



Caregiving Solutions

**Child Developmental Home
(CDH)**

&

**Adult Developmental Home
(ADH)**

Program



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Caregiving Solutions is an agency contracted with the Division of Developmental Disabilities (DDD) and registered with Arizona Health Care Cost Containment System (AHCCCS). We are certified to serve members of all ages from infants to seniors who are eligible for DDD services. In addition to the Developmental Home programs, Caregiving Solutions is also able to assist you by providing Developmental Special Instruction, Speech Therapy, Occupational Therapy, Physical Therapy, Respite, Attendant Care, Habilitation, and making arrangements for Day Treatment programs for Adults.

Caregiving Solutions Developmental Home program assists members and/or families in applying for and maintaining a License to care for a child or adult with developmental disabilities in the state of Arizona.

Licensing Requirements

- Applicants must be 21 years of age or older
- All family members must agree to become a CDH/ADH * You must be of honest and reputable character
- You must have available space in your home
- All adults in the household must be fingerprinted through the Office of Special Investigations
- All adults in the household must submit to a background check through Child Protective Services and Adult Protective Services
- You must provide releases of information to conduct all background checks
- All adults in the household must submit a Physician's Statement
- All adults must submit to all other medical testing that may be required by your physician or Caregiving Solutions
- You must submit immunization records for each child in the home
- You must have income or resources to meet the financial needs of the family and show proof of income and other resources
- You must complete the training process
- You must participate in the interview process when completing your home study
- You must have reliable transportation, and current insurance and registration
- Your home must pass the state inspection
- You must be able to meet the needs of the children or adults placed in your home

Provided Support

Applicants may choose to provide care to a child or adult, male or female. The characteristics of your desired placement will be thoroughly discussed during the application process. The members placed in developmental homes come from a wide range of disabilities, medical conditions, and/or behavioral issues. The applicant(s) strengths will be considered when making a placement.

Once an applicant is licensed as an ADH/CDH Provider and placement is made the providers are paid for two services: Room/Board and Habilitation.

Room and Board reimburses the providers for all household expenses, such as groceries and hygiene supplies. **Habilitation** pays for the support and training Providers give to the member placed in their home. These two services are combined into a daily rate, which will be paid every day the member is in



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the provider's home (Providers will not be paid for times when the member is in the hospital or nursing facility).

A daily respite stipend is also paid at a daily rate for the provider to use at their discretion. It is the provider's responsibility to identify appropriate respite providers for times when they will be unable to care for the member (due to work hours, a needed break, etc.). An appropriate respite provider must hold a current fingerprint clearance card and be trained in CPR, first aid, and Article 9. Caregiving Solutions will arrange several opportunities throughout the year for providers to meet and collaborate with one another for respite care. If respite is to be provided in the respite provider's home, they must also pass the state home inspection. Every respite provider must be approved by Caregiving Solutions prior to providing services. Additionally, all necessary information and training for potential respite providers is offered through Caregiving Solutions.

Our providers are reimbursed twice per month but are not considered employees of Caregiving Solutions. They are Independent Contractors. Caregiving Solutions will not deduct payroll taxes. The developmental home reimbursement is tax-free. Providers may choose work a second job outside of the home if it does not interfere with their primary roll which is to provide care to the member placed in your home.

Your primary roll is caring for the member and must always be your priority!

Expectations:

- Provide a furnished bedroom (there are certain restrictions on sharing bedrooms)
- Ensure all health and nutritional needs are met
- Include the member in all family activities and routines
- Protect the member from harm and exploitation
- Assist the member in developing and fostering personal relationships
- Provide an opportunity for the member to pursue their own religious beliefs
- Provide transportation to meet their educational, medical, habilitation, employment, therapeutic and social needs
- Assist the member with day to day concerns regarding school, work, friends, and family
- Provide positive reinforcement and encouragement
- Ensure appropriate hygiene and attire
- Prepare for and participate in IEP, IFSP, and ISP meetings and carry out assignments from the meetings
- Complete all required paperwork in a timely fashion
- Ensure that the member's rights are respected and that they are treated fairly and humanely
- Advocate for what is in the best interest of the member



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Caregiving Solutions' Role

Support Coordinator Assistants have multiple functions: educator, advocate, and regulator. Frequent contact with providers ensures that you are maintaining all licensing and record-keeping requirements. We will coordinate your on-going training and ensure your yearly renewal is a smooth process. We will be an advocate for both member and provider by arranging face-to-face meetings monthly and as needed, attending necessary meetings, assisting with state compliance requirement and resolving problems. **Home visits will take place a minimum of once per month.**

The decision to become a licensed Developmental Home provider should be carefully thought out. Please take some time to consider the impact that caring for another person in your home will have on you and your family. If becoming a Developmental Home provider seems like too much of a commitment at this time, please consider other ways that you can make a positive impact on the lives of members with disabilities. Some options are: becoming a direct care worker, volunteering at various agencies and events supporting members with disabilities, become a licensed respite provider, or become a Court Appointed Special Advocate (CASA).

Thank you for your interest in the Caregiving Solutions Developmental Home and Support Programs. Please call Caregiving Solutions with any questions or to state your desire to begin the licensing process.



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Initial Interest Application

Name: _____

Address: _____

How did you hear about Caregiving Solutions? _____

Phone #: _____ Email: _____

What is your motivation for becoming licensed as a Developmental Home provider? _____

Do you want to care for Children or Adults? _____ What age range? _____

Do you have any experience working with individuals with disabilities? _____ Yes _____ No

If so, please describe (what was the setting, what were your responsibilities, what is the length of your experience)? _____

How many people live in your home and what are their ages? _____

Has anyone in the home been convicted of a felony? _____ Yes _____ No. If so, please explain the circumstances (a felony conviction is not an automatic disqualifier but will require further investigation).



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Do you have a current fingerprint clearance card? _____ Yes _____ No. Has anyone in the home been contacted by Child or Adult Protective Services? _____ Yes _____ No If yes, please explain the circumstances. _____

Describe your home. (house, apartment, trampoline, pool, spa or other bodies of water on the property etc...).

Are you currently employed? _____ Yes _____ No? If so, please describe your work schedule. _____

Are you currently able to meet your financial responsibilities? _____ Yes _____ No

Please address any concerns that may come to our attention during the licensing process. _____
