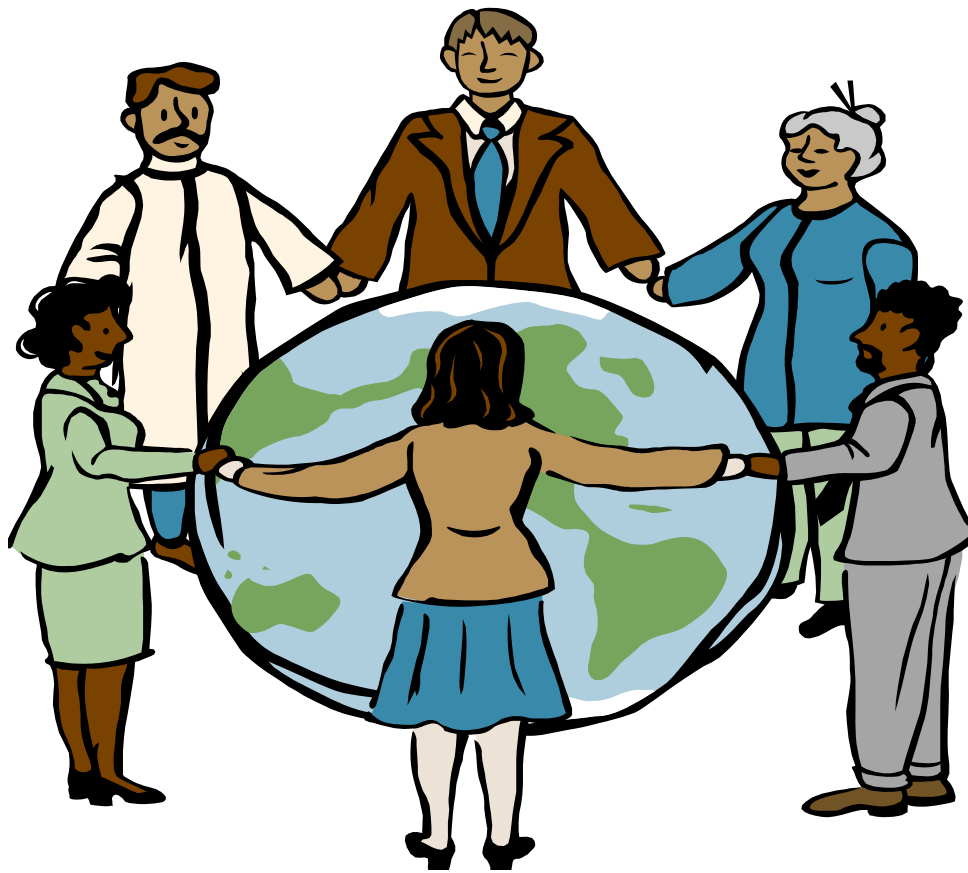


Community First Choice
and
Personal Assistance Services
Handbook
“Your Vision, Your Plan, Your Life”



Montana Department of Human Services



Important Information

My Plan Facilitator is: _____

Phone Number: _____

My Provider is: _____

Phone Number: _____

My Person Centered Planning Meeting Information

Date: _____

Time: _____

Location: _____

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Welcome to Community First Choice and Personal Assistance Services! *“Your Vision, Your Plan, Your Life”*

Getting Started!

The State of Montana is moving to a new way of delivering personal assistance services! Community First Choice/Personal Assistance Services (CFC/PAS) uses a “person centered planning” process. Person centered planning is a process for **LEARNING** what is important to you and how you want to live! Planning will focus on your daily activities and how your services will be delivered to you. It uses your strengths and abilities to develop a service plan that will allow you to make choices and participate fully, always with the goal of living independently! Your Plan Facilitator will work with you and your Provider Agency to create a plan for service delivery that will reflect your goals, choices and preferences while ensuring your continued health and safety. Your Plan Facilitator will be contacting you soon to set up your service planning meeting. This booklet will help you prepare for event!



Your Person Centered Planning Meeting

Inside this booklet you will find information that will help you prepare for your planning meeting. You will find places to write your questions or concerns so that you can discuss them with your Plan Facilitator.

Your planning meeting will include you, your Plan Facilitator and a representative from the Provider Agency. In addition, everyone has the right to have people they have chosen at their planning meetings for support and assistance.

You can request a planning meeting at any time if your circumstances change. Your Facilitator will ensure that your planning process reflects your cultural considerations and preferences.

Your Plan Facilitator will be in contact regarding your planning meeting and will work with you to determine a time, date and location that are convenient for you.

I would like to invite the following individual(s) to attend my planning meeting:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____



Key Terms

Plan Facilitator: The person who guides you through the person-centered planning process. If you receive waiver services, your Case Manager will serve as your Plan Facilitator.

Provider Agency: The entity you select to deliver your daily CFC/PAS services.

Personal Care Attendant: Person who comes into your home to assist you with daily activities.

Mountain Pacific Quality Health: Mountain Pacific Quality Health (MPQH) provides assessment and counseling to the individual before enrollment to CFC/PAS services. MPQH will provide the individual the ability to freely choose from available home and community based attendant providers and available service delivery models.

Person Centered Planning Guidelines

- The most important part of this planning process is YOU! Your goals, dreams and preferences are important!
- Planning will begin with input from you. Planning may include additional information from the people most important to you, and when appropriate, input from professionals.
- The plan of service begins with what you can do for yourself! It then adds supports from your family, neighbors, friends, and other community resources.
- Planning activities will address issues and concerns which you or others close to you have about your health, welfare and safety.
- Regular feedback from you regarding your interest and needs is essential!

Your Rights and Responsibilities

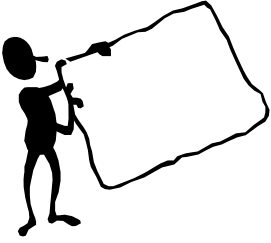
You have the right to:

- Be treated with dignity and respect.
- Assist in developing your Plan.
- Identify or assist in identifying your goals, strengths, needs, priorities and preferences.
- Choose where you want to live.
- Make informed choices, including a choice of Providers and personal care attendants.
- Refuse any and all services.
- Be notified of program changes in a timely manner.
- Be free of all forms of abuse, coercion and harassment.
- File a grievance through your Provider Agency's grievance procedures.
- Have your records kept confidential.

You have a responsibility to:

- ✓ To treat others with dignity and respect.
- ✓ Follow your care plan as agreed to during your planning meeting.
- ✓ Tell your Plan Facilitator if living situation affects your health and safety.
- ✓ Be an active participant in the planning process.
- ✓ Be understanding of Provider Agency limitations and have a back-up plan in place should your personal care attendant be unable to assist you.
- ✓ Share important changes in your life with your Plan Facilitator.
- ✓ Let your Plan Facilitator know about your issues and concerns.

Your Plan Facilitator's Responsibilities



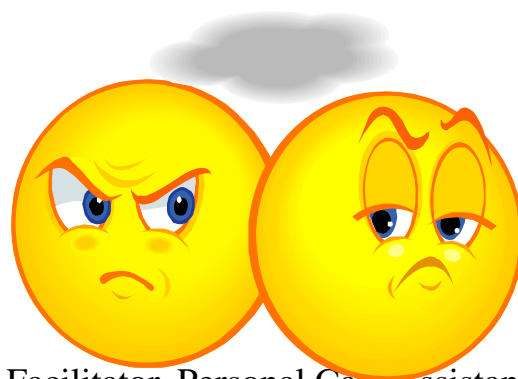
Your Plan Facilitator's Responsibilities:

- * Ensure that you are treated with dignity and respect.
- * Ensure that the person centered planning process is followed during your plan development and service delivery.
- * Communicate in a language that is understandable to you and the people that are important in supporting you.
- * Provide information, training and assistance so that you may participate in the planning process.
- * Ensure that the initial and annual planning meeting are conducted at a time and location that is convenient to you.
- * Ensure that your planning process reflects your cultural considerations and preferences.
- * Ensure that your health, safety and service needs are identified and addressed in your plan.
- * Assist you in developing a plan that identifies your needs, goals, priorities and preferences for services and supports.
- * Provide a process for changing your plan if circumstances change and helping you develop a personalized back up plan.
- * Assist you in identifying community resources that will help you live independently.

Conflict Resolution

Differences of opinion and conflicts occur occasionally in all relationships. Here are some tips to assist you in dealing with conflicts:

- Read your Handbook! Make notes if you have questions.
- Ask your Plan Facilitator to explain anything you don't understand.
- Calmly and honestly communicate your feelings.
- Express your feelings without blaming.
- Give respect to other's opinions and expect respect in return!
- Focus on the issue. Ask questions if you don't understand.
- Attack the issue not the person.
- Listen without interrupting.
- Request and work toward a solution!



Grievance

You have the right to express your concerns to your Plan Facilitator, Personal Care Assistant, CFC Provider Agency or the Mountain Pacific Quality Health staff without fear of losing services or being punished in some way. Your Plan Facilitator will assist you in giving a “voice” to your concerns. He or she will assist you in identifying solutions to address the situation.

If you need to file a complaint, Mountain Pacific Quality Health, your Plan Facilitator, and your CFC Provider Agency are required to have a process for handling conflict and disagreements. In addition, you have the right to a “fair hearing” and the right to file a formal complaint with the Department of Public Health and Human Services, Office of Fair Hearings.

Fair Hearing Information

You may request a fair hearing with the Department of Public Health and Human Services under the following circumstances:

- Reduction in your service level, if you disagree.
- Denial of services, based on eligibility criteria.

You must request a fair hearing in writing.

Mail the request to: Dept. of Public Health and Human Services
 Hearings Officer
 PO Box 202953
 Helena MT 59620-2953

A request for a fair hearing must be postmarked or delivered no later than 90 calendar days following the date of notice of determination.

Regional Program Officers are available to assist you with any questions on the Fair Hearing process you may have. Regional Program Officers contact information is provided on page 20.

Anti-Discrimination Information

As a recipient of Medicaid, the Department of Public Health and Human Services does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, age, sex, handicap, political beliefs, religion or disability.

In case you have questions or in the event that you wish to file a complaint alleging violations, please contact:

<p>Client Discrimination Complaint Coordinator 406-444-4211 or TDD: 866-735-2968</p>	<p>Office of Civil Rights US DHHS 1961 Stout, St. Room 1426 Denver CO 80294-3528 303-844-2024 TDD: 303-844-3439</p>
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Questions or concerns for your Plan Facilitator:

Helpful Tools!

Before meeting with your Plan Facilitator you may want to review and complete the following pre-planning forms. These OPTIONAL forms can help you identify your needs, preferences and goals before making major decisions. A summary of your health status and risk factors completed by Mountain Pacific Quality Health nurse along with your personal assistance assessment will also be useful tools for brainstorming the supports and services that you need. This summary will be provided to you during your planning meeting

By completing these preplanning forms, you will be well prepared to discuss your needs, desires and goals with your Plan Facilitator. You may find that developing your Plan may be easier because you have already spent time thinking about what you want and need to remain independent. Completed preplanning documents can also be a good communication tool to develop a relationship with your Plan Facilitator.

ROUTINES AND RITUALS

Routines and rituals guide us through our days and bring consistency, comfort and control. These routines and rituals are the “little things” that determine if we are happy. When these routines and rituals are written up, it lets others know how to support us in ways that keep us happy and safe. Some examples of routines and rituals include your daily routine, mealtimes, going to bed, feeling ill, birthdays, transitions and celebrations. Please think about your daily routine and your personal assistance services and what routines/rituals are important to you. The following questions may help you think about routines at home.

ROUTINES AT HOME

1. The way I like to start my day is.....
2. To me, a good meal at home means.....
3. When I prepare a meal, I like to.....
4. My favorite ways to spend an evening at home are.....
5. The ways I like to spend my weekends are.....
6. Other things I like to do at home as hobbies or just for fun are...

Things to know about the ways I like to keep myself well groomed and healthy are:

1. Bathing and Showering

2. Hygiene

3. Hair Care

3. Clothing care

5. Housekeeping

6. Other

PHYSICAL AND EMOTIONAL WELL BEING

What are the things that you need to do in order to feel healthy? (Include medications, special diets, adaptive equipment, medical tests, etc.)

What are the things that you should stay away from in order to stay healthy? (Include smoking, specific foods, medications, and/or substances that you are allergic to)

Do you have any health conditions or concerns that require support?

What are the things you need to do in order to be happy? (Include medications, counseling, etc.)

What are some of the things that upset you or make you angry? How do you show that you are upset?

When you are upset, what helps you feel better?

State Protection and Advocacy Organizations

Protection and Advocacy Organizations are available throughout the State to assist you when you are in need of additional supports and services. Your Plan Facilitator can provide you with contact information for local community resources in your area.

State Protection and Advocacy Organizations:

Disability Rights Montana

Helena

(800) 245-4743

<http://www.disabilityrightsmt.org>

PLUK-Parents Let's Unite for Kids

Billings

(800) 222-7585

<http://pluk.org>

Montana Mental Health Ombudsman

Helena

(406) 444-9669

<http://www.mhombudsman.mt.gov>

Montana Mental Disabilities Board of Visitors

Helena

800-332-2272

<http://boardofvisitors.mt.gov/default.mcp>

Independent Living Centers:

Living Independently for Today and Tomorrow

Billings & Glendive

(800) 669-6319

<http://www.lifft.org>

Montana Independent Living Project

Helena, Butte, & Bozeman

(800) 735-6457

<http://www.milp.us>

North Central Independent Living Services

Great Falls & Glasgow

(800) 823-6245

Summit Independent Living Center

Missoula, Hamilton, Kalispell, & Ronan

(800) 398-9002

<http://www.summitilc.org>

Aging Services:

Area I Agency on Aging

Action for Eastern Montana

Glendive

(406) 377-3564

<http://www.aemt.org>

Area II Agency on Aging

Roundup

406-323-1320

<http://www.area2aging.org>

The Alliance Resource Center of Yellowstone County

Billings

(406) 259-5212

<http://www.allianceyc.org>

Area IV Agency on Aging

Helena

(406) 447-1680

<http://rmdc.net/senior-information-services/area-iv-agency-on-aging>

Area V Agency on Aging

Southwest Montana Aging and Disability Services

Butte

(406) 782-5555

<http://www.swmads.org>

Area VI Agency on Aging

Western Montana Area VI Agency on Aging, Inc.

Polson

(406) 883-7284

<http://www.westernmontanaagingservices.org>

Area VII Agency on Aging

Missoula Aging Services

Missoula

(406) 782-7682

<http://www.missoulaagingservices.org>

Area VIII Agency on Aging

Cascade County Aging Services

Great Falls

(406) 454-6990

<http://departments.cascadecountymt.gov/agingservices>**Area IX Agency on Aging**

Kalispell

(406) 758-5730

<http://www.flathead.mt.gov/aging>**Area X Agency on Aging**

Hill County Council on Aging

Havre

(406) 265-5464

http://hillcounty.us/Council_on_Aging.html**Mental Health****NAMI-Montana**

Helena

(406) 443-7871

<http://www.namimt.org>**Montana Mental Health Association**

Bozeman

(406) 587-7774

<http://montanamentalhealth.org>**Western Montana Service Area Authority**Email: webmaster@wsaamt.org<http://wsaa-montana.org>**Central Montana Service Area Authority**Email: secretary@centralsaamontana.org<http://centralsaamontana.org>**Eastern Montana Service Area Authority**

Miles City

Email: aklein@mt.gov

(406) 234-1866

<http://esaamontana.org>**Mental Health Advisory Board**

Billings

(406) 252-5658

<http://www.bmhab.org>**Youth/Children:****Montana Youth Transitions**

Helena

(406) 442-2576

<http://www.montanayouthtransitions.org>**Developmental Disabilities****Montana Council on Developmental Disabilities**

Helena

(866) 443-4332

<http://mtcdd.org>**Montana Developmental Disabilities Program**

Helena

(406)444-2995

<http://www.dphhs.mt.gov/dsd/ddp/index.shtml>**Traumatic Brain Injury:****Brain Injury Alliance of Montana**

Missoula

(800) 241-6442

<http://biamt.org>**Deaf & Hearing Impaired:****Montana Association of the Deaf**

Great Falls

(406) 771-9053

<http://www.mtdeaf.org>**Blind:****Low Vision Montana**

Helena

(800) 601-5004

<http://www.lowvisionmt.org>**Montana Association for the Blind**

Helena

(406) 442-9411

<http://www.mtblind.org>

Fair Housing:

Montana Fair Housing

Butte

(800) 929-2611

<http://www.montanafairhousing.org>

Montana Human Rights Bureau

Helena

(800) 542-0807

<http://erd.dli.mt.gov/human-rights-bureau>

Senior Long Term Care Division Regional Program Officers	Phone	Region
Karen Bauch Bob Maxson 2121 Rosebud Dr., Ste. D Billings, MT 59102	Phone: 655-7644 Phone: 655-7635	Big Horn, Carbon, Golden Valley, Musselshell, Park, Stillwater, Sweetgrass, Treasure, Wheatland, Yellowstone
Chesa Sullivan SLTC Division Martel Bldg. 220 West Lamme, Ste. 1A Bozeman MT 59715	Phone: 586-4089	Beaverhead, Gallatin, Madison, Silver Bow
Gloria Garceau-Glaser 218 West Bell, Ste. 201 Glendive MT 59330	Phone: 377-6252	Carter, Custer, Daniels, Dawson, Fallon, Garfield, McCone, Powder River, Prarie, Richland, Roosevelt, Rosebud, Sheridan, Valley, Wibaux
Deljean Wadsworth Karla Eagan 201 1 st St. S Ste. 3 Great Falls, MT 59405	Phone: 453-8975 Phone: 453-8902	Blaine, Cascade, Choteau, Fergus, Glacier, Hill, Judith Basin, Liberty, Petroleum, Phillips, Pondera, Teton, Toole
Kieran Roberts 2030 11 th Avenue PO Box 4210 Helena MT 59604-4210	Phone: 444-1707	Broadwater, Deer Lodge, Granite, Jefferson, Lewis & Clark, Meagher, Powell, Montana State Prison, Montana State Hospital
Michelle Christensen 121 Financial Dr. #B Kalispell MT 59901	Phone: 755-5420	Flathead, Lake, Lincoln
Brenda Schmidt Autumn Holm 2681 Palmer, Ste. K Missoula MT 59808	Phone: 329-1312 Phone: 329-1310	Mineral, Missoula, Ravalli, Sanders



Questions or concerns for your Plan Facilitator:
