



**Community Living Services, Inc.
Handbook of Services**

Community Living Services, Inc.
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Suite 3693
Wayne, MI 48184
General Switchboard: 734-467-7600

Hours of Operation: Monday-Friday 8 a.m. to 4:30 p.m.

www.comlivserv.com

Notes:

Language translations for this document are available upon request by calling CLS Customer Services at 734-722-6364. This handbook is available in large print, Braille and electronically upon request.

Table of Contents

About Us

Our History	1`
Fast Facts/Mission and Vision	2
Our Funders	2
Our Services at a Glance.....	3
Who is Eligible for Services.....	3-4

First Steps

Eligibility and Intake/How to Access Services	5
Financial Responsibility and Commitments	5-6

Our Services-Why Choose CLS

Services and Support	6
Person-Centered/Family-Centered Planning.....	6-8
How to Choose a Network Provider	8

Questions about Services

Who to Contact if there is a Problem/Customer Services	9
Recipient Rights	9-10
Grievance and Appeals.....	10-12
Timeframe Regarding the Local Appeal and Grievance Process.....	13
Freedom from Retaliation/Policy and Procedure for Using Restrictions	13-14
Michigan Protection and Advocacy.....	15-16

CLS Departments & Divisions

Other Questions and Concerns

Confidentiality and Family Access to Information	17
Commitment to Safety	17
Risk vs. Choice	17-18
Conflict of Interest	18

Accessibility and Accommodations 18
Language Assistance/Assistive Technology 19
Telemedicine Services/Accreditation..... 19

Quick Reference

Common Acronyms 20-21

About Us

Our History

Community Living Services, Inc. (“CLS”), formerly Wayne Community Living Services, began in 1983, and has been instrumental in moving people from state institutions to community group homes and finally, into self-determined lives where they choose their roommates and provision of services. CLS was formed with a singular goal to move people with disabilities out of institutions and into more meaningful, connected lives. And while CLS has grown over the years, it remains committed to that goal.

Prior to the 1980s, individuals with intellectual and developmental disabilities were housed in large, impersonal, government operated institutions. They were cut off from contact with family members, excluded from their local communities, and served by a system that saw them as patients in need of expert treatment rather than as individuals who could direct their resources to realize self-defined goals and dreams.

The State of Michigan previously housed thousands of people with intellectual and developmental disabilities in state-run institutions. While still affiliated with the State of Michigan, some employees of the State institutional system banded together to build more meaningful lives for the people they supported and began working within the State system to deinstitutionalize persons with intellectual and developmental disabilities. While still affiliated with the State of Michigan, CLS began to aggressively develop community-based homes for persons with disabilities.

By 1988, CLS split with the State to form a private, non-profit agency dedicated to moving people with disabilities out of institutions and into more meaningful, connected lives. As CLS grew, we expanded our focus to include activities that enhance the quality of life for persons with intellectual and developmental disabilities.

Over the years, CLS has developed a reputation as a forerunner in advocacy and support to persons with intellectual and developmental disabilities. Under the guidance of a strong Board of Directors, that includes individuals we serve, we have effectively challenged many preconceived notions about the limitations of persons with intellectual and development disabilities, and made significant progress in assisting persons to take charge of their lives.

CLS has expanded beyond Wayne County in October 2004 and the CLS Oakland County Division became a Core Provider with the Oakland Community Health Network. CLS expanded again in 2016 to include a separate Macomb County division. CLS also now operates a Western Michigan Division, serving Kent, Ottawa, and Barry Counties.

Fast Facts about CLS

- ***Instrumental in developing partnerships with multiple organizations to close all state-run institutions in Michigan.***
- ***CLS is a private, not-for-profit 501(C)(3).***
- ***Provider with the Detroit Wayne Integrated Health Network, Oakland Community Health Network, Macomb County Community Mental Health, Ottawa County Community Mental Health, Southwest Michigan Behavioral Health (Barry), and Network 180 (Kent).***
- ***CLS coordinates support with community schools, medical health facilities, and other general community resources.***
- ***Leader in supporting people with the most significant and complex forms of intellectual and developmental disabilities.***
- ***Supports over 4,000 people across all divisions.***
- ***Offers Person-Centered Planning, and Supports Coordination.***

Mission

To assist and advocate for each person to have the support they want and need: to exercise control and authority over their lives, to live a life of freedom, opportunity and relationships as family, friends and neighbors and to share in full community membership and citizenship. CLS welcomes, and serves people of all ethnicities, diverse needs.

Services will be provided ethically driven by CLSs principles and values to provide quality services and supports to all individuals.

Vision

People will fully participate in their communities and have a quality of life which they seek.

Our Funders

In Michigan, Behavioral Health and Intellectual and Developmental Disability Supports and Services (Supports and Services) are administered by Prepaid Inpatient Health Plans (or PIHPs) through the state's network of County Community Mental Health Agencies also called Community Mental Health Service Programs (or CMHSP).

Our Services at a Glance

The services available through CLS are:

- Assessment
- Behavioral Health Home.
- Behavioral Health Treatment Plan
- Broker Services
- BTPRC,
- Children's Waiver,
- Crisis intervention
- Developmental Screening,
- Family Training,
- Health Services,
- Independent Support Coordination,
- Intake Assessments
- Mental Health Screening,
- Non-Family Training
- Nursing Assessments and Services,
- Patient Education
- Peer Support,
- Peer Direct and operative support
- Support Coordination,
- Support Coordination Assistants
- Training,
- Targeted Case Management
- Treatment Planning,

*CLS does not prescribe or dispense medication

Who is Eligible for Services?

A person may be eligible for services if he or she:

- Qualifies as a Resident or has a County of Financial Responsibility (COFR) status through the county in which they reside;
- Has an intellectual or developmental disability; and
- Enrolled with the funder.
- Is Medicaid eligible

The Michigan Mental Health Code (MCL 330.1100a) defines a developmental disability meaning either of the following:

- (a) If applied to an individual older than 5 years of age, a severe, chronic condition that meets all of the following requirements:
 - (i) Is attributable to a mental or physical impairment or a combination of mental and physical impairments;
 - (ii) Is manifested before the individual is 22 years old;
 - (iii) Is likely to continue indefinitely;
 - (iv) Results in substantial functional limitations in 3 or more of the following areas of major life activity:
 - (A) Self-care
 - (B) Receptive and expressive language
 - (C) Learning
 - (D) Mobility
 - (E) Self-direction
 - (F) Capacity for independent living
 - (G) Economic self-sufficiency
 - (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated.

- (b) If applied to a minor from birth to 5 years of age, a substantial developmental delay or a specific congenital or acquired condition with a high probability of resulting in developmental disability as defined in subdivision (a) if services are not provided.

First Steps

The person and their chosen representative may pursue the option of interviewing Supports Coordinators to determine who they would like to assist them with managing their supports and services. A Supports Coordinator is a CLS employee who serves as an advocate and broker of supports and services. All CLS employees must pass annual criminal background checks, maintain appropriate credentials as required by their profession and participate in required trainings. The individual may choose to select another Supports Coordinator at any time.

The Supports Coordinator coordinates services as needed, completes all necessary paperwork and provides follow-up.

If desired, the person and their chosen representative may choose another provider of choice agency by calling a contracted agency with that funder. Provider agencies are identified in each county's provider directory available on their website.

If a person is determined to be ineligible for services, information on how to request a local dispute of this decision as well as how to request a second opinion of this decision will be provided. The person will be referred to another organization that may be able to help.

There may be an exception to this process for individuals who do not have Medicaid. The Intake Representative will discuss this with the person during the Intake appointment.

Financial Responsibility & Commitments

CLS will partner with the person and their Support Circle (chosen representatives, friends, allies, family members) to explore all resources for support and services. These resources include the following:

- Medicaid eligibility (and/or other benefits and entitlements)
- Opportunities to earn money
- Family, friends, chosen representatives and significant others
- Neighborhood and community resources
- Public funds

The State of Michigan requires an evaluation of a person's ability to pay for services and supports. This is done with the help of CLS which completes a Financial Liability Determination to decide a person's financial responsibility for qualified mental health care services.

If the person is enrolled in Medicaid, the total cost of his/her authorized Supports and Services will be covered at no cost. If the person is a Medicaid beneficiary with a deductible (“spend-down”), as determined by the Michigan Department of Health and Human Services (MDHHS), he or she may be responsible for the cost of a portion of your services. If Medicare is the primary payor, Medicare cost-sharing consistent with coordination of benefits rules may apply. This information will be reviewed with the person at the time the Financial Liability Determination is completed.

Why Choose CLS?

Services & Support

CLS serves more than 5,000 adults and children with physical, intellectual and developmental disabilities in Wayne, Oakland, Macomb, Ottawa, Barry, and Kent counties. CLS works to provide supports suited to an individual’s wants and needs in a manner that the individual, their family and support circle direct and control.

The Supports and Services that can be coordinated by CLS include, but are not limited to:

- Behavior Treatment Plan Review Committee
- Behavioral Health Home
- Children’s Services
- Clinical Supports
- Community Living Support
- Culture of Gentleness
- Durable Medical Equipment Procurement
- Environmental Modifications
- Emergency and Crisis Services
- Employment Specialist Services
- Independent Facilitation
- Independent Supports Coordination
- Peer Mentor Services
- Respite
- Services for Children with Autism
- Skill-Building Services
- Substance Use Resources

Person-Centered/Family-Centered Planning

The process used to design a person’s Individual Plan of Services or treatment is called “Person-Centered Planning (PCP).” PCP is a person’s right protected by the Michigan MHC.

The process begins when an individual determines who they would like at their PCP meetings, such as family members or friends and what staff from CLS they would like to attend. A person will also decide when and where the PCP meetings will be held. Finally, they will decide what assistance they may need to help them participate in and understand the meetings.

During PCP meetings, a person will be asked about their life plans and goals and will be helped to develop outcomes they want to achieve. The people attending this meeting will help the person decide what supports, services or treatment they need, who they would like to provide these services, how often they will need the services and where it will be provided. They have the right, under federal and state laws, to a choice of providers.

After a person begins receiving services, they will be asked from time to time about how the supports, services and/or treatment are being received and whether changes need to be made. They have the right to ask at any time for a new PCP meeting if they want to talk about changing their plan of service.

A person has the right to “Independent Facilitation” of the PCP process. This means they may request someone other than the Supports Coordinator to conduct their planning meetings. They have the right to choose from available Independent Facilitators.

Children under the age of 18 with physical, intellectual or developmental disabilities or serious emotional disturbance also have the right to a PCP meeting. However, the PCP must recognize the importance of the family and the fact that supports and services impact the entire family. The parent(s) or guardian(s) of the children will be involved in the pre-planning and PCP process using “Family-Centered Practice” in the delivery of supports, services and treatment of their children.

The PCP empowers the individual to make their own decisions with the assistance of their support circle. The focus is building on an individual’s dreams, gifts, talents and resources. The PCP process focuses on **goals** which are universal desires that all people desire, such as: feeling safe, secure and loved by family, friends, having meaningful employment, financial security and good health, just to name a few. Topics covered during Person-Centered Planning include:

Advance Directive

Adults have the right, under Michigan law, to a “psychiatric advance directive.” A psychiatric advance directive is a tool for making decisions before a crisis in which you may become unable to make a decision about the kind of treatment you want and the kind of treatment you do not want. This lets other people, including family, friends, and service providers, know what you want when you cannot speak for yourself.

If you do not believe you have received appropriate information regarding Psychiatric Advance Directives from your PIHP, please contact the customer services office to file a grievance.

Crisis Plan

A person receiving services also will have the right to develop a “**crisis plan.**” A crisis plan is intended to give direct care if a person begins to have problems in managing his/her life or he/she becomes unable to make decisions and care for him/herself. The crisis plan would give information and direction to others about what the person would like done in the time of crisis. Examples are friends or relatives to be called, preferred medicines, or care of children, pets, or bills.

Self Determination means:

FREEDOM:

to decide how one wants to live their life.

AUTHORITY:

over a targeted amount of dollars.

SUPPORT:

to organize resources in ways that are life enhancing and meaningful to the individual.

RESPONSIBILITY:

for the wise use of public dollars and recognition of the contribution individuals with disabilities can make in their communities.

CONFIRMATION:

of the important role that self-advocates must play in a newly redesigned system.

How to Choose a Network Provider

People supported by CLS have many choices when it comes to choosing a provider from each of the counties Provider Network. They would start by contacting their Supports Coordinator who would use a Person-Centered approach to accessing the Provider Network. Each funder maintains a Provider Directory annually and regularly updates their network on their website.

Questions About Services

Who to Contact if there is a Problem?

Most issues can be resolved with the Supports Coordinator or their Manager. Supports Coordinator Managers are available to help if a situation is not resolved. There may be times when a person may need to speak to someone else to answer questions, some examples are: a question about enrollment can be answered by CLS Customer Services Representatives, Translation Services are handled by Customer Service Representatives and Supports Coordinators.

Customer Services

CLS Customer Service Representatives assist people with issues concerning services and supports. They are available to:

- Answer questions
- Explain supports and services
- Arrange translation services
- Identify resources
- Work together with individuals, family members and professional staff to resolve any concerns regarding services.

When issues cannot be resolved, Customer Service Representatives will assist in accessing the Dispute Resolution Process, completing Recipient Rights complaint forms, and/or requesting an Administrative Hearing. Also, to make a comment or suggestion about supports and services, contact CLS Customer Services during business hours (8:00 a.m. to 4:30 p.m., Monday –Friday).

Recipient Rights

Every person who receives public mental health services has certain rights. The Michigan Mental Health Code (MHC) protects specific rights. Some of a person's rights under the MHC include:

- The right to be free from abuse and neglect
- The right to confidentiality
- The right to be treated with dignity and respect
- The right to treatment suited to condition
- The right to freedom and movement
- The right to refuse to participate in research projects

An individual may file a Recipient Rights complaint any time if they think staff violated their rights. Alleged violations of the rights of people receiving services and supports from CLS will be investigated by the county's Recipient Rights department.

The Supports Coordinator will discuss a person's rights under the Mental Health Code and give them a copy of the "Your Rights" booklet/complaint forms. A person will have their rights explained when they first start receiving services and then once again every year. They can also ask for this booklet and complaint forms at any time.

When a complaint is received by the funder, it will be acknowledged in writing to the complainant within five business days. The investigation must be completed within 90 days. If it is determined that a person's rights have been violated, appropriate action will be recommended. That county will issue a summary report of the investigative findings to the complainant, to the individual and to the guardian, if applicable.

A notice of the appeal rights and an explanation of the process are sent to the person with a summary report. CLS has a policy that prohibits retaliation against anyone who files a Recipient Rights complaint.

If a person receives Substance Use Services, their rights are protected by the Public Health Code. These rights will also be explained when services begin and once again every year. More information can be found about rights while receiving Substance Use Services in the "Your Rights" booklet.

An individual may contact their local community mental health service program to talk with a representative about any questions they may have about their rights or to get help in filing a complaint.

Grievance & Appeals/Important Timeframes

As an Applicant for or recipient of Mental Health Services, a person has the right to exercise several options if a request for services or supports is denied, reduced, suspended or terminated or if a person disagrees with any part of their Individual Plan of Service regarding their current services and supports. Information about the Grievance and Appeals process is given when people first start services and again annually. Anyone may ask for this information at any time by contacting **CLS Customer Services at 734-722-6364**.

Grievances

A person has the right to say they are unhappy with their services or supports or the staff that provides them, by filing a “Grievance,” (dissatisfaction). An individual can file a Grievance any time by calling, visiting, or writing to CLS Customer Services. In most cases, a person’s grievance will be resolved within 90-calendar days for the date CLS receives your grievance.

Appeals

A person will be given written notice when a decision is made that denies their request for services or reduces, suspends, or terminates the services they already receive. This notice is called an “Adverse Benefit Determination”. They have the right to file an “Appeal” when they do not agree with such a decision. If you would like to ask for an appeal, you will have to do so within 60-calendar days from the date on the Adverse Benefit Determination.

CLS only has one level of appeal for individuals. You may ask for a Local Appeal by contacting the county they live in directly.

State Fair Hearing

If a person receives Medicaid benefits and the action involves a service paid for by Medicaid, they have the additional option of requesting a **State Fair Hearing** within 90 days through the **Michigan Department of Health and Human Services (MDHHS)**. **The appeals process must be completed before a person can file a State Fair Hearing.** However, if the funder fails to adhere to the notice and timing requirements, the local appeal process will be deemed exhausted, and a Fair Hearing can be requested.

A State Fair Hearing can only be requested after receiving notice that the service decision you appealed has been upheld. A State Fair Hearing can be requested if you were not provided your notice and decision regarding your appeal in the timeframe required. There are time limits on when you can file an appeal once you receive a decision about your local appeal.

In handling grievances and appeals, CLS must give individuals any reasonable assistance in completing forms and taking other procedural steps related to a grievance. This includes, but is not limited to, auxiliary aids and services upon request, such as providing interpreter services and toll-free numbers that have adequate TTY/TTD and interpreter capability.

Benefit continuation

If you are receiving a Michigan Medicaid service that is reduced, terminated, or suspended before your current service authorization, and you file your appeal within 10 calendar days (as instructed on the Notice of Adverse Benefit Determination), you may continue to receive your same level of services while your internal appeal is pending. You will need to state in your appeal request that you are asking for your service(s) to continue.

CLS must continue the individual's benefits if all the following occur:

- a. The individual files the request for an appeal timely (within 60 calendar days from the date on the ABD notice).
- b. The appeal involves the termination, suspension, or reduction of previously authorized services.
- c. The services were ordered by an authorized provider.
- d. The period covered by the original authorization has not expired.
- e. The member timely files for continuation of benefits.

If your benefits are continued and your appeal is denied, you will also have the right to ask for your benefits to continue while a State Fair Hearing is pending if you ask for one within 10 calendar days. You will need to state in your State Fair Hearing request that you are asking for your service(s) to continue.

If your benefits are continued, you can keep getting the service until one of the following happens: 1) you withdraw the appeal or State Fair Hearing request; or 2) all entities that got your appeal decide "no" to your request.

NOTE: If your benefits are continued because you used this process, you may be required to repay the cost of any services that you received while your appeal was pending if the final resolution upholds the denial of your request for coverage or payment of a service. State policy will determine if you will be required to repay the cost of any continued benefits.

Alternative Dispute Resolution

If a person does not receive Medicaid, they may request a review by the MDHHS Alternative Dispute Resolution instead of a State Fair Hearing. For information regarding the MDHHS

Administrative Hearing and Alternative Dispute Resolution Process, please contact **CLS Customer Services at 734-722-6364**.

Important: Timeframe Regarding the Local Appeals and Grievance Process

A person may file a request for a Local Appeal with CLS Customer Services within 45 calendar days of receipt of an action notice. Review of the request will take place within 45 calendar days from receipt of the request. Review of the request for a Local Appeal regarding an emergency situation will take place within three calendar days of receipt of the request. A decision regarding the appeal will be provided by the DWIHN.

An individual may file a Grievance (dissatisfaction) regarding any aspect of the services and supports they receive at any time. CLS Customer Services Representatives will work to resolve a person's Grievance within 60 calendar days of receipt of the Grievance. A person can also contact the DWIHN regarding issues or concerns related to Grievances, Appeals, Disputes and Medicaid Fair Hearings.

Freedom from Retaliation

If a person uses public mental health or substance use services, they are free to exercise their rights and to use the rights protection system without fear of retaliation, harassment or discrimination. In addition, the use of seclusion or restraint as a means of coercion, discipline, convenience or retaliation is strictly prohibited.

Policy & Procedure for Using Restrictions

Informed consent is obtained from the person or the person's legally empowered representative to restrict, intrude upon, or limit a person's rights. The person's Circle must support the proposed restriction. The restriction details including the proposed length of time for the restriction and a clear fading plan for the eventual elimination of it are clearly documented as part of the Individual Plan of Service (IPOS).

The Behavior Treatment Plan Review Committee (BTPRC) reviews and approves Restrictions and Intrusions put in place to protect a person's health and/or safety. A Restriction is a program or practice that limits a person's freedom of movement or access.

Examples include:

- Limiting access to food

- Limiting access to clothing or other personal possessions
- Restricting receipt of mail
- Restricting telephone use
- Restricting cigarette use
- Seatbelt guards/harnesses

Intrusions are techniques that impinge on the bodily integrity, personal space or privacy of the person to achieve a reduction in a health or safety risk.

Examples include:

- The required wearing of a helmet during all waking hours
- The use of alarms, sounds, or visual/sound-based monitoring devices (i.e. door alarms, baby monitors)
- Mitts or gloves to lessen the impact of someone hitting themselves
- The use of direct observation procedures during a time which otherwise would be considered private (for example: when someone is in the bathroom and does not require direct assistance)
- Use of psychotropic medication to change behavior when the behavior is not the result of a diagnosed psychiatric disorder.

A Rights Representative from the DWIHN participates on the committee to ensure all rights are protected and monitored to make sure all plans for Limitations/Restrictions are in accordance with applicable law and policy. **CLS policy prohibits physical restraint.**

*The Michigan Mental Health Code (MHC) states that psychotropic medications are **NEVER** to be used as a form of punishment or for the convenience of staff. Any medication is considered a limitation/restriction if it is used to control behavior.*

Michigan Protection & Advocacy Services Information

Michigan Protection and Advocacy Services is a private, non-profit organization that protects and advocates for people with developmental disabilities and/or mental illness. Its goal is to advance the dignity, equality, Self-determination and expressed choices of people. MPAS promotes, expands and protects the human and legal rights of people by providing them with information and advocacy.

Examples of services offered:

- Information and referral

- Advice and support regarding self-advocacy
- Direct advocacy to assist in negotiations or problem-solving meetings
- Representation in administrative appeals and hearings
- Legal assistance

Michigan Protection and Advocacy Service, Inc.
4095 Legacy Parkway Suite 500
Lansing, MI 48911
Phone: 1-800-288-5923 (voice or TTY)
517-882-7074
Fax: 517-487-0827
Web site <http://mpas.org>

CLS Locations:

Wayne County: 35425 Michigan Avenue W. Suite 3693 Wayne Mi. 48184

Oakland County: 24200 Woodward Ave Pleasant Ridge Mi. 248-547-2668

West Michigan: 160 68th Street SW Suite 150 Grand Rapids 49548 616-430-8388

- Ottawa
- Barry
- Kent County

CLS Departments and Key Functions

- **Accounting**
 - General Accounting
 - Payroll
- **Administration**
 - Human Resources
- **Customer Services**
 - Intake
 - Benefits & Resource Specialists
 - Broker Services (Housing Durable Medical Equipment EMOD)
- **Claims & Records**

- **Information Technology (I.T.)**
- **Medical Care & Coordination**

- **Quality**
 - Quality Management
 - Network Coordination
- **Personal Supports & Supports Coordination**
 - Peer Mentoring
 - Support Brokers/Benefits Brokers
- **Training**
 - Direct Care Staff Training

Other Questions and Concerns

Confidentiality and Family Access to Information

A person has the right to have information about their mental health treatment kept private. They also have the right to look at their own clinical records and add a formal statement about them if there is something they do not like. Generally, information about an individual can only be given to others with a person's written permission. However, there are times when their information is shared to coordinate their treatment when it is required by law.

Family members have the right to provide information to CLS about an individual. However, without a Release of Information form signed by the individual or legally responsible party (if applicable), CLS may not give information about the person to a family member. For minor children under the age of 18 years, parents are provided information about their child and must sign a Release of Information form to share with others.

If a person is receiving Substance Use Services, they have rights related to confidentiality specific to Substance Use Services.

Under the Health Insurance Portability and Accountability Act or HIPAA, a person will be provided with an official Notice of Privacy Practices from CLS. This notice will describe all the ways information about an individual can be used or disclosed. It will also include a listing of a person's rights provided under HIPAA and how a person can file a complaint if they believe their rights to privacy have been violated.

If a person believes their confidentiality rights have been violated, they can the office of recipient rights affiliated with the county in which they receive services. This information is located on the Recipient Rights booklet and funders website.

Commitment to Safety

CLS is committed to getting to know the people it supports and demonstrating due diligence to develop an Individual Plan of Service (IPOS) that supports an Individual's life choices. Through the Person/Family-Centered Planning Process, Supports Coordinators will help with identifying risks, a network of support, and Supports and Services that that could help to address those risks.

Risk vs. Choice

Most of life's greatest lessons are learned when making choices that are later realized as mistakes. CLS acknowledges that some people will make decisions that are deemed potential risks to their safety or well-being. The person's network of support makes risk possible by weaving a safety net that supports the person's capability for growth and learning from their mistakes. Ongoing education regarding the possible consequences of their risky decisions/actions can be identified during the Person/Family-Centered Planning Process.

Conflict of Interest

Conflict of Interest situations are prohibited by CLS and its funding sources. CLS is required to demonstrate that it takes adequate measures to avoid situations where Conflicts of Interest may arise. Employees are expected to disclose any relationship that creates or has the appearance of a Conflict of Interest. Employees are asked to disclose in writing any relationship that poses a potential Conflict of Interest and are periodically asked to update such written disclosures.

CLS staff may not accept (either directly or indirectly) gifts of any kind, loans, property (personal or real), supplies, or anything else of value from individuals and their family members.

Accessibility and Accommodations

In accordance with federal and state laws, all buildings of CLS are required to be physically accessible to individuals with disabilities. Any person who receives emotional, visual or mobility support from a service animal such as a dog will be given access, along with the service animal, to all buildings and programs of CLS. For more information or for questions about accessibility or service/support animals, contact a **Supports Coordinator**.

If a person needs to request an accommodation on behalf of themselves or a family member or friend, they can contact their Supports Coordinator.

Reasonable Accommodations

If a person needs accommodations to attend meetings, CLS staff will meet with them and their Support Circle at times and places that are convenient and accessible. Meetings will be scheduled that are convenient for the person, an interpreter will be provided if necessary and a meeting place will be determined that will accommodate wheelchairs. If a person has

a need for Reasonable Accommodations, they may talk with their Supports Coordinator or Customer Services Representative.

Language Assistance

- If a person uses a **TTY (Teletype)**, contact CLS Customer Services at the following TTY phone number: 1-866-469-7600.
- If an individual needs a **sign language interpreter**, they will contact their support. Sign language interpreters are available at no cost.
- If an individual **does not speak English**, contact your support coordinator so that arrangements can be made. Interpreters are available at no cost.
- If an individual needs **Braille assistance**, they should contact their support coordinator. Braille materials are available at no cost.

Assistive Technology

CLS supports a person's desire to communicate and control their surroundings as much as possible. When appropriate, Assistive Technology is explored, identified and obtained. This could be as simple as boards with pictures or as complex as a computerized voice or electronic device. Some other examples of Assistive Technology include: special buttons to open doors and answer phones, speech devices, ceiling tracks, specialized wheelchairs, computers and phones.

Telemedicine Practices

Per MDHHS guidance, CLS is able to provide services via telehealth. In cases where the individual feels it is necessary to maintain physical distance while receiving services, CLS has adapted multiple service functions to work via telephone, video chat, and other remote services. CLS staff maintains regular contact with individuals served, regardless of the ability to physically interact.

Accreditation

CLS maintains accreditation through **(CARF)**, an international, not-for-profit organization that accredits Human Service Providers. Accreditation is a process that demonstrates a provider has met standards for the quality of its services. CLS has been accredited by CARF since 2001. From 1996-2001, CLS was accredited by The Council on Accreditation.

Common Acronyms

AAID: American Association on Intellectual and Developmental Disabilities

ADA: Americans with Disabilities Act

AFC: Adult Foster Care

APS: Adult Protective Services

BSW: Bachelor of Social Work

CAC: Citizen's Advisory Council

CARF: The Commission on Accreditation of Rehabilitation Facilities

CLS: Community Living Services or Community Living Supports

CMHSP: Community Mental Health Services Program

CP: Cerebral Palsy

CSR: Customer Services Representative

CTH: Community Training Home (Foster Care)

DD: Developmental Disability

DDI: Developmental Disabilities Institute of Wayne State University

DHHS: Department of Health and Human Services

DWIHN: Detroit Wayne Integrated Health Network

HIPAA: Health Insurance Portability and Accountability Act

IEP: Individual Education Plan

IDD: Intellectual and Developmental Disability

IPOS: Individual Plan of Service

ISD: Intermediate School District

LARA: Licensing and Regulatory Affairs

LBSW: Licensed Bachelor's Social Worker

LMSW: Licensed Master's Social Worker

LPN: Licensed Practical Nurse

MI: Mental Illness

MRCA: Michigan Residential Care Association

OBRA: Omnibus Budget Reconciliation Act of 1987

ORR: Office of Recipient Rights

OT: Occupational Therapist

P&A: Michigan Protection and Advocacy Services

PCP: Person-Centered Plan

PT: Physical Therapist

RD: Registered Dietitian

RN: Registered Nurse

RSDI: Retirement, Survivors and Disability Insurance

RSST: Registered Social Service Technician

SC: Supports Coordinator

SLP: Speech and Language Pathologist

SSA: Social Security Administration

SSB: Social Security Benefits

SSI: Supplemental Security Income

TTY: Telecommunication for people with speech or hearing impairments

