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‘CRISIS CRITERIA’ TO OBTAIN FUNDING FOR CHILDREN & ADULTS WITH DEVELOPMENTAL DISABILITIES

For your information, attached is a 2 page document which sets forth the crisis or emergency ‘criteria’ for **children** to obtain funding from the State of Illinois. Also, attached is a 2 page document which sets forth the crisis or emergency ‘criteria’ for **adults** to obtain funding from the State of Illinois.

The fact that your child or adult son or daughter does not satisfy the crisis or emergency ‘criteria’ does not necessarily mean that you child is not entitled to funding for services as a matter of federal law. If you are unable to obtain funding for services, then you may want to contact, Attorney Robert H. Farley, Jr., and discuss your options.

Department of Human Services (DHS)/Division of Developmental Disabilities (DDD)
Children Crisis Criteria for Funding - Effective April 16, 2008

The crisis criteria for imminent risk of abuse, neglect, or homelessness are the highest funding priorities of the Division of Developmental Disabilities (DDD) for children who are 3 to 17 years old. Each child's urgency of need must be reflected in the PUNS database. In submitting the request for crisis authorization, the Pre-Admission Screening/Independent Service Coordination (PAS/ISC) agency must share in writing with the network staff the proposed plan(s) that have been arranged and/or scheduled for service implementation. It is expected that services will be implemented generally within a 24 to 72 hour period. The local PAS/ISC agency shall report all instances of possible abuse, neglect, and/or homelessness to the appropriate entity(s) as directed by applicable state, federal, and/or local laws, rules, regulations, and policies.

The crisis criteria relate to Waiver-Funded Children's Home-Based Services (CHBS) and Children's Group Homes (CGHs - Program 17D). The emergency crisis criteria also apply to admissions to Child Care Institutions (CCIs - Program 19D). These criteria do not apply to respite and Skilled Nursing Facilities/Pediatric (SNFs/Ped). Children who are wards of the State are not eligible for funding authorized by the DDD.

The Division's decision regarding the type of service to authorize will be based on the specific needs of the child. In reviewing whether or not the child meets the crisis criteria, the DDD will consider, but not limit itself to, the following, which are presented in priority order:

1. The caregiver is unable to keep the child safe;
2. The caregiver is unable to meet the child's support needs. The family dynamics (e.g., multiple children with disabilities dependent upon the caregiver) as correlated with the medical, physical, and/or behavioral needs of the child place demands on the family that put the child and/or family member(s) at serious risk; or
3. The child's behaviors (e.g., verbal and/or physical aggression, bodily harm to self and/or others) put the child and/or family member(s) at risk of serious harm

Case 1 - Example of imminent risk of neglect:

The 8 year old child attends school for half days. The father works part time while the child is at school. The mother works full time. The family receives 2 hours per week of respite services for the child. The child resides with his parents and three younger siblings (ages range from 2 to 6 years old). The siblings are active and healthy and do not have a disability. The father is the sole caregiver for the four children.

The child requires constant monitoring and provision of physical care. Because of the child's physical needs, the caregivers must be trained and responsible for monitoring his condition. The family reports increased stress of caring for the son as they have reported to the PAS/ISC agency that they want him to remain in the family home, but are feeling overwhelmed with his care. The father recently questioned whether he can continue to keep the child home as he feels he is not able to keep up with all of the child's needs. The child does not sleep well and the father is up most of the night trying to comfort him and get him back to sleep. The father reports that, at times, he is unable to care for his son and leaves the child in bed for periods of time without attending to his needs. The father feels very guilty about this, but he reports not knowing what else to do.

The child has been diagnosed with Severe Mental Retardation, Seizure Disorder, and Severe Neurological Deficits including motor impairments. The child has cortical vision loss. He is non-verbal and non-ambulatory. The child takes multiple seizure medications but continues to have breakthrough seizures daily and some of the seizures are severe.

Case 2 - Example of imminent risk of homeless:

Two brothers are currently receiving Children Home-Based Services (CHBS). The father who was the primary caregiver for the children recently died. The mother works full time. The two children are larger in height and weight than their mother, thereby making it difficult for her to physically address their support needs. The physical stature of the boys, their overwhelming support needs, and the mother's work schedule contribute to the mother's inability to care for her children. Until residential services for the children can be identified and authorized, the local PAS/ISC agency has obtained respite services for both children. There are no other family members in/near the area to help the mother address the support needs of the children.

Both children have been diagnosed with Severe Mental Retardation and Autism. One child has a diagnosis of epilepsy with controlled seizures. The other child, if not closely monitored, attempts to run away from the home during the night. Both children exhibit pica behavior, severe tantrums, and incontinence. They use pull-up undergarments and smear feces.

Case 3 - Example of imminent risk of abuse directed toward a younger sibling and Mother:

The child is living with his mother, stepfather, and two younger sisters, ages 4 and 7. The child has been observed kicking, hitting, pushing, and biting self and others. He recently attempted to push his 4 year old sister down a flight of stairs during an episode of agitation. His 7 year old sister is frightened of him and starts to cry when he enters the room. His parents are unable to deter their son's aggressive behavior, which has been focused on his sisters and most recently on his mother.

As a result of the ongoing severity and frequency of his aggressive behaviors toward family members coupled with his size and strength, the family is unable to manage the child in the home. The child exhibits aggressive behaviors 10 to 15 times per day. The mother is seven months pregnant. The obstetrician has advised the mother that addressing her child's severe behaviors and extensive support needs is detrimental to her health and the health and welfare of the younger siblings and her unborn baby. The biological father has refused to assist with the care of the child. The family has received respite services but the respite provider has had difficulty managing his behaviors and has indicated to the family that they feel he needs more intensive services. After further discussions with the family and local PAS/ISC, it is felt that the child's aggressive outbursts toward his younger sisters and mother are putting them at risk of physical harm.

The child is 11 years old with Severe Mental Retardation, Autism, Intermittent Explosive Disorder, and Seizure Disorder.

Department of Human Services (DHS)/Division of Developmental Disabilities (DDD)
Adult Crisis Criteria For Funding - Effective April 16, 2008

The crisis criteria for imminent risk of abuse, neglect, or homelessness are the highest funding priorities of the Division of Developmental Disabilities (DDD) for adults who are 18 years or older. Each individual's urgency of need must be reflected in the PUNS database. In submitting the request for crisis authorization, the Pre-Admission Screening/Independent Service Coordination (PAS/ISC) agency must share in writing with the network staff the proposed plan(s) that have been arranged and/or scheduled for service implementation. It is expected that services will be implemented generally within a 24 to 72 hour period. The local PAS/ISC agency shall report all instances of abuse, neglect, and/or homelessness to the appropriate entity(s) as directed by applicable state, federal, and/or local laws, rules, regulations, and policies.

The crisis criteria apply to Waiver-Funded Adult Home-Based Support Services (AHBS) and Community Integrated Living Arrangements (CILAs). These criteria do not apply to Respite, Community Living Facilities (CLFs), privately operated Intermediate Care Facilities for Individuals with Developmental Disabilities (ICFs/DD), and Supported Living Arrangements (SLAs).

The Division's decision regarding the type of service to authorize will be based on the specific needs of the individual. In reviewing whether or not the individual meets the crisis criteria, the DDD will consider, but not limit itself to, the following, which are presented in priority order:

- 1) The death of the caregiver(s);
- 2) The caregiver is unable to address the support needs of the individual, thereby jeopardizing the individual's health, well-being, and/or safety needs;
- 3) The physical and/or mental injury and/or sexual abuse inflicted on the individual;
- 4) The status as a homeless/undomiciled individual;
- 5) The individual's behaviors [e.g., verbal and/or physical aggression, bodily harm to self and/or others] that put the individual and/or family member(s) at risk of serious harm.

Case 1 - Example of neglect:

The individual remains at home without any support services. Her physician referred her to a nutritionist who recommends a high protein diet. She is 4' 8" and weighs 62 pounds, which is down from 82 pounds within a two-year period. It is unknown whether the mother has placed the individual on the recommended diet.

The individual's communication is basically echolalic. The local PAS/ISC agency reports that she pulls her hair, scratches her face, bangs her head against objects, hits self and others, and screams. She has also been observed remaining in a fetal position for extended periods of time. While the mother is at work during the day, the younger brother (19 years old) serves as her caregiver. The mother reported to the local PAS/ISC agency that there have been instances in which she has returned home early from work to find her daughter alone in the home, meals not prepared for her, all lights turned off, and the whereabouts of the son unknown. The mother does not have any other family members and/or friends to help support her daughter's needs while she is at work. The mother wants her daughter to remain at home. The individual is 21-years-old with Severe Mental Retardation, Pervasive Developmental Disorder, Borderline Diabetes, and Sensitive Bowel Condition.

Case 2 – Example of homelessness and neglect:

The individual is currently homeless. While the mother was hospitalized, an eviction notice was served for nonpayment of rent. Since the mother's recent discharge from the hospital, she has not been in contact with her children and they are uncertain about her whereabouts. A brother and sister who had been staying at the house moved into a one-bedroom apartment. They are unable to care for their sister with a developmental disability because of their work schedules and limited space in the apartment. On average, the sister and brother work 10-12 hours per day.

The individual has been staying at the house alone without support and supervision. The house is not clean (e.g., several bags of garbage in the kitchen, dirty clothes piled on bed and in hallway, and dirty dishes and cooking utensils are on the counter top and stove and in the sink). She invites strangers in the home. After such visits the individual ends up missing money, food, and belongings. An elderly aunt and uncle, who are concerned, check on her periodically. They report that the individual is not consistently taking her medications. The individual is her own guardian. The proposed service provider is attempting to arrange temporary in-home support services; however, the individual has been uncooperative because she believes that "Mom will be home soon." The individual does not have a telephone. In her current setting she lacks the necessary skills to make sound choices that assure her safety and well-being.

The individual is 30 years old with Moderate Mental Retardation and Bipolar Disorder.

Case 3 - Example of abuse of an elderly caregiver:

The individual lives with his mother who is 75 years old. He has been terminated from two supported employment opportunities due to threatening other co-workers if they did not complete his work task(s) for him. The mother is a single caregiver. The father died three years ago. There are no other adults in the home and/or other family members in/near the area to help address the support needs of the individual.

The neighbors have observed the individual screaming at, pushing, and hitting his mother when she does not respond to his demands in a timely manner. He is 5' 9" and weighs 215 pounds. His mother is 5' 1" and weighs 120 pounds. She is physically unable to manage his aggressive behaviors toward her, thereby jeopardizing her own safety and well-being. On numerous occasions the police have been called in response to the individual's aggressive behaviors toward his mother.

The individual is 40 years old with Moderate Mental Retardation and Depression.