ORGANIZATIONAL PROCEDURE



POLICY TITLE:	COMMUNITY LIVING HOUSING PREFERENCES		
Topic Area:	SERVICE DELIVERY		REVIEW DATES
Applies to:	LRE staff and operations, All Member CMHSP's and Contractual Providers	ISSUED BY: Chief Executive Officer	8/21/14
REVIEW CYCLE:	Annually	APPROVED BY: Board of Directors	
Developed and Maintained by:	Chief Clinical Officer		
Supersedes:	N/A	Effective Date: January 1, 2014	Revised Date: May 19, 2022

I. PURPOSE

Lakeshore Regional Entity (LRE)will ensure that customers, including those customers being discharge/released from institutions, will be assessed by treatment professionals to determine the least restrictive, most fully inclusive and most appropriate living alternatives. The customer will be educated about their housing options and supports available. Treatment professionals will respect and support the housing preferences and choices of the customers they serve within those identified as the least restrictive and medically necessary options.

Utilizing the Person-centered Planning process, LRE will assure that the individual customer maximizes their independence and works towards achieving their chosen outcomes. LRE shall ensure that CMHSP's/providers are appropriately credentialed and able to provide the quality services necessary to enable the individual to reside successfully in the community.

II. PROCEDURE

STANDARDS AND GUIDELINES

To ensure that services, programs and activities are provided in the most integrated and least restrictive setting appropriate to the needs of Lakeshore Regional Entity' customers.

- A. LRE will ensure that CMHSP's/providers are following the Americans with Disabilities Act (ADA) and prohibit discrimination in all services, programs and activities. LRE will develop and monitor organizational outcome measures to ensure compliance.
- B. LRE will ensure that CMHSP's and/or provider contract language or Program descriptions support the LRE Community Living procedure and all contractual and regulatory requirements surrounding integrated services.
- C. LRE will ensure discharge planning begins immediately upon any placement into an institutional setting or state facility. CMHSP's and/or providers will begin to identify appropriate placements are available upon the individual meeting discharge criteria.
- D. An appropriate discharge plan will be developed utilizing the person-centered planning process to identify the supports needed upon discharge (staffing ratio, specialty services

such as Occupational Therapy/Registered Nursing, legal involvement, medical needs, staff training, behavioral needs, etc.).

- E. LRE will monitor recidivism rates for inpatient and residential services to determine providers are supporting successful transitions from institutions to the community.
- F. LRE will ensure that CMHSP's/providers will adhere to Center for Medicare Services guidance regarding Community-Based Settings.

III. APPLICABILITY AND RESPONSIBILITY

This procedure applies to LRE staff and operations, Member CMHSP's and contracted providers.

IV. MONITORING AND REVIEW

This procedure will be reviewed by the Chief Clinical Officer or designee on an annual basis.

V. DEFINITIONS

Person Centered Planning: A process for planning and supporting the individual receiving services that builds upon the individual's capacity to engage in activities that promote community life and that honors the individual's preferences, choices and abilities. MCL 330.1700(g).

VI. RELATED POLICIES AND PROCEDURES

N/A

VII. REFERENCES/LEGAL AUTHORITY

A. Michigan Medicaid Provider Manual

VIII. CHANGE LOG

Date of Change	Description of Change	Responsible Party
1/1/2014	New Policy	Chief Clinical Officer
5/21	Annual Update	Chief Clinical Officer