WELCOME

SINGLE POINT OF ENTRY TRAINING
What to expect from this training

- This training will provide an overview of the proposal, licensing, rate setting, and contracting processes.
- This is the first step in the licensing process.
- This training is for Department of Health and Mental Hygiene (DHMH) licensed Homes ONLY:
  - Therapeutic Group Homes (TGH)
  - Alternative Living Units (ALU)
  - Group Homes for the Developmentally Disabled (DDA GH)
Statement of Need

The Statement of Need is defined in COMAR 14.31.09.

- The Department for Human Resources and Juvenile Services only will accept proposals for new licenses or requests for expansions of existing licenses when a Statement of Need (SON) has been issued.

- When a licensing agency issues a Statement of Need, it will be published in the Maryland Register.
Things to Consider

The process of becoming licensed to operate a group home for children is not easy and will take a lot of time and energy on your part. You need to ask yourself:

- Am I qualified to run a group home?
- What experience do I have with the population I intend to serve?
- Is my program needed in the area where I plan to locate?
- Do I have the financial resources to start a new business?
- Do I have the business expertise to start a new business?
A therapeutic group home must be a nonprofit

Not for Profit Corporations

- Forming a 503-C, or nonprofit, corporation follows the same guidelines as forming a regular corporation, except for applying for federal and state tax exemption status.

- Profits are put back into the organization.

- A benefit of being a nonprofit corporation is that there may be more opportunities for grants, charitable donations, etc.
Starting Up A Business

Available Resources for Information

- Small Business Development Center
  - [http://www.sba.gov/content/small-business-development-centers-sbdcs](http://www.sba.gov/content/small-business-development-centers-sbdcs)

- Maryland Small Business Development Center
  - [http://choosemaryland.org/blis/Pages/Default.aspx](http://choosemaryland.org/blis/Pages/Default.aspx)

- U.S. Small Business Administration
Applicable COMAR Regulations

- **COMAR 14.31.06** articulates the standards that must be met and maintained by residential child care programs for children and youth. These requirements are designed to protect the health, safety, and well being of children placed in residential child care programs.

- **COMAR 14.31.05** and **14.31.06** apply to all programs regardless of licensing agency.

- **COMAR 14.31.07** applies to special kinds of programs:
  - Secure Care, Wilderness, Medically Fragile, developmentally Disabled, Shelter, Pregnant Adolescent, Mother/Infant, Respite Care

- **COMAR 10.22.02** and **10.27** apply to programs that are licensed by the Developmental Disabilities Administration.
Levels of Intensity

**What are Levels of Intensity (LOI) ?**

- Established to provide caseworkers and others with information regarding community-based programs in order to make informed placement decisions.

- Identify and define the scope and intensity of services available to accommodate the diverse needs of children and their families.

- Service intensity levels distinguish the capabilities of programs in five service domains.
Levels of Intensity

Services in each of these domains are provided with varying degrees of intensity. The five service domains are:

• Twenty-Four-Hour Milieu Care and Supervision
• Clinical Treatment Services
• Education Services
• Health/Medical Services; and
• Family Support Services

More information about LOIs can be found at: http://goc.maryland.gov/LOI.html
The Department of Health and Mental Hygiene (DHMH) licenses the following types of group homes:

- Therapeutic Group Homes (TGH)
- Alternative Living Units (ALU)
- Group Homes for the Developmentally Disabled (DDA GH)
What is a Therapeutic Group Home (TGH)?

- Alternative to Residential Treatment Centers, and as such are the most intensive community-based services available.
- Typically a step down from more restrictive environments.
- Have a 1:3 staff to resident ratio, a licensed mental health professional on-site, and 24 hour overnight staff that must maintain being awake.
- All children receive individual and group therapy. Family therapy and medication management is available to every child as needed.
Therapeutic Group Home Setting

- A TGH is a setting that is designed to promote age-appropriate:
  - interpersonal skills,
  - self-sufficiency, and
  - personal responsibility

- TGHs utilize an interdisciplinary approach and an individualized range of services that may include individual, group, milieu, family, educational, and behavioral treatment in a small private group home.

- These youth evidence behavioral and psychiatric problems. Therapeutic Group Homes serve youth ages 6-12 and 12-18 with a capacity of eight youth per facility.
Therapeutic Group Home Services

- Children or youth in a TGH have a diagnosis of mental illness and/or are seriously emotionally disturbed.
  - Have a history of psychiatric hospitalizations and/or placements in RTCs and are responsive to effective clinical intervention outside of a hospital or residential treatment center setting.
  - Need continuous case management, ongoing assessment, and an intensive, more highly integrated regimen of therapies for all or a significant period of time related to the reasons for the therapeutic group home placement.
  - May benefit from high intensity clinical treatment services.
Therapeutic Group Home Services

- High intensity clinical treatment services may be appropriate for children in a behavioral milieu, e.g., a program structured for juvenile offenders, when there are indications that such treatment will contribute to the goals of the placement of such youth.
Developmental Disabilities

- Developmental disability is defined as a severe chronic disability of an individual that:
  - Is attributable to a physical or mental impairment, other than the sole diagnosis of mental illness, or to a combination of mental and physical impairments;
  - Is likely to continue indefinitely;
  - Is manifested in an individual younger than 22 years old;
  - Results in an inability to live independently without external support or continuing and regular assistance;
  - Reflects the need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are individually planned and coordinated for the individual.
Alternative Living Unit (ALU)

- A residence licensed by the Department of Developmental Disabilities (DDA) that provides residential services for children in out-of-home care who, because of a developmental disability, require specialized living arrangements; and admits not more than 3 individuals.

Group Homes for the Developmentally Disabled

- A residence licensed by DDA that provides residential services for children in out-of-home care who need more structure and supervision than a relative, foster parent or treatment foster parent could offer, with a formal program of basic care, social work and health care services; and with a capacity of 4 to 8 youth per home.
This part of the training provides an overview of the proposal, licensing, rate setting, and contracting processes.

Submitting a proposal is the first step in the licensing process.

Your proposal will be submitted via the State Children, Youth and Families Information System (SCYFIS).

A proposal guideline is available at:
http://goc.maryland.gov/morespi.html
The Proposal

- The purpose of the proposal:
  - Demonstrate an understanding of the needs of the population to be served
  - Describe the services to be provided
  - Demonstrate an understanding of how regulations translate into programmatic practice

- The proposal packet consists of 6 sections that need to be completed. They are:
  1. Proposal Face Sheet
  2. Proposal Outline
  3. Daily Schedule
  4. Staffing
  5. Resumes
  6. Financial Management Plan
Hiring a Consultant

Please consider the following if you are planning on hiring a consultant to help you write your proposal:

- It is permissible to use a consultant
- Buyer Beware!
- You should get references
- You should be involved
- You should read what is written
- You must provide name of consultant

Please note: the Governor’s Office for Children will not suggest a consultant for you to use.
Proposal Section 1: FACE SHEET

Proposal Face Sheet
The face sheet is the first part of the proposal. You will need to list your organization’s contact information and indicate the population to be served.

- Follow the directions. Definitions and directions for completing the face sheet can be viewed by clicking on the question mark to the right side of the SCYFIS screen.
- All sections must be complete.
- Provide the name of any person(s) who assisted with the proposal whether paid or unpaid.
- Misrepresentation of information will be grounds for rejection of your proposal.
Mission Statement

- A mission statement offers the mission, purpose and goals of the organization. It should include:
  - Philosophy of Care
  - Should be linked to the population you plan to serve

- The Mission Statement and Face Sheet should compliment each other.
Certified Program Administrator
The responsibilities of the Program Administrator are laid out in **COMAR 14.31.06.06**

- The individual, regardless of title, who is responsible for the overall day to day operation of the program.
- Responsible for the implementation of all policies.
- Responsible for maintenance of the physical plant.
- Responsible for fiscal accountability.

For more information go to: [http://dhmh.maryland.gov/crccp/index.html](http://dhmh.maryland.gov/crccp/index.html)
Program Administrator Qualifications
As per **Health Occupations Article § 20-30**, to qualify for a certificate as a program administrator, an applicant must meet the following requirements:

- Bachelor's Degree from an accredited college or university and
  - at least 4 years experience in the human service field with at least 3 years in a supervisory or Administrative capacity; or

- Masters degree from an accredited college or university and
  - 1 year experience in human services field in supervisory or administrative capacity.

- Examination: The designated Program Administrator must pass an examination given by the State Certification Board.
Personal or Organization History

- It is important that the organizational history include detailed relevant experience:
  - Provide a brief history of the organization.
  - What experience do you have working with children and families?
  - What experience do you have working with the specified population?
  - What experience do you have working with children in a residential setting?
Board of Directors

- A body of elected or appointed members who jointly oversee the activities of an organization. The responsibilities of a Board for residential group homes are outlined in **COMAR 14.31.06.04**. A well rounded Board should have individuals who bring expertise in a variety of areas.

- TGH governing bodies follow **COMAR 10.21.07.06(A)**.

- DDA licensed group homes can be found in **COMAR 10.22.08**.
Advisory Boards

- A TGH must have an Advisory Board if the Board does not meet the requirements outlined in 10.21.07.06(A).
  - An Advisory Committee is required to comply with COMAR 10.21.07.06(B).
  - Governing Boards of DDA licensed homes must also meet the criteria of 10.22.02.08.
- All out-of-state organizations are required to have an Advisory Board.
Proposal Section 2: OUTLINE

Program Description

- The Program Description must be specific to the type of residential group home proposed and meet the appropriate COMAR regulations. Detailed description of your program’s residential plan is required.

- If you have questions as to the type program required for the group home you are proposing, you can refer to the Levels of Intensity to help make that determination.
Assessment of Need

- The assessment of need has to be specific to the population to be served in the area where the program is to be located. You will need to indicate a need for the services you are proposing.
  - Expand on your rationale for choosing specific location.
  - Reference source of information – local data, conversations with local agencies and stakeholders, etc.
Proposal Section 2: OUTLINE

Marketing Plan

- This section explains how your program will gain exposure in the community and surrounding areas.
  - What is your marketing plan? You will need to clearly indicate what the plan will be and who will be responsible for implementing it.
  - How will placement workers know about your program?
Community Relations Plan

- The Community Relations Plan is covered in COMAR 14.31.06.09. It should detail how the program and its staff will work with the greater community.
  - How will the program be introduced to the neighbors prior to moving in?
  - It should include a detailed training program on how staff and youth will deal with potentially hostile neighbors.
  - An on-going relations plan will need to be developed and submitted.
Education Plan

- The education plan is covered in COMAR 14.31.06.12. It details how the program work with the local school system in guarantee the clients receive appropriate school education.
  - How will you introduce your program to the local school system?
  - How will you work with the local schools?
  - How will you ensure special education needs are met?
  - How will you ensure that clients are able to participate in all activities?
  - How will your program support clients’ academic achievement?
Health Care Access and Supervision

- The health care access and supervision plan is covered in COMAR 14.31.06.13. A written plan for the provision of medical, dental, and mental health care for the clients must be submitted. The health care plan needs to cover:
  - Nutrition
  - Routine and emergency health care
  - Routine and emergency dental care
  - Medication administration
  - How your program handle medical emergencies
  - You will need to explain how your program will work with ValueOptions® to obtain medical services
Mental Health Care Access and Supervision

- If your program will provide mental health services the mental health care access and supervision plan needs to summarize the services offered.
  - It will need to explain how your program will work with the American Psychiatric Services to obtain and ensure proper mental health services.
  - A crisis intervention strategy needs to be elaborated on. It should explain how your program will handle mental health emergencies.
  - A per diem rate for mental health services will need to be communicated.
Management Plan

- The management plan needs to clearly indicate responsibility and credentials required for each staff member and consultant.
  - Complete the staffing chart showing all employees, listed individually, with days and hours of work.
  - How will you recruit and train new personnel? What are your ongoing plans for training personnel?
  - The management plan needs to include additional programmatic staffing requirements as indicated in COMAR:
    - Therapeutic Group Homes COMAR 10.21.07.
    - DDA licensed homes COMAR 14.31.07 & 10.22.02.
Proposal Section 2: OUTLINE

Program Structure

- The program structure is essentially how you will implement your program. It is made up of three sections: Daily Schedule, Staffing Schedule and Resumes.
  - The schedule should include activities and accommodation of clients who wish to practice their religious beliefs and alternative programming for those who prefer to opt out.
  - Accurately list staff to client ratios. A scheduling pattern for staff is required.
  - Description of staff roles and how they will interact with clients. Include resumes of key staff.
  - Types of services offered. Realistic expectations for the age group served.
Financial Management Plan

- The financial management plan should outline the projected revenues and expenses over a period of a year.
  - Itemized list of start up costs needs to be included. Source of start up money and a plan to cover unexpected start up costs.
    - Including a detailed plan to cover 3-6 months of operating costs.
  - Preliminary operating budget for 1 year.
    - Includes salary detail for all positions.
  - A plan for building a cash reserve to cover unexpected major costs and times when the program is not full.
The Process

- Proposal Submission Process
- Licensing Process
- Rate Setting Process
- Contracting Process
Proposal Submission Process

Your Proposal must be submitted through SCYFIS. Paper submissions will not be accepted.

- Upon completion of the 2nd part of the Single Point of Entry (SPE) training you will receive a SCYFIS access request form.
- The proposal has to be submitted in its entirety within a year of this SPE training.
- The Governor’s Office for Children (GOC) has 90 days to be review the proposal.
- You will receive a letter indicating whether your proposal has meet all requirements or if revisions are needed.
  - Revisions must be submitted within 60 days.
  - This cycle may repeat as needed.
- Once approved you will be assigned to the appropriate licensing Agency.
Licensing Process

The licensing process only begins once your proposal has been approved by GOC.

- Obtain and complete from the Department of Health and Mental Hygiene a licensing application.
  - Approval of policy & procedures.
  - Approval of the program service and business plans.
- Approval of physical plant by the licensing agency. It is recommended that you do not get your home too soon in the process.
- It is only after all of these steps are completed that a license will be issued. Clients will not be placed in a group home until a contract has been entered into.
Licensing Process

What does getting a license mean?

- The license will be granted by the Department of Health and Mental Hygiene and issued by the Office of Health Care Quality (OHCQ)
  - Business license to operate.
  - A license can not be sold or transferred to another location.

- What is the difference between license capacity and contract capacity?
  - License capacity is the legal maximum number of residents you may have in your facility at any one point in time.
  - Contract capacity is the maximum number of beds contracted by a particular agency.
Rate Setting Process

Rates are set by the Interagency Rates Committee (IRC) housed at Maryland State Department of Education (MSDE).

- Payment rates are determined by the levels of intensity of services provided.
- The IRC can not grant a rate until a program has completed the licensure process.
- All contracting agencies will use the rate set by the IRC.
- Work with your licensing agency to determine when to submit a request to the IRC for a Rate Setting Package.

http://www.irc.marylandpublicschools.org
Rate Setting Process

Rates Per Bed
The following is an example of how the rate setting process works.

Average rate for a Alternative Living Unit / Group home is $86,500 based on 90% occupancy.
Example 3 beds x 90% = 2.7 x 86,500 = $233,550

Average rate for a Therapeutic Group Home is $90,600 based on 90% occupancy.
Example 8 beds x 90% = 7.2 x $90,600 = $652,320
Thank you for participating!

- All information is available on our website: www.goc.maryland.gov
- Please complete your evaluations.
- Good luck!