



www.vmrc.net

**VALLEY  
MOUNTAIN  
REGIONAL  
CENTER**

## Life with the Power of Choice and Possibilities

### **VMRC Stockton**

702 N. Aurora St.  
P. O. Box 692290  
Stockton, CA 95269-2290  
Phone: (209) 473-0951  
Fax: (209) 473-0256

### **VMRC Modesto**

1820 Blue Gum Avenue  
Modesto, CA 95358  
Phone: (209) 529-2626  
Fax: (209) 557-2173

### **VMRC San Andreas**

704 Mountain Ranch Road,  
Suite 203  
San Andreas, CA 95249  
Phone: (209) 754-1871  
Fax: (209) 754-3211

### **VMRC Tracy**

4596 S. Tracy Blvd  
Tracy, CA 95377  
Phone: (209) 498-5724  
Fax: (209) 627-4031

## VALLEY MOUNTAIN REGIONAL CENTER SERVICE STANDARD

### PATCH SERVICES / PROGRAM SUPPORT

#### PURPOSE AND PHILOSOPHY:

The purpose of this service standard is to prevent a consumer from having to move to a more restrictive setting. Valley Mountain Regional Center can, in very specific circumstances, increase the level of staff services the consumer is receiving in community residential or day program settings through funding additional staffing hours. This is commonly known as "PATCH" and technically falls under the "program support services" vendor category. These services are time limited and subject to periodic review and ongoing monitoring.

#### ELIGIBILITY:

To be eligible for PATCH services purchased by VMRC, the following criteria shall be met:

1. Interdisciplinary Team (referred to as ID Team) shall meet to determine that the consumer is at risk for placement in a more restrictive residential or day program if additional staffing hours are not provided in the consumer's current setting. ID Team may include the following members: Consumer and his/her legally authorized representative, Service Coordinator, Service Provider, the Program Manager, and appropriate clinical staff ( if necessary).
2. SC will consult with Resource Development regarding the staffing ratios and program design.
3. ID Team shall determine that there are no other facilities at the same or less restrictive level able to provide the required consumer services.

4. ID Team shall determine that the PATCH services are not available through a generic resource.
5. The provider of the proposed PATCH service shall develop a "PATCH Plan, Behavior Plan or Skill Acquisition plan" for Behavior Management Programs, or RCF consistent with the attached "PATCH Services Guidelines for Service Providers." ISP to be developed within 60 days by RCF for initial placements.
6. ID Team shall review the attached "PATCH worksheet" to determine the proposed number of PATCH hours.
7. If after eligibility criteria 1 through 5 are met and PATCH services are determined to be the most cost effective way to provide needed services to the consumer, then a POS Exception shall be submitted for review and approval. The need for PATCH services shall be identified in the consumer's IPP.
8. SC shall determine that there is a current vendorization service code of 109 for residential facilities and a code of 110 for day programs. If the Service Provider is unable to staff PATCH services or is not willing to become vendored, then the Planning Team may consider alternate cost effective providers.

#### SERVICE MONITORING PROCERDURES ARE AS FOLLOWS:

1. The Service Coordinator will review the PATCH services, at least quarterly or as needed.
2. Service provider will submit monthly documentation regarding PATCH progress and staffing to the Service Coordinator.
3. If the PATCH plan is not meeting the needs of the consumer or the fading plan is not progressing satisfactorily, then the ID Team shall re-convene at least quarterly to discuss the continued appropriateness of the PATCH service. ID Team shall also review alternative resources available.
4. All PATCH POS' are considered exceptions. The ID Team must review PATCH services quarterly or as needed, unless determined otherwise by the ID Team.
5. The Service Provider must submit request to extend PATCH services prior to the end of the authorization, if the ID Team determines that the need for PATCH services are to be continued.
6. PATCH plan may be approved upon receipt of the plan, if received after the end of the authorization.
7. Service Coordinator will complete Resource Development-Needs Assessment Survey.

## EXCEPTIONS AND APPEALS PROCESS:

As with all VMRC purchased services, if the ID Team determines that sufficient support exists to request an exception, a purchase of service exceptions request should be submitted.

VMRC recognizes that there may be occasions when a decision is made by VMRC that may not satisfy the consumer or his/her legally authorized representative. When the consumer or his/her legally authorized representative believes that a VMRC decision is illegal, discriminatory or not in the consumer's best interests, an appeal can be made to challenge that decision. All processes shall be in compliance with Welfare and Institutions Code, Section 4700-4730.

## **PATCH SERVICES GUIDELINES FOR SERVICE PROVIDERS**

All PATCH Services must include the following:

- a. Goal – the objective you are trying to achieve for the consumer, i.e. transition between residential facilities, transition between day programs, temporary medical issues, behavioral concerns, etc.
- b. History- Is this an initial request? Is there a past history? What other attempts have been made? What has been tried in the past? (Consultants? Generic resources?)
- c. Current status – the current consumer needs that will be targeted in the PATCH services. How are these services outside your approved program design?
- d. Design
  - i. Number of hours requested (per the PATCH worksheet) and when the hours will be provided during the daily schedule.
  - ii. Specific services consumer will be receiving during identified hours to include Behavior Plan, Skill Acquisition Plan, or Health/Safety Plan.
  - iii. Service Provider shall submit monthly data with the PATCH request in the following format: i.e. Frequency, Duration, Barriers, and/or Severity, as applicable.
  - iv. Name of individual/individuals who will be providing the service. (If person(s) appears on your regular staffing schedule, please explain how you are going to replace them.)
- e. Fading Plan – specifics on how the plan will be faded out so that the consumer can be served within the normal service delivery system and/or how the PATCH services will be replaced with natural supports.
  - I. Is the consumer showing progress?
  - II. Is the consumer being integrated?
  - III. Is this a health & safety issue?
  - IV. At what intervals can PATCH be reduced?
- f. Documentation – how will the provision of services be documented.

## Residential PATCH Worksheet

Total # of hours that the consumer is not in scheduled programming outside of the home (factor in holidays and breaks) per week \_\_\_\_\_

- (minus) average sleeping hours per week (unless contraindicated by AWOL risk, medical risk, etc that would place the consumer at substantial danger to him/herself and/or others) \_\_\_\_\_
- (minus) generic or other in-home resources/activities such as nursing services, Crisis Service Teams, in-home counseling, education, etc. \_\_\_\_\_
- (minus- Level IV ONLY) consultant services as mandated by Title 17 and referenced in provider's program design. \_\_\_\_\_
- (minus) in-home hours that do not require PATCH services (consider behavioral and medical factors such as severity, frequency, duration, triggers, time-specific events) \_\_\_\_\_

Total Patch service hours needed per week \_\_\_\_\_

## Day Program PATCH Worksheet

Total # of hours that the consumer is in the day program per week (excluding holidays) \_\_\_\_\_

- (minus) generic or other resources/activities such as Crisis Service Teams, counseling behavioral services, educational services, etc. \_\_\_\_\_
- (minus) consultant services referenced in provider's program design \_\_\_\_\_
- (minus) day program hours that do not require PATCH services (consider behavioral and medical factors such as severity, frequency, duration, triggers, time-specific events) \_\_\_\_\_

Total PATCH service hours needed per week \_\_\_\_\_