



### **Voluntary Services Program (VSP)**

Children and youth in Voluntary Services who live in out of state residences should have visits **at least 2 times per year**, one at the time of the plan (PPT or IEP) meeting and one for a 6 month review of the services. They should have an Individual Plan (IP). Important considerations when planning are to ensure their placement is appropriate and to plan for return to appropriate services in CT as soon as possible. The residential provider should submit monthly progress reports to the case manager. (Note: children and youth in Voluntary services who live in **in-state residential schools should have visits 3 times per year.**)

Case managers should update a Level of Need Assessment and Screening Tool (LON) for the child/youth on an annual basis, though will not be required to do formal Quality Service Reviews (QSRs) of the services. Case managers may coordinate visits with other case managers who support children or youth at the same facility or cover visits for other case managers.

### **Children in DCF Protective Services, LEA, and Other Agency Out of State Placements**

Children who are placed and funded in out of state residences by an LEA, DCF, or another agency are the primary responsibility of the placing agency and **do not require annual visits**. Case managers should do an Individual Plan – short form (IPS) every 3 years at an in-state meeting and/or by mail, phone, or secure Tumbleweed email referring to the child’s IEP or other agency plan. In order to plan the transition to DDS services, case managers should visit these children and complete an IP and a LON 3 years before the child is to age out. The case manager should update the LON and IP during the year before the individual ages out to reflect the most current information and the plan for transition to DDS services. Case managers are not required to do formal QSRs of the out of state residences that are the primary responsibility of another agency.

### **Adults in Out of State HCBS Qualified Vendors**

Adults on a HCBS waiver in out of state residences which are DDS qualified providers should have case manager visits **at least 2 times per year**, one at the time of the plan meeting and one for a plan progress review. They should have an Individual Plan (IP), not an IP Short Form (IPS). The provider should send six month progress reviews to the case manager. Case managers should update the LON for the individual on an annual basis, though will not be required to do formal QSRs of the services. Case managers may coordinate visits with other case managers who support individuals at the same facility or cover visits for other case managers.

### **Adults in Out of State Residences – Not on a Waiver**

Adults in out of state residences who are not on a waiver should have case manager visits **at least 2 times per year**, including once at the time of the plan. Case managers should complete an IP at least once every year. In developing the plan the case manager should review the appropriateness of the out of state placement and whether the individual retains his or her Connecticut residency. Case managers should update an LON for these adults every year. They are not required to do formal QSRs of these residences. Because DDS is the primary agency for these adults, case managers are required to visit every year regardless of distance. Locations that require more than a 4 hour drive each way may be visited once per year at the time of the plan. Case managers may coordinate visits with other case managers who support individuals at the same facility or cover visits for other case managers. Progress reviews for those in residences over 4 hours away may be done by mail, phone, or secure Tumbleweed email. When a change in residence, including return to Connecticut, is planned within a year, the case manager should visit the individual to update the LON and IP.