

Rock County Human Services Residential Agreement for Services

This is an agreement between the Rock County Human Services, _____,
(Resident)
_____, and _____ for the placement of
(Guardian/POA if applicable) (Residential Provider)
_____.
(Resident)

1. This agreement of services shall be complete prior to placement except in an emergency, in which case the agreement shall be developed within seven (7) days after placement.
2. In consideration of the Resident's needs as determined by the Residential Rate Assessment tool, the individual service needs and client's financial abilities to contribute, the following is mutually agreed upon for payment:

Monthly Care and Supervision Rate: \$ _____

Monthly Room and Board Rate: \$ _____

Total Monthly Rate Paid to Provider: \$ _____

This rate begins on _____, 20____

3. Monthly Care and Supervision payments are made to the Residential Provider for the previous month's service **after the 3rd Monday of each month**.
4. The resident/guardian, POA or Representative Payee _____ will be responsible for the Client Contribution in the amount of \$ _____/Month. **Payment will be expected by the 5th of each month to the Residential Provider.** In the event Rock County pays a portion of Room and Board costs that disbursement will occur with the Care and Supervision payment.
5. If the Residential Provider is required to assist with money management of the resident's personal spending allowance, _____ is hereby granted permission to handle the sum of \$ _____ per month.
6. Financial ledgers must be kept on a monthly basis that account for the receipt and expenditure of each resident's funds. The resident's personal allowance money must be kept separate from those of the Residential Provider. When resident funds exceed \$200, they shall be deposited in a separate bank account opened in the name of the resident after consultation with the case manager/service coordinator.
7. Normal procedure calls for a thirty (30) day written notice for termination of this placement. A 30 day notice is not required due to the death of a resident, when residential certification is revoked by State or Local (MCO/IRIS) certifying entity, or when an emergency termination is necessary to prevent harm to the health and safety of the resident or other household members. Written notice can be given by the sponsor, resident, or case manager to all parties listed on the agreement.
8. When situations arise where a resident needs to be temporarily absent from a residential setting, i.e. hospitalization or vacations without the sponsor, the placement can be "held" by the placement being funded, in full, up to 30 days. When a residential provider requests a temporary interruption in their duties of caring for the resident resulting in the resident being cared for in another setting, the placement will be "held" through payment, for up to 30 days, of the provider's room and board portion of the monthly rate. When a resident leaves the residential setting, on a permanent basis, the charges will be pro-rated accordingly.
9. As part of a resident's care plan, the placing case manager may approve the inclusion of a respite payment to a residential provider. That money would be used by the provider to pay for the resident's temporary care from another provider. In such situations, the provider is responsible for ensuring that the substitute provider meets the standards necessary to provide such care. Such assurance would be accomplished by the Residential entity providing the case manager with the required **provider back ground check and completed training documentation** for each respite provider utilized. It is the sole responsibility of the respite care provider(s) to report income received for providing respite services, to the I.R.S., in accordance with all applicable regulations.
10. Respite Care may be provided within the home in accordance with standards set forth in the statute and/or administrative rule under which the home is certified.

11. The parties agree that all firearms owned by the residential providers not actually being used for a lawful purpose shall be locked in a cabinet, safe, or other safe storage unit, or in the alternative, any such firearm shall be rendered safe, when not in actual use for a lawful purpose, by the use of a trigger locking device designed to prevent the firearm from being fired. The parties further agree that the providers shall not carry concealed weapons either in the residential or in the presence of the client when outside of the home.
12. A copy of the Resident Rights as set forth in s. 51.61, Stats. and chpt. HFS 94, and 202.07 of these standards have been provided and explained to the resident, resident's guardian, if any, and the adult family home sponsor.
13. A resident may file a grievance if he/she or the guardian believes that his/her rights have been violated. To file a grievance, contact the Client Rights Specialist at P.O. Box 1649, Janesville, WI, 53547.
14. Expectations of Residential Provider:
 - a. Complete monthly medication logs and financial ledgers.
 - b. Provide the support, supervision and services identified on the Resident's service plan.
 - c. Complete training as required and outlined in the statute governing the certification of the placement.
 - d. The provider agrees to interact with the resident in a manner that is respectful and age appropriate. No provider or household member may subject a resident to mental or physical abuse or otherwise maltreat the resident
 - e. Provide opportunities for the resident to be involved in community activities.
 - f. Provide for at least three meals per day.
 - g. Provide adequate storage for resident's belongings.
 - h. Other: _____
15. Expectations of the Resident:
 - a. Treat members of the residential setting with courtesy and respect.
 - b. Adhere to the smoking policy of the home.
 - c. Obtain a TB (tuberculosis) skin test prior to placement. In emergency situations, the TB test can be done as soon as possible after placement.
 - d. Have an annual medical exam by a physician, physician assistant, or nurse practitioner to identify any health problems.
 - e. Take medication as prescribed.
 - f. Other: _____
16. Expectations of the Compliance Entity and Case Manager:
 - a. Provide Residential entity with detailed client needs based documentation upon referral for placement and at time of placement into the residential setting.
 - b. Monitor the Residential Service Plan and complete 6 month reviews to ensure that adequate services are being provided.
 - c. Assess all referrals for residential placements and refer residents to the provider as appropriate.
 - d. Review certification and annual renewal of certification.
 - e. Provide ongoing training and support as it pertains to the resident's needs.
 - f. Review required documentation to ensure compliance with outlined quality improvement measures outlined by the contracting entity.
 - g. Other: _____

Agreement for Services Signatures:

(This agreement must be completed annually **and** when a rate change occurs.)

Resident	Date
Guardian/POA (if applicable)	Date
Residential Provider	Date
Case Manager	Date

Original- Case Manager file

cc: Residential Provider
Resident/Guardian or POA