

PROCEDURE MANUAL – SELF-DETERMINATION PROGRAM

SUBJECT		SD Admissions/Orientation/Oversight/ Budget		PROCEDURE NO	05PR001-E02
REFERS TO POLICY		05-001 Admissions-Transitions. 05-079 Self Determination Participant Staff Training		SECTION	SERVICES
EFFECTIVE	REVIEWED	REVISED DATES	10-05-06, 07-09-08, 08-29-12, 08-18-14, 07-24-17, 10/11/17, 11/5/18, 08-05-20, 11-04-21		
01-01-06	11-04-21				
POLICIES REFERENCED		05-079 Participant Staff Training			
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-001.038 SD Application 05-020.B02 SD Authorization for Emergency Services 05-031.005 SD File Review 05-002.004 TARC Self-Determination Agreement 05-022.005 Self-Determination Travel Log 05-032.003 Recipient Parent Living with Statement 05-075.001 TARC Self-Determination Shared Living Agreement 05-079.001 Emergency Preparedness			

PROCEDURE:

1. Admissions are determined by the Self-determination (SD) Division. The Self-determination staff will meet with the applicant and individuals in their circle of support once the [05-001.038 SD Application](#) has been received.
2. After completion of a Self-Determination application packet and introductory meeting, the Self-determination Division will review and determine if the applicant’s needs can be appropriately met by the program. If the applicant is seeking a Shared Living Residential placement, the KDADS Request for Shared Living Review Form must be completed as well. For Shared Living Applicants, Self Determination Program Coordinators will assist in completing the Shared Living Home Visit Review Tool. At this point, all applicable releases of information and background screening documentation will be completed. The information provided from the completion of the Review Tool will assist in directing the compilation of all additional information.
3. The Self-determination Division will notify applicant within 10 business days of the decision. If Shared Living has been requested, a decision cannot be made prior to the approval from KDADS.
4. When the individual has been approved for Self-determination, including Shared Living, there will be an orientation process. During orientation, the participant will review with staff the Self-determination notebook which contains all applicable forms and documentation.
5. The process and responsibilities of Self-determination will be outlined with the Individual, the individual's guardian when applicable, the Personal Administrator and Targeted Case Manager. Except for the Targeted Case Manager, all parties will sign the Self- Determination Agreement or Self Determination Shared Living Agreement, including any necessary addenda as required.
6. All Self Determination Participants, including those who reside with a Shared Living Contractor, shall have an emergency placement plan in place and such plan shall be incorporated into the Participant’s Person- Centered Support Plan.
7. The Self-determination staff will provide on-going training and assistance to Personal Administrator, Person Supported and Guardian as needed to ensure compliance with Self-determination Agreement; including on-site visits with participants to ensure services are being provided.

8. Self Determination staff will develop a budget annually with participants and identify needed supports and program costs. The budget will include an administrative fee payable to TARC, Inc. The amount of the administrative fee shall be set by the Executive Director and Finance Director and reviewed by the TARC Budget and Finance Committee.
9. Self Determination Program Coordinators will provide a copy of the completed budget to the SD Payroll Billing Coordinator and Personal Administrator and Guardian. Budgets that are established with deficit spending will be reviewed monthly by the assigned SD Program Coordinator and Payroll/Billing Coordinator.
10. Any mileage or travel reimbursements provided for in the Budget will be recorded in Sandata. All other non-staff related expenses that are provided for in the Participant Budget shall be consistent with the **TARC Self-Determination Reimbursement Guide**.
11. Self-determination staff will review Medicaid and time documentation bi-monthly.
12. Self-determination staff will maintain records of training requisitions for each Participant's employees, records of attendance to ensure compliance with State and TARC training requirements. Employees who are not in compliance cannot provide paid direct supports until training requirements have been successfully met.
13. Self-determination Participants/Guardians and Personal Administrators will receive a Satisfaction Survey, annually.

PROCEDURE MANUAL – SELF-DETERMINATION PROGRAM

SUBJECT		SD Case Records Maintenance		PROCEDURE NO	05PR031-E02
REFERS TO POLICY		05-031 Case Records		SECTION	SERVICES
EFFECTIVE	REVIEWED	REVISED DATES	10-25-06, 07-09-08, 08-29-12, 12-19-16;10-02-18; 11-04-21		
01-01-06	11-04-21				
POLICIES REFERENCED					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-031.005 SD File Review			

PROCEDURE:

1. Records will be maintained electronically, and some documentation will also be maintained in paper form.
2. Each file will be labeled with the name of the Participant.
3. The files are located in the Self Determination TEAMS Files and documents are maintained by year created. The files are organized as follows:
 - a. Annual Releases
 - b. BASIS
 - c. BMC
 - d. Budgets
 - e. ISP
 - f. MARs
 - g. Medical
 - h. PCSP-BSP
 - i. Requisitions
 - j. Shared Living Documents (if applicable)
4. All files will be reviewed quarterly and retained in accordance with TARC policy [05-031 Case Records](#).

SUBJECT		Person Centered Services/ Compliance with HCBS Settings Final Rule		POLICY NO	05-074
EFFECTIVE	REVIEWED	REVISED DATES	09-24-19,12-27-19 ,02-19-20,08-07-20, 10-28-20, 02-04-21, 5-26-21, 10-14-21		
01-09-2017	11-04-21				
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS					

POLICY: *All services delivered by TARC, Inc. shall adhere to the Individual’s Person-Centered Support Plan and shall ensure that the Individual is provided the opportunity to be integrated in his/her community.*

GUIDELINES:

1. TARC will provide services in a setting that is integrated in the community and supports access to the greater community. The only residential services offered by TARC are through the Self-Determination. Day Services **are not** offered in Residential Settings and Residential Services **are not** offered in Day Service settings, including community employment sites.
2. All individuals receiving services shall be given options from which to select where they receive services, and those options shall include settings that are not specific to individuals with disabilities. The Person- Centered Support Plan (PCSP) shall reflect the options that were offered based upon the individual’s needs, preferences, and resources available.
3. Participants shall be given the opportunity to supply suggestions for both center and community activity options. Monthly activity calendars are in the communal program areas at TARC Randolph and TARC Industries. Self-Determination Participants shall have community activity calendars in their residences and all-day services are offered in the community and are not center based. Support will be provided to ensure Persons Supported have the knowledge of activities available and ability to engage in desired activities.
4. No individuals taking part in TARC Services will be required to receive medical, behavioral, and therapeutic services on site at TARC. However, TARC Avenues Day Services offers the services of a registered nurse on-site. Behavioral supports will be offered consistent with the individual’s Person-Centered Support Plan.
5. All individuals in services who are interested in pursuing employment shall be supported in the process as they look for, obtain, and maintain employment. Employment support services shall be provided in environments that promote inclusion in the workplace and that do not isolate individuals with disabilities from other workers. TARC will ensure that all community job placement sites (enclaves and direct placement) meet the accessibility needs of the individual, provide privacy for personal care needs, and offer secure location for personal belongings. If community job sites are in gated or secured area, Persons Supported will be educated as to how they can exit property as desired. Persons Supported will be offered the opportunity to take part in deciding their work schedule.
6. Individuals receiving Employment Services at TARC Industries and will be afforded the opportunity to select non-work activities at that site. Non-work activities *may* be available at community job sites if approved by the community employer. Work and non-work activities will be offered to match an Individual’s skills, abilities, and desires consistent with their Person- Centered Support Plan.
7. All services shall be delivered in a manner that optimizes individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact. All services offered will be done so in a manner that respect’s an individual’s right to privacy, dignity and respect, and freedom from coercion and restraint.

- a. Persons Supported shall always be given access to their food and personal belongings unless otherwise provided in their PCSP. Persons Supported will have access to their personal belongings while at TARC and have the right to secure their personal belongings in a locked unit if desired, and access them upon request, unless otherwise specified in their PCSP
 - b. Persons Supported shall have the opportunity to select with whom they share meals and at what time, except as limited by their work environment or PCSP.
 - c. Persons Supported will be given access to email, internet and telephone without restrictions unless otherwise specified in their PCSP.
 - d. Persons Supported are permitted to have visitors while in TARC services but visitors may not have access to all areas of the buildings to protect the privacy and security of others. Other access restrictions may be imposed to ensure compliance with certifications (such as NAID) or business operations of TARC and community employers.
 - e. Persons Supported shall be able to “come and go” from DAY, Residential, and Employment Services, unless otherwise provided in their Person- Centered Support Plan.
 - f. Persons Supported can attend community activities and services whenever they choose, unless otherwise provided in their Person- Centered Support Plan.
 - g. Persons Supported will receive services at sites which do not have barriers to access unless such access is restricted pursuant to the provisions of the Person- Centered Support Plan.
8. Except as otherwise specified in their PCSPs, Individuals who receive Shared Living Residential Services through the TARC Self-Determination program will have:
- a. the right to take part in all decisions regarding their furnishings, décor, and location of residence. Shared living **will not** be offered at locations in a building on the grounds of or immediately adjacent to a public institution.
 - b. the Shared Living Agreement will specify the rights and responsibilities of the parties to the Shared Living Agreement.
 - c. access to the home that can be locked by the person-served, with only proper staff having keys to the door, and only with the permission of the Person Supported. Staff will be required to knock for access to the home and personal space such as the bedroom and bathroom unless otherwise provided in the PCSP.
 - d. the ability to have privacy when they choose and the ability to exclude others from entering their private space, including their bathroom and bedroom. This shall include the ability to lock their door unless otherwise specified in their PCSP.
 - e. input into setting their daily routines for hygiene, personal care, recreation, meals, and the choice of what food to eat.
 - f. access to laundry facility, the ability to choose to do their own laundry and support as needed for doing it.
 - g. access to all common areas of the home and the ability to come and go from their home as desired.
 - h. access to the kitchen and use of kitchen appliances.
 - i. the right to have visitors of their choosing at any time.
 - j. access and information related to community activities and events and support to access community activities. Staff will update information regularly regarding community activities.
 - k. No residential services will be provided in a setting with any more than double occupancy bedrooms and each Person Supported will have the right to choose their roommate if sharing a bedroom.
9. All Shared Living Residential sites must be physically accessible to the individual supported at the site. Accommodations must be made to offer the supports needed by the individual to maximize their independence. All Shared Living sites will not exclusively support individuals with disabilities.
10. All Shared Living Residential sites will not exclusively serve individuals with disabilities. The Shared Living program provides a community living setting with a host family. All sites are in private homes.

SUBJECT		Abuse, Neglect and/or Exploitation / External and Internal Investigations		POLICY NO	05-010
EFFECTIVE	REVIEWED	REVISED DATES	02-04-97, 11-01-01, 03-20-02, 04-15-03, 04-30-04, 08-05-05, 08-22-08, 7-19-10, 11-05-12, 08-18-14, 10-17-16, 10-16-17, 11-20-19, 08-05-20, 11-04-21		
12-13-78	11-04-21				
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-010.001 ANE Report Form 05-010.002 ANE Acknowledgement Form 05-010.003 Information Report 05-020.001 Incident-Injury Report 06-040.001 CDDO Critical Incident Report			

POLICY: All TARC personnel are mandated reporters. TARC will report all incidents of suspected abuse/neglect/exploitation (ANE) as required by Kansas law. TARC will post the appropriate contacts for notification of alleged abuse, neglect, and exploitation in each building.

GUIDELINES:

1. All staff including staff of Persons Supported in the Self-Determination program, will receive annual training on how to identify and report suspected ANE following Kansas statutes and regulations (30-63-28). ANE training is offered to persons supported, parents and guardians monthly. Completion of the ANE training will be documented.
2. All staff who suspects that ANE has occurred will contact the Division Director in writing as soon as possible. Personnel reporting suspected abuse, neglect, and/or exploitation of a vulnerable adult will call Adult Protective Services (APS). Personnel reporting suspected abuse, neglect, and/or exploitation of a child will contact Child Protective Services (CPS). All reports made outside of regular business hours regarding vulnerable adults and/or children will be made to the Kansas Department for Children and Families (KDCF) and to the local law enforcement at the posted numbers or on-line at <http://www.dcf.ks.gov/services/PPS/Pages/KIPS/KIPSWebIntake.aspx>. For TARC Adult Service programs, concern for the well-being of an individual in TARC Services that does not rise to the level of ANE will nonetheless be documented on the [05-010.003 Information Report](#) form and will be forwarded to the Division Director.
3. The Division Director or designee of TARC Adult Services will complete a [05-020.001 Incident-Injury Report](#) and file a Critical Incident Report in BCI within 24 hours of the incident. Depending on the circumstances, an Adverse Incident Report may be required by KDADS as well <https://webapps.kdads.ks.gov/prod/?p=199:15>
4. Staff who fail to report incidents of suspected ANE are subject to termination.
5. Upon receipt of a report involving a TARC staff member, TARC will follow guidance from the Kansas Department for Children and Families (KDCF) regarding the internal investigation protocol which is to be followed. If KDCF declines the matter for investigation, TARC will still conduct its own internal investigation. The internal investigation will be completed by a Program Director to whom the alleged perpetrator is not assigned, in consultation with Human Resources and the Executive Director. During such internal investigation of a report of abuse, neglect, exploitation or financial exploitation, the named employee will be re-assigned to a non-direct care area or placed on administrative leave, as the circumstances may warrant.
6. Following completion of the internal investigation, a written report will be completed, attached to the *ANE Report Form*, and forwarded to the Human Resources Director, along with any Corrective Action Plan needed.
7. Notwithstanding the above procedures, all staff have the right to report suspected ANE anonymously.

SUBJECT		SD Participant Employee Background Checks		PROCEDURE NO	05PR001-E01
REFERS TO POLICY		03-006 Credential Verification Background Screening		SECTION	Services
EFFECTIVE	REVIEWED	REVISED DATES	10-05-06, 07-09-08, 09-17-12, 07-27-17, 11-15-17, 11-04-21		
01-01-06	11-04-21				
POLICIES REFERENCED					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		03-006.001 KBI Release 03-006.004 MVR Release <i>KS DCF Adult Protective Services Release (provided form)</i> <i>KS DCF Child Protective Services Release (provided form)</i>			

1. Participants in Self-determination will have their prospective employees sign a release of information form to obtain information from the following agencies. The original completed forms will be kept in the Self-determination participant's file.
 - A. Kansas Bureau of Investigation
 - B. DCF Adult Protective Services
 - C. DCF Children's Protective Services
 - D. Kansas Nurse Aid Registry
 - E. Office of Inspector General (OIG)
 - F. Motor Vehicle Report
 - G. National Criminal History and Sex Offender Background Check (NSOR)

2. Background Checks will be completed in accordance with *KDADS Informational Memo regarding Background Checks* dated 1/24/17.

3. Participants who reside in a Shared Living arrangement shall have additional background and reporting requirements. Self Determination staff shall complete all screening consistent with the requirements set forth in the *Shared Living Program Design Interim Guidance* dated 5/24/16.

POLICY MANUAL – SERVICES SECTION

SUBJECT		Participant Staff Training		POLICY NO.	05-079
REFERS TO POLICY				SECTION	Services
EFFECTIVE	REVIEWED	REVISED DATES	08-05-2020, 10-22-2021		
10-10-18	11-04-21				
POLICIES REFERENCED					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-079.001Emergency Preparedness			

POLICY: *TARC Self Determination Participant Staff are required to complete all initial and subsequent trainings per the Guidelines.*

GUIDELINES:

1. Self-determination Participant’s employee(s) and Personal Administrators will receive annual training in Abuse, Neglect and Exploitation, Whistleblower, Emergency Preparedness, HCBS Final Rules Settings, and if applicable, Medication Supports. Self-determination Participant’s employee(s) will receive biennial training in First Aid and CPR.
2. Required training can be completed through a variety of ways: in person class attendance through TARC, on-line courses provided by TARC, or outside training that has received prior approval from Self Determination Coordinators. A calendar of training availability at TARC will be provided upon request. Training will be assigned to Employees and Personal Administrators through the Sandata Employee Care program. Self Determination Coordinators will monitor the completion of training requirements and assist with documentation.
3. Costs for training will be covered by the Administration Fee paid to TARC.
4. Staff who are not current with respect to their training requirements will not be eligible to be paid for supports provided.

SUBJECT	Behavioral Supports			POLICY NO	05-008
EFFECTIVE	REVIEWED	REVISED	02-18-91, 04-20-92, 03-21-94, 12-12-01, 04-30-04, 08-27-07, 02-27-12, 08-18-14, 10-17-16, 10-16-17, 10-3-18, 10-01-19;11-04-21		
UNKNOWN	11-04-21	DATES			
REFERENCED POLICIES		03-063 Progressive Discipline			
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-008.002 Behavior Management/Human Rights Committee Waiver Form			

POLICY: *All TARC Programs will utilize a comprehensive approach to preventing, de-escalating, and as needed, intervening when the behavior of an individual poses a threat of harm to themselves or others*

GUIDELINES:

1. All TARC staff will receive training directed by The Kansas Institute of Positive Behavior Supports. All restrictive interventions must meet the requirements of Article 63 and be approved by individual's team which includes a parent/guardian (if applicable) and be submitted in writing.
2. Any restrictive procedure must be approved by the Behavior Management/Human Rights Committee and documented in the TARC Behavior Management/Human Rights Committee minutes.
3. Use of corporal punishment and/or verbal abuse will result in immediate termination of TARC staff involved (see policy [03-063 Progressive Discipline](#)). Corporal Punishment or verbal abuse by an employee of a Self-Determination Participant will result in termination by the Personal Administrator of the Participant.

SUBJECT	Medication Administration		POLICY NO	05-024
EFFECTIVE	REVIEWED	REVISED DATES	02-04-97, 08-03-99, 11-01-01, 04-30-04, 08-27-07, 08-22-08, 02-27-12, 10-22-12, 08-18-14, 10-03-18, 11-21-19, 12-18-19, 08-05-20, 10-14-21; 11-04-21	
08-19-91	11-04-21			
REFERENCED POLICIES				
RELATED PROCEDURES	05PR024-A01 Medication Error			
APPLICABLE TARC FORMS	05-020.001 Incident-Injury Report 05-024.001 Current Medication Information 05-024.002 Seizure Activity Tracking			

POLICY: *All persons supported by TARC will have their medications recorded in their file. Medication will be maintained and dispensed in compliance with CDDO contract licensing guidelines in conformance with the provisions of KSA 65-1124.*

GUIDELINES:

1. All medication will be administered by staff members designated by the TARC Nurse and only after appropriate training has been given and documented.
2. Self-Determination Participants will have all staff who will administer medications trained by a registered nurse.
3. Day & Work Services programs will store medication in a locked area approved by the TARC Nurse, or nurse contracted by TARC to provide such training.
4. No medication will be given without proper documentation.
5. All medication will be administered as outlined by the individual's prescription.
6. All medication administration will be documented by the individual administering the medication.
7. Medication will be administered with the level of support that is documented in the Person-Centered Support Plan.
8. Persons Supported who self-administer medication without any level of support are solely responsible for the safekeeping of medication while in TARC Services.

SUBJECT		Whistleblower Policy		POLICY NO	04-038
EFFECTIVE	REVIEWED	REVISED DATES	06-27-11, 10-24-11, 03-19-2020		
06-28-10	11-04-21				
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		04-038.001 Acknowledgement Form (Employee) 04-038.003 Acknowledgement Form (Volunteer) 01-011.G01 Board-Foundation Board Policy Disclosure Review			

POLICY: *TARC requires directors, officers, volunteers, agents, and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. As employees and representatives of TARC, we must practice honesty and integrity in fulfilling our responsibilities and comply with all applicable laws and regulations.*

GUIDELINES:

1. It is the responsibility of all directors, officers, volunteers, agents, and employees to report ethics violations or suspected violations in accordance with this Whistleblower Policy, i.e. (a) questionable or improper accounting or auditing matters and (b) violations and/or suspected violations of TARC's Code of Ethics.
2. This Whistleblower Policy is intended to encourage and enable directors, officers, volunteers, agents, and employees to raise concerns within TARC for investigation and appropriate action prior to seeking resolution outside TARC. No director, officer, volunteer, or employee who, in good faith, reports a concern shall be subject to retaliation or, in the case of an employee, adverse employment consequences.
3. A volunteer or employee who retaliates against someone who has reported a concern in good faith is subject to discipline up to and including dismissal from the volunteer position or termination of employment.
4. TARC has an open-door policy and suggests employees share their questions, concerns, suggestions, or complaints with someone who can address them properly. In most cases, employees should first discuss their concern with their immediate supervisor. If, after speaking with his or her supervisor, the employee continues to have reasonable grounds to believe the concern is valid, the employee should report the concern to the Human Resources Director or Board Treasurer. In addition, if the employee is uncomfortable speaking with his or her supervisor, or the supervisor is a subject of the concern, the individual should report his or her concern directly to the Human Resources Director or Board Treasurer.
5. If the concern was reported verbally to the Human Resources Director or Board Treasurer, the reporting employee, with assistance from the Human Resources Director or Board Treasurer, will record the concern in writing.
6. The Human Resources Director will promptly report the concern to the Board Treasurer, who serves as the chair of the Budget & Finance Committee (TARC's Audit Committee) which has specific and exclusive responsibility to investigate all concerns. If the Human Resources Director, for any reason, does not promptly forward the concern to the Board Treasurer, the reporting employee should directly report the concern to the Board Treasurer. Contact information for the Board Treasurer may be obtained through the Human Resources Division.
7. Concerns may also be submitted anonymously. Such anonymous concerns should be in writing and sent directly to the Human Resources Director or Board Treasurer.
8. Concerns may also now be submitted through the TARC website at www.tarcinc.org/contactus/
9. Directors, officers, and other volunteers should submit concerns in writing directly to the Board Treasurer. Contact information for the Board Treasurer may be obtained from the Human Resources Division.
10. The Board Treasurer will notify the sender of the reported concern an acknowledgement receipt of the concern within five (5) business days, if possible. It will not be possible to acknowledge receipt of anonymously submitted concerns.

11. The Human Resources Director is responsible for investigating all reported complaints and allegations concerning violations and advise the Executive Director and the Board Treasurer of any such report.
12. Appropriate corrective action will be recommended to the Board of Directors, if warranted by the investigation. In addition, action will be taken to include a conclusion and/or follow-up with the complainant for complete closure of the concern.
13. Anyone reporting a concern must act in good faith and have reasonable grounds for believing the information disclosed indicates an improper accounting or auditing practice or a violation of the Code of Ethics. The act of making allegations that prove to be unsubstantiated and that prove to have been made maliciously, recklessly or with the foreknowledge that the allegations are false, will be viewed as a serious disciplinary offense and may result in discipline up to and including dismissal from the volunteer position or termination of employment. Such conduct may also give rise to other actions, including civil lawsuits.
14. Reports of concerns, and investigation pertaining thereto, shall be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.
15. Disclosure of reports of concerns to individuals not involved in the investigation will be viewed as a serious disciplinary offense and may result in discipline, up to and including dismissal from the volunteer position or termination of employment. Such conduct may also give rise to other actions, including civil lawsuits.

SUBJECT	Deficit Reduction Act of 2005-Fraud Abuse		POLICY NO	04-039
EFFECTIVE	REVIEWED	REVISED DATES	06-27-11, 10-24-11, 12-13-11	
06-28-10	11-04-2021			
REFERENCED POLICIES	03-004 Nepotism 03-006 Credential Verification Background Screening 03-036 Staff Competencies 03-070 Conflict of Interest/Arm's Length Transactions 04-016 Finance Policy			
RELATED PROCEDURES				
APPLICABLE TARC FORMS	03-036.002 TARC Code of Ethics 04-038.001 Acknowledgement Form (Employee) 01-011.G01 Board-Foundation Board Policy Disclosure-Review			

POLICY: TARC will comply with all federal, state and local laws to detect and prevent fraud, waste and abuse regarding payments to TARC from federal and/or state healthcare programs and to provide protections for those who report actual or suspected wrongdoing. This policy applies to the Board of Directors, employees, volunteers, independent contractors/consultants and agents of persons supported associated with TARC. The purpose of this policy is to comply with the Federal Deficit Reduction Act of 2005.

GUIDELINES:

I. Compliance Program & Code of Conduct

1. The [03-036.002 TARC Code of Ethics](#) sets forth the values and standards of conduct which govern the behavior of everyone associated with TARC. All TARC employees and volunteers receive initial training on the *Code of Ethics* during New Staff Orientation. The *Code of Ethics* is reviewed with all employees during the annual performance evaluation process and all signed copies of the *Code of Ethics* are maintained in the employees' personnel files.
2. Compliance policies and procedures are set forth in detail in the TARC Compliance Plan and are also available on the TARC computer network system and in the TARC Employee Handbook, which is distributed to all employees annually.

II. Federal False Claims Act

1. The Federal False Claims Act imposes civil liability on any person who:
 - Knowingly files a false or fraudulent claim for payments to Medicare, Medicaid or other federally funded health care programs
 - Knowingly uses a false record or statement to obtain payment on a false or fraudulent claim from Medicare, Medicaid or other federally funded health care program
 - Conspires to defraud Medicare, Medicaid or other federally funded health care program by attempting to have a false or fraudulent claim paid
 - Falsely certifies the type or amount of property to be used by the Government
 - Certifies receipt of property on a document without completely knowing the information is true
 - Knowingly buys Government property from an unauthorized officer of the Government
 - Knowingly makes, uses, or causes to be made or used a false record to avoid, or decrease an obligation to pay or transmit property to the Government.

III. Detecting and Preventing Fraud

1. TARC expects its employees to do everything they can to prevent and detect false claims and potentially fraudulent behavior. TARC provides the following measures to accomplish this:
 - Provide employee and volunteer training
 - Investigate reports of potential violations from employees in a timely manner
 - Investigate complaints regarding potential violations from persons supported, family members and guardians, and visitors in a timely manner

- Provide anonymous and confidential reporting mechanisms
- Protect employees who report potential fraud and/or abuse
- Perform background checks and screen all new employees upon hire and annually thereafter
- Perform internal risk assessments and monitor higher risk areas
- Perform internal and external audits
- Correspond with state and federal agencies regarding potential concerns

IV. Reporting Non-Compliance

1. Reporting actual or potential noncompliance is a condition of employment for all TARC employees.
2. All TARC employees and volunteers will receive training on the reporting process.
3. Retaliation against members of the Board of Directors, employees, volunteers, independent contractors/consultants or agents of persons supported who report in good faith is prohibited.
4. Any independent contractor/consultant or employee of a person supported who has concerns about the work they do for TARC or work done by TARC should report those concerns in writing to the Board Treasurer.

V. TARC Policies on Prevention and Detection of Fraud and Abuse

1. All TARC employees will be aware of TARC policies regarding detection and prevention of health care fraud and abuse. These policies can be accessed via the TARC internal computer network system or by contacting the Human Resources Director.
2. TARC policies relevant to the prevention and detection of fraud and abuse include:
 - [03-004 Nepotism](#)
 - [03-006 Credential Verification Background Screening](#)
 - [03-036 Staff Competencies](#)
 - [03-070 Conflict of Interest/Arm's Length Transactions](#)
 - [04-016 Finance Policy](#)

VI. Federal & State Regulations

1. Federal law, including the False Claims Act and the Program Fraud and Civil Remedies Act, and Kansas laws prohibit the knowing submission of false claims or statements to the government for payment. These laws define false claims as "knowingly submitting false or fraudulent claims for payment to the federal or state government or making or using a false record or statement in connection with the submission of a claim for payment to the government".
2. Violations can subject TARC and those involved in the violation to significant fines as well as criminal penalties.
3. Detailed information about the provisions of the federal False Claims Act, the federal Program Fraud and Civil Remedies Act and Kansas' civil and criminal state laws pertaining to false claims and statements are available to all members of the Board of Directors, employees, volunteers, independent contractors/consultants and agents of persons supported through the Human Resources Director.

VII. Reporting Outside of TARC

1. A person may become a whistleblower and notify the government of known or suspected fraudulent activity at TARC.
2. TARC is prohibited from retaliating against persons who notify the government of potential fraud and/or abuse violations.

VIII. Training

A. Employees

1. All TARC employees will receive training on identifying, preventing and detecting false claims and potentially fraudulent behavior upon hire during New Staff Orientation.
2. All TARC employees will review this policy annually with their immediate supervisor and/or Division Director at the time of the annual performance evaluation review meeting.
3. All TARC employees will receive the most current version of this policy in their annual Employee Handbook.

B. Board of Directors

4. Members of the Board of Directors will receive training on identifying, preventing and detecting false claims and potentially fraudulent behavior during their initial orientation to their board responsibilities.

5. All Board of Directors members will receive a copy of this policy to be included in their official Board Notebook.

C. Volunteers

1. Volunteers will receive training on identifying, preventing and detecting false claims and potentially fraudulent behavior during their initial orientation to TARC.
2. Volunteers will receive a copy of this policy in their Volunteer packet.

D. Independent Contractors/Consultants

1. Independent Contractors/Consultants will receive training on identifying, preventing and detecting false claims and potentially fraudulent behavior at the time the official contract is signed.
2. Independent Contractors/Consultants will receive a copy of this policy along with the copy of their signed contract with TARC.

E. Agents of Persons Supported

1. Agents of Persons Supported will receive training on identifying, preventing and detecting false claims and potentially fraudulent behavior upon hire by the person supported.
2. Agents of Persons Supported will receive a copy of the most current version of this policy upon hire.

IX. Enforcement

A. Employees, Board of Directors, Volunteers, Independent Contractors/Consultants, Agents of Persons Supported:

1. Persons acting in violation of this policy are subject to disciplinary action, up to and including termination of their relationship with TARC.

SUBJECT		Self- Determination Shared Living		POLICY NO	05-075
12-04-2017	REVIEWED	REVISED DATES	06-13-18, 10-15-18, 11-04-21		
10-30-2017	11-04-21				
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS		05-075.001 TARC Self determination Shared Living Agreement 05-075.002 Shared Living Personal Preference Agreement 05-075.003 Shared Living Safety Plan-Gun Safety 05-075.004 Shared Living Pool Safety Plan 05-075.005 Contract to Provide Shared Living Residential Services			

POLICY: *TARC Self-Determination will follow recommendations and guidelines of the Shared Living Program Design.*

GUIDELINES:

1. The Shared Living Contractor and TARC shall enter into an agreement and Shared Living Contractor will provide residential support services, with the oversight of TARC, Inc. as Licensed Provider. Shared Living Contractor is responsible as follows:
 - A. The Shared Living Contractor agrees that Shared Living is not an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IDD); Specialized Medical Services; Home Health Services or other State plan services and may not be licensed to provide these services.
 - B. The Shared Living Contractor, and anyone working for Shared Living Contractor and others living in the home of adult age, must comply with all applicable local, state and federal laws, HIPAA, Deficit Reduction Act, ordinances and regulations related to services provided in the home and rights of the persons being served including, but not limited to, the DD Reform Act (K.S.A. 39-1801 et seq.), K.A.R. 30-63-01 et seq., the Home and Community Based Waiver regulations (K.A.R. 30-64-01 et seq.), applicable Managed Care Organization Provider Manual, applicable provisions within Community Service Provider affiliate agreement with its CDDO, applicable KDADS policies, procedures and program requirements, CDDO policies, and applicable Community Service Provider policies and procedures or management procedures incorporated into this document.
 - C. The Shared Living Contractor shall not subcontract any of the services outlined within the contract. Shared Living Contractor agrees that he/she/they shall be the only person(s) providing the services, except for a respite worker(s) or supporting worker(s) and/or adult members of the Shared Living Contractor's family who have been approved and trained.
 - D. The Shared Living Contractor shall maintain a skill set to provide appropriate supports to the person(s) as outlined in the person-centered plan(s) or meet the person(s) support needs if they change by seeking appropriate training.
 - E. The Shared Living Contractor shall provide a pool safety plan *if* a pool is present.
 - F. The Shared Living Contractor shall not allow more than three non-related adults with intellectual or developmental disabilities to live in the residence and receive licensed, Residential Supports. Foster children cannot live within the same home as an adult who is receiving Shared Living services unless granted an exception. The Shared Living Coordinator understands that exceptions may be granted under extraordinary circumstances by the CDDO (if required), Foster Care Agency, KDADS and/or KDHE on a case-by-case basis and agrees to seek an exception if necessary. The Licensed Provider will notify the Person Supported's Managed Care Organization (MCO) of the Exception.
 - G. The Shared Living Contractor, and anyone working for Shared Living Contractor and other person living in the home of adult age (18): will not have a confirmed case of abuse, neglect or exploitation (ANE) as specified in K.A.R. 30-63-28(f) or any of the prohibited offenses outlined in KSA 39-970 & 65-5117.

- H. The Shared Living Contractor and anyone working for Shared Living Contractor and others living in the home who are of adult age that drive the person must have a Motor Vehicle Record (MVR) that clears him or her for driving.
- I. The Shared Living Contractor must comply with all background checks requested by TARC, Inc. for any persons working for Shared Living Contractor and others living in the home of adult age which include but are not limited to DCF Adult Abuse Registry, DCF Child Abuse Registry, KBI Criminal Background, KS Nurse Aid Registry (if applicable), KDADS Adult ANE Registry, Health and Occupational Credentialing (HOC), OIG Sanction History, Social Security Number Name and Address Trace, National Criminal History and 50 State Sex Offender Background check. All required background checks must be completed prior to placement and then every two years during their month of hire.
- J. The Shared Living Contractor agrees to report to TARC, Inc. any motor vehicle violations, arrests, police involvement, criminal activity in the home or convictions.
- K. The Shared Living Contractor and anyone working for Shared Living Contractor may not have ever been convicted of Medicaid fraud and must let TARC, Inc. know if under investigation for Medicaid Fraud.
- L. The Shared Living Contractor must notify TARC, Inc. if conditions change within the home or family structure during the term of the contract. If it is a planned change, the provider should be notified within 30 days. If there's an unplanned change, the provider must be notified within five business days.
- M. The Shared Living Contractor must notify TARC, Inc. within five calendar days if someone moves into the residence permanently.
- N. The Shared Living Contractor must be compliant with visits, announced and unannounced, by family/guardians/Licensed Provider/CDDO/State/guests of the member/MCO.
- O. The Shared Living Contractor must cooperate with investigations from Licensed Provider, MCO, CDDO, law enforcement and the State as specified in K.A.R. 30-63-28(e), KDADS policies and procedures or otherwise allowable by law.
- P. The Shared Living Contractor must cooperate with providing any requested records by Licensed Provider, MCO, CDDO, and the State of Kansas including KDADS and KDHE.
- Q. The Shared Living Contractor must have proof of home owner or rental and auto insurance – amounts must meet or exceed what the State of Kansas and TARC, Inc. requires and include notification of any insurance lapse.
- R. The Shared Living Contractor agrees to declare all guns in the person's home and submit an approved safety plan.
- S. The Shared Living Contractor understands TARC, Inc. must implement corrective action if any conditions under 30-63-30(b)(2) are found to exist.
- T. The Shared Living Contractor will comply with any local, state or federal law related to compliance with workers compensation and unemployment as required.
- U. The Shared Living Contractor agrees to the following additional requirements:
- Participation in a placement study and/or an in-home family interview
 - Inspection and approval of the physical home
 - Ability to meet physical support needs of the person
 - Completion of a series of pre-placement training courses that meet minimum state of Kansas training standards
 - Participation in the development of a Shared Living Personal Preferences Agreement between Shared Living Contractor(s) and the person to ensure quality outcomes addressing each person's lifestyle preferences
 - Purchase and maintenance of required insurance. Shared Living Contractor will be required to sign a release for their insurance company to notify the provider of lapse in coverage.
 - Willingness to participate in the Participant's Person Centered Support Planning meeting and implementation of the Person Centered Support Plan as specified in K.A.R. 30-63-21
 - Successfully passing required background checks and screenings (such as criminal history check, and checks for any history of abuse, neglect or exploitation).
 - NOT be the guardian, conservator, DPOA, DMPOA, Targeted Case Management Agency or payee for the person and provide Shared Living services to a person.
 - NOT be owner/operator/ED/CEO of Licensed Provider.
 - Follow the person-centered support plan and complete goal documentation as required.
 - MUST be at least 18 years of age.

- Paid Respite Requirements
- V. Shared Living Contractor agrees that the following minimum requirements shall be met by all paid caregivers:
 - Ability to meet physical support needs of the person.
 - Completion of a series of pre-employment training courses and meet minimum training standards
 - Successfully passing required background checks and screenings (such as drug screening, criminal history check, and checks for any history of abuse, neglect or exploitation).
 - NOT be the parent, spouse, brother, sister, guardian, conservator, DPOA, DMPOA or payee for the person.
 - Follow the person centered support plan and complete goal documentation as required.

SUBJECT		Self – Determination Shared Living – Conflict of Interest		POLICY NO	05-076
EFFECTIVE	REVIEWED	REVISED DATES			
12-04-2017	11-04-21				
REFERENCED POLICIES		05-075			
RELATED PROCEDURES					
APPLICABLE TARC FORMS					

POLICY: *Shared Living Contractor and anyone working for the Shared Living contractor are to ensure the relationships with persons in Shared Living are professional.*

Shared Living contractors cannot be the parent, spouse, brother, sister, guardian, conservator, durable power of attorney (DPOA), medical power of attorney (MPOA) or representative payee for the person. The Shared Living Contractor cannot be a Targeted Case Manager and provide Shared Living Services as a contractor.

GUIDELINES:

1. All Shared Living Contractors will complete an Application through the TARC Self-Determination Program and will be asked questions regarding their relationship to the Person Supported who will reside in their home. Except for those Shared Living Contractors who were providing Residential Services in a Shared Living arrangement prior to the Effective Date of the Shared Living Program Design, the above stated restrictions shall be strictly enforced.
2. Per TARC Policy 05-075, The Shared Living Contractor must notify TARC, Inc. if conditions change within the home or family structure during the term of the contract. This includes any changes in the status of the relationship between the Shared Living Contractor and the Person Supported.
3. The Self Determination Coordinator will notify the appropriate staff of the CDDO and KDADS of any change in status of the Shared Living Contractor which would violate this policy.

SUBJECT		Self-Determination Shared Living – Emergency Placement		POLICY NO	05-077
EFFECTIVE	REVIEWED	REVISED			
09-24-19	11-04-21	DATES			
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS					

POLICY: *TARC Self-Determination will follow recommendations and guidelines of the Shared Living Program Design for emergency placements. An emergency exists when the Shared Living Contractor is unable to provide the supports necessary for the safety and well-being of the Person Supported.*

GUIDELINES:

1. In the event of an emergency, a temporary placement into a Shared Living arrangement can occur under the following conditions:
 - A. The Support Team for the Individual, including the CDDO will be notified by the Self-Determination Coordinator that the need for and emergency placement exists. The team will meet either by phone or in person as soon as possible to determine an appropriate alternative placement. Placement must be with a Shared Living Contractor or with staff or living arrangement with TARC Self-Determination that has met all minimum provider requirements and pre-placement training; this must be approved by person and his/her guardian (if applicable).
 - B. Placement must be in a residence with an approved home evaluation that was completed by KDADS within 30 days prior to placement.
 - C. The length of the contract between TARC Self-Determination and the Shared Living Contractor should be no longer than 90 days, at which time a permanent placement has been identified or the person's team extends the term of the contract. If an emergency placement contract is extended, all appropriate parties must be notified including QMS, the CDDO and the MCO and all appropriate requisites completed by contractor. In addition, the Person-Centered Support Plan must be reviewed and updated to include any alterations and/or considerations applicable to the Shared Living setting.
 - D. Support visits will be completed at an increased frequency during the term of temporary contract, as determined by the team.
 - E. A Shared Living Personal Preferences Agreement does not have to be developed and in place prior to placement, however, every effort should be made to ensure that lifestyle preferences for all persons involved in care and the Shared Living arrangement are identified and addressed during support visits. Prior to permanent placement the Shared Living Personal Preferences Agreement must be completed.
 - F. Emergency placements may include the next best option to Shared Living if another Shared Living arrangement is not available. Emergency placements must ensure the person(s) are free from abuse, neglect and exploitation. Placement options must meet all training and background checks as required by the State.

SUBJECT		Self-Determination Shared Living – Quality Assurance		POLICY NO	05-078
EFFECTIVE	REVIEWED	REVISED DATES			
12-4-2017	11-04-2021				
REFERENCED POLICIES					
RELATED PROCEDURES					
APPLICABLE TARC FORMS					

POLICY: *TARC Self-Determination will follow the quality assurance recommendations and guidelines of the Shared Living Program Design.*

GUIDELINES:

1. Persons in Shared Living shall have the same rights and responsibilities as other persons receiving HCBS-IDD services in other settings, and all services and supports will comply with the HCBS-IDD Program’s Quality Assurance and Program Integrity measures, CDDO quality assurance, MCO reviews, and other quality assurance reviews.
2. TARC Self-Determination will ensure compliance with all contractual terms and quality assurance standards that protect an individual receiving HCBS-IDD services from fraud, waste, abuse, neglect and exploitations. All Shared Living Contractors are required to complete annual Whistle Blower training and sign an acknowledgement that such training has been completed. Meetings with Shared Living Contractors will be held several times each year to review required documentation. Independent Contractors will comply with all local, state, and federal laws and regulations.
3. TARC will ensure the health, safety and welfare of the person receiving supports and will ensure that all contractual requirements are reviewed with the Shared Living Contractor. Contractual compliance will be reviewed at least quarterly to ensure there is no lapse of federal and state level requirements as well as to ensure quality of services provided to the person and overall satisfaction of all parties involved in the arrangement. This quarterly meeting also serves as the purpose touching base on how all members of the household are doing regarding lifestyle management and consistently meeting the needs of all members involved.
 - A. At this review the following areas will include, but are not limited to:
 1. Minimum training requirements as specified in K.A.R. 30-63-26
 2. Insurance coverage
 3. Respite usage, appropriate training and consents
 4. Natural supports, training and consents
 5. Disaster and emergency planning
 6. Shared Living Personal Preference Agreement
 7. Any changes to the home or family structure
 8. Person centered services and supports
 9. Purchases made by the contractor on behalf of the person (using person’s funds) are made at reasonable fair market values.
4. Persons in Shared Living shall have the same rights for appeals and grievance as any other person receiving I/DD services per Kansas State policy.
5. TARC Self-Determination is committed to supporting cultural and individual diversity and does not discriminate because of race/ethnicity, color, religion, sex, including marital status, national origin, ancestry, age, sexual orientation, disability or veteran status in its recruitment, retention, or development of Shared Living Contractors or persons receiving Shared

Living services. The Shared Living goals are aimed at fostering an understanding of cultural and individual diversity as it relates to shared lifestyles.

SUBJECT	Program Related Grievances		POLICY NO	05-007
EFFECTIVE	REVIEWED	REVISED DATES	06-11-98, 04-30-04, 08-22-08, 10-22-12, 10-17-16, 01-20-17	
02-18-91	11-04-2021			
REFERENCED POLICIES	06-020 Dispute Resolution			
RELATED PROCEDURES				
APPLICABLE TARC FORMS	05-007.002 Services Grievance Form 05-007.004 Title VI Complaint Form 05-007.005 Title VI Investigations-Lawsuits-Complaints			

POLICY: *Persons supported and parents/guardians who have concerns or complaints regarding direct services are encouraged to seek resolution through the grievance process.*

GUIDELINES:

1. All persons utilizing supports and services from TARC, Inc. will have the opportunity to provide input, feedback and suggestions.
2. Any concerns or grievances regarding services received or regarding the staff providing supports, will first be encouraged to be addressed directly with the Program or Family Coordinator.
3. If the situation is not resolved to the person/family's satisfaction or if those involved are uncomfortable addressing the issue directly with the staff, then the person/family should contact the Director or Assistant Director of the Division.
4. All complaints will be addressed within five (5) working days. Attempts to address the specific concerns of families enrolled in services can include individual meetings with the family members, team meetings, telephone conversations and email correspondence. The staff members involved in addressing the issue will document the interactions that occur. The family may be asked to submit their concerns in writing.
5. If the family is not satisfied with the response, the issue will be forwarded to the Executive Director of TARC, Inc. The Executive Director will respond to the grievance with a meeting within ten (10) working days. If the person supported/guardian is not satisfied with the response of the Executive Director, the person supported/guardian may request a meeting with the TARC Executive Committee. The person supported/guardian grievance will be forwarded to the Executive Committee and a meeting will be set within ten (10) working days. After the meeting with the TARC Executive Committee, a written reply will be made within five (5) working days. The decision of the Executive Committee will be the final agency response.
6. If the concerns cannot be resolved:
 - A. For persons supported through Children's Services tiny-k, a copy of the Child & Family Rights from the Kansas Department Health and Environment will be reviewed with the family and support will be provided to follow those procedures.
 - B. For all other programs, the person supported/guardian should follow the Community Developmental Disabilities Organization (CDDO) Policy [06-020 Dispute Resolution](#).