



Where it All Comes Together  
for a Better Future

## Admission to Day Habilitation

Habilitation Assistance Corporation's admissions process is designed to provide a comprehensive individual profile in order to determine the prospective candidate's current status, needs anticipated, and/or projected goals. Our goal is to be able to implement a working service plan to meet each individual's needs.

### **Admission Criteria**

Prospective candidates for admission into Habilitation Assistance Corporation's day habilitation programs, with the exception of those who reside in nursing facilities, must meet the following criteria (130 CMR 419-406):

1. Must have ID or DD as defined in 130 CMR 419.402 and certified by a PCP.

(130 CMR 419.402):

***Developmental Disability:** A severe, chronic disability that: (1) is attributable to other conditions found to be closely related to ID, apart from mental illness, which results in the impairment of general intellectual functioning or adaptive behavior similar to that of persons with ID, and which requires treatment or services similar to those required for such persons; (2) is manifested before a person reaches the age of 22; (3) is likely to continue indefinitely; and (4) results in substantial functional limitations in three or more of the following major areas: (a) self-care; (b) understanding and use of language; (c) learning; (d) mobility; (e) self-direction; or (f) capacity for independent living.*

***Intellectual Disability (ID):** Significantly sub-average intellectual functioning existing concurrently with and related to significant limitations in adaptive functioning. ID originates before 18 years of age. The meaning of ID is consistent with the standard contained in the 11<sup>th</sup> edition of the American Association on Intellectual and Developmental Disabilities' *Intellectual Disability: Definition, Classification, and Systems of Supports* (2010) or any subsequent publication.*

2. Must need DH to acquire, improve, or retain their maximum skill level and independent functioning.
3. Must have a personal physician that may be contacted for consultations, examinations, and emergencies and to authorize day habilitation services.
4. Within 12 months before admission, must have had a comprehensive evaluation by a referring provider that includes the following:
  - a. A written assessment of his or her social skills;
  - b. A written assessment of his or her medical, mental, functional, and developmental status; and
  - c. A home assessment that includes a family history, the person's developmental history, and a description of the member's adaptation to the home environment.
5. Must have a record of all past and present immunizations and diagnostic tests.
6. In order for a candidate residing in a nursing facility to be eligible for receipt of DH, DDS must have determined via a Level II PASRR that the candidate requires specialized services.

### **Pre-Admission Process**

1. All tours provided for prospective members will be documented and noted on the programs monthly management report.
2. Individual referrals are made to Habilitation Assistance Corporation by the Department of Developmental Services (DDS) or another referral source.
3. An admission packet, including but not limited to comprehensive evaluation, approval forms, program agreement, member handbook, request for input into DHSP and checklist will be forwarded to the referring source for completion.
4. Upon receiving the completed admission packet and comprehensive evaluation, the Program Director, Program Coordinator (if applicable) and Program Nurse will review the information. If further information is necessary, it will be requested at that time.
5. A date may be arranged either prior to or following application for a program tour and evaluation to deem if the individual is an appropriate candidate.

6. If all interested parties agree that the prospective candidate is appropriate, a tentative start date will be determined, and the interested parties will be notified. The Program Director will file the necessary information to arrange for transportation services if available.
7. If the individual is deemed inappropriate or ineligible for services, the Executive Director, the referring source, and the individual and the parent/guardian will be notified in writing within two weeks of the decision. Ineligible applicant records will remain for a period of six (6) months. During this six-month period, a re-evaluation of both the individual's record and the program may be completed by the intake team to identify changes that may allow reconsideration for admissions if appropriate.

### **Admission Procedure**

1. The member's transition into the access center is determined on an individual basis. Within five days of admission to the program, the member will receive New Member Orientation. This orientation will introduce the member to personnel, policies and procedures, and his/her rights as a member of Habilitation Assistance Corporation. At this time a case manager will be assigned.
2. Within the first five days after admission, member severity profile/clinical assessment will be initiated. An Interim Day Habilitation Support Plan (DHSP) will also be developed by the Interdisciplinary Team outlining a temporary schedule of treatment and activities until the final DHSP is completed. Data Sheets will be developed, and monthly reviews of interim data will be completed.
3. The first thirty (30) days is a period of assessment to determine permanent placement. If, after this thirty-day period, the member is deemed inappropriate for services, all interested parties will be notified by phone/meeting and the referring source, the individual and the parent/guardian will be notified in writing by the Interdisciplinary Team, stating reasons and recommendations. If the program can adequately meet the needs of the member and participation will continue, a request for input into DHSP will be sent to the guardian and/or other interested party.
4. Within 45 business days of admission, the Service Needs Assessment (SNA) will be completed. The SNA determines a member's level of functioning, needs, and strengths, and makes specific recommendations for day habilitation services to address identified need areas.  
The SNA is a compilation of evaluations by qualified professionals that determine a member's level of functioning, needs and strengths, and makes specific recommendations for day habilitation to address acquisition, improvement, or maintenance of identified needs. It (1) assesses each of the following need areas: self-help skills, communication skills, independent living skills, affective development skills, social development skills, behavioral development skills, and wellness; (2) identifies which need areas will be addressed in the DHSP; and (3) is completed every two years thereafter unless a significant change in the member's condition occurs. Significant change is defined as a major change in the member's status that (1) impacts more than one area of the member's health status; and (2) requires the professional interdisciplinary team's review or revision of the DHSP.
5. Also within 45 business days of admission the final DHSP and final severity profile/clinical assessment will be completed.

The DHSP is a written plan of care for each member that sets forth realistic and measurable behaviorally based goals that prescribe an integrated program of individually designed activities and/or therapies necessary to achieve these goals. The objective of the plan is to help the member reach his or her optimal level of physical, cognitive, psychosocial, occupational capabilities, and wellness. The final DHSP describes each training program, measurable goals, and objectives that address the need areas identified in the SNA. The DHSP is designed in a manner that integrates the various activities, tasks, and, if appropriate, therapies recommended to meet the member's areas of need. The final DHSP includes, but is not limited to, the following:

- (1) a medical plan of care;
- (2) a service plan coversheet that outlines the development of the member's DHSP, based on the recommendations from the SNA;
- (3) goals and objectives that are written in behavioral and measurable terms. (a) Goals must: 1. be written without the use of ambiguous action verbs; 2. provide for clear means for establishing attainment of the goal within the established time frames. (b) Objectives must address specific skill acquisition and retention as it relates to a goal and must: 1. be written without the use of ambiguous action verbs; 2. measure only one observable behavior; and 3. use performance and stability criterion. DHSP approval forms will be sent to the primary care physician and guardian if applicable/necessary.

At the day/date of DHSP, the severity profile will be reviewed/updated and finalized (redated to coincide with the DHSP date) and forwarded to Billing department.

6. From the DHSP, a Monthly Data sheet will be developed for each DHSP objective. All data is due to the Case Manager on the first of the month for the previous month. The Case Manager will compile the data, review the member's treatment, goals and objectives goals monthly and inform the staff, using staff meetings, of any significant changes in the member's status by the 15<sup>th</sup> of the month for the previous month.
7. The Interdisciplinary Team will conduct, at least every six months, a review of the member's overall progress. Semi-annual data will be processed as follows. For the month that the semi-annual review is due, all of the previous monthly data will be collected and compiled through the end of the previous month. Semi-Annual report is due on the date of the 6-month period to the date of the DHSP Plan of Care. A copy of this report is included in the member's record. If indicated by the review, the DHSP and DDAS will be reformulated.

Rev: 6-2021  
Est: 12/87