily assistance with ADLs and IADLs as defined in 130 CMR 408.402 and other personal care as needed.
- c. To provide nursing oversight by a registered nurse who meets the qualifications as described in 130 CMR 408.433(C) (2) (a), who is not related to the person served, and who is licensed in Massachusetts. Nursing oversight services are individualized to meet the needs of each person served in accordance with the person's served AFC plan of care.
- d. To Provide Care Management by a qualified AFC care manager, as described in 130 CMR 408.433(C)(3)(a), who is not related to the person served, and who is responsible for coordinating care and monitoring the needs of the person served in conjunction with the registered nurse.

## **7. Program Services:**

CENTRO's Adult Foster Care Program provides services that ensures all persons served and persons referred are evaluated and provided services and/or referred to primary and secondary service providers to meet their individual needs.



Specific areas that demonstrate a continuum of care are as follows:

**Nursing oversight by CENTRO's nurses include the following:**

- Completing or coordinating all applicable clinical assessments and clinical evaluations.
- Developing the member's interim and final AFC plan of care, with input from the member or responsible party, all members of the MDT, and other individuals designated by the member.
- Completing a semi-annual health status report for each member.
- Ensuring implementation of the AFC plan of care.
- Coordinating the delivery of AFC with any other health services or supportive services the member is receiving from MassHealth or other agencies or organizations, including but not limited to, visiting nurse services, therapy services, Department of Developmental Services (DDS) services, Department of Mental Health (DMH) services, and Massachusetts Rehabilitation Commission (MRC) services.
- Conducting on-site visits with each member at the qualified setting:
  - (a) for members authorized for level I service payment, conduct on-site visits every other month, or more often as the member's condition warrants, where such visits alternate with the required visits by the care manager to ensure the member receives one visit by the nurse or care manager every month, provided that, as determined by the MDT in accordance with 130 CMR 408.433(B), a Community Health Worker may conduct up to three non-consecutive on-site visits per 12-month period in place of the registered nurse; and
  - (b) for level II service payment, conduct on-site visits every month, or more often as the member's condition warrants, to ensure the member receives one visit by the nurse and one visit by the care manager every month, provided that, as determined by the MDT in accordance with 130 CMR 408.433(B), a Community Health Worker may conduct up to six non-consecutive on-site visits per 12-month period in place of the registered nurse;
- Completing a nursing progress note for each on-site visit or encounter and upon significant change.
- Monitoring each member's health status and documenting those findings in the member's medical record for each on-site visit or encounter, or more often as the member's condition warrants.
- Educating the member about hygiene and health concerns.
- Reporting changes in the member's condition to the member's PCP.



- Coordinating and implementing the PCP form and approval for AFC with the member, AFC caregiver, and AFC provider personnel.
- Developing, in conjunction with the MDT the AFC caregiver, and the member or responsible party, an emergency backup and personal care contingency plan for each member receiving AFC that includes an alternative plan for the member if the AFC caregiver is temporarily unable to provide care.
- Overseeing, monitoring, supporting, training, and evaluating AFC caregivers.

**Care Management performed by CENTRO's AFC care managers include the following:**

- Conducting initial and ongoing psychosocial evaluation of a member's appropriateness for AFC.
- Evaluating, supporting, and training AFC caregivers.
- Assisting with the development of the member's interim and final AFC plan of care with input from the member or responsible party, all members of the MDT, and other individuals designated by the member.
- Ensuring implementation of the AFC plan of care.
- Conducting on-site visits with each member at the qualified setting:
  - (a) for level I service payment, conduct on-site visits every other month, or more often as the member's condition warrants, where such visits alternate with the required visits by the nurse to ensure the member receives one visit by the nurse or care manager every month, provided that, as determined by the MDT in accordance with 130 CMR 408.433(B), a community health worker may conduct up to three non-consecutive on-site visits per 12-month period in place of the AFC care manager.
  - (b) for level II service payment, conduct on-site visits every month, or more often as the member's condition warrants, to ensure the member receives one visit by the nurse and one visit by the care manager every month, provided that, as determined by the MDT in accordance with 130 CMR 408.433(B), a community health worker may conduct up to six non-consecutive on-site visits per 12-month period in place of the AFC care manager.



- Assisting with coordination of AFC with any other health services or supportive services the member is receiving from MassHealth, a managed care organization, an accountable care organization or other agencies or organizations including, but not limited to, visiting nurse services, therapy services, Department of Developmental Services (DDS) services, Department of Mental Health (DMH) services, and Massachusetts Rehabilitation Commission (MRC) services.
- Completing a care manager progress note corresponding with each on-site visit or encounter, or more often as the member's condition warrants.
- Reporting changes in the member's condition to the member's AFC registered nurse;
- Assisting with making referrals to appropriate service providers if the member requires services other than those provided by the AFC provider.
- Conducting regular, periodic evaluations, at least annually, to ensure that each qualified setting where AFC is provided meets the requirements of 130 CMR 408.435.
- Providing timely assistance and responding to urgent or emergency needs of the member.
- Developing, in conjunction with the MDT, the AFC caregiver, and the member or responsible party, an emergency backup and personal care contingency plan for each member, receiving AFC that includes an alternative plan for the member if the AFC caregiver is temporarily unable to provide care.

### **Compliance Monitoring:**

The program director is responsible for ensuring proper training and implementation of the Scope of services. The program director will ensure, through quality review, individual supervision, group supervision, and for staff meetings that standards are maintained.