Behavioral Rehabilitation Services (BRS) are Medicaid funded rehabilitative services designed to provide services and placement to children and young adults in the care or custody Department of Human Services (DHS) who have debilitating psychosocial, emotional and behavioral disorders. In order to do this work, it is important to understand the BRS client, and how his or her behaviors are occurring in order to effectively plan effective interventions. These interventions should be planned from a scientifically sound, evidence-based treatment approach that evaluates each child or young adult and provides individual service planning through an understanding the needs of the child or young adult and their trauma history.

Prior to submitting information to DHS, Office of Child Welfare Programs (OCWP), Child Welfare Program that demonstrates your interest and ability to provide BRS to children and young adults in DHS’ care and custody an agency must first meet the requirements of:

- Licensing Umbrella Rules, OAR 413-215-0001 thru 0131.

And the following, as applicable:
- Licensed Foster Care Agency, OAR 413-215-0301 thru 0396.
- Licensed Residential Care Agency, OAR 413-215-0501 thru 0586.

After meeting the minimum requirements to become a Licensed Child Caring Agency, in order to be considered as a BRS provider, an agency must demonstrate the ability to comply with the following administrative rules governing BRS programs:

- Oregon Health Authority Division of Medical Assistance Programs Behavioral Rehabilitation Services Program OAR 410-170-0000 thru 410-170-0120 and DHS Behavior Rehabilitation Services Program OAR 413-090-0055 thru 090-0090.

Please note especially OAR 410-170-0030 in the Oregon Health Authority rules that requires provider enrollment.

The Well Being Program is available to provide technical assistance to an interested agency to support effective programming and program compliance with administrative rules guiding Behavior Rehabilitation Services.

If assistance is needed, please contact Adam Rodakowski at (503) 945-6660 or Kevin George at (503) 945-5987, who will assign a Compliance Specialist to your agency.

The information below is designed to serve as a guide for interested agencies as they prepare to submit their evidence of readiness information to the department.
**BRS Program Model and Materials to submit:**

In addition to meeting the requirements in the Oregon Administrative Rules, DHS requests that interested agencies submit a complete and comprehensive description of their BRS Program Model which will clearly display their agency's ability to operate and implement a BRS program serving children and young adults on a daily basis. Prior to any consideration by the Department for contracting with an agency for BRS services, all aspects of a program are reviewed, including the written materials submitted to the Department, interviews with key staff who are or will be providing the services, and a minimum of one site visit to the agency.

Each agency must answer the following questions through submission of written materials demonstrating an understanding of behavior rehabilitation services and the agency's philosophy, methodology, and treatment approach to providing services and placement under each of the following:

**Program overview:**

- Is your program currently in operation, or are you seeking to begin a new program?
- Is the program affiliated with a larger parent agency?
- How did your agency become interested in providing BRS for children?
- What type of care within the BRS umbrella the agency has the desire to perform? OAR 410-170-0090
- Why have you chosen to perform the type of care selected?
- For what gender, age group or specific behaviors are you interested and have expertise in providing Behavior Rehabilitation Services?
- How many children or young adults are you interested in serving?
- With what other community resources do you collaborate in providing behavior rehabilitation or placement related services to children and young adults (mental health, health care, education, other public or private agencies)?

**Physical specifics of the program OAR 410-170-0030(9):**

- Is the program a facility based or a foster home based model?
- Where is the program located in Oregon?
- If a facility based program:
  - Please describe the program building(s) and the surrounding area.
  - Are there any notable features at your program? E.G outdoor space, workable gardens, hiking trails, recreational facilities etc.
  - Any other notable issues or advantages to your physical location?
- If a foster care agency:
  - Please describe your process for recruitment, training, certification, and retention of your certified foster parents.
  - Please describe the support and supportive services you provide to your certified foster parents.
Staff members and training requirements:

- Provide job descriptions, including educational requirements for the positions the program coordinator or program director, social service staff and direct care staff OAR 410-170-0030(4).
- Provide names and qualifications of individuals occupying the positions submitted in OAR 410-170-0030(4). This could be resumes of each individual.
  - Please list any unique skills, interests or background of employees that will be an asset and/or support for your program.
    - How will these unique skills and abilities be incorporated in your program to support growth and assist BRS programming for children and young adults served in your program?
  - How does your agency provide initial and continued education and training for employees? OAR 410-170-0030(4)(b)(A) through (C)
  - How does your agency complete the fitness determination? OAR 410-170-0030(5)

Programming, Policy and Procedure:

- **Admission Criteria and procedure OAR 410-170-0050:**
  - What are your programs admission criteria and standards?
  - How do you make determinations on admitting a BRS client into your program?
  - What behaviors, if any, would end your consideration of a child or young adult for placement?
  - Where does the intake process occur, and how does your program provide support to the child or young adult with possible anxiety about entering the program?
  - What type of information does the program gather about the child or young adult and his or her goals during the intake?

- **Behavior Management Model:**
  - What behavioral management model does your program utilize?
  - Explain in detail the behavior management model including de-escalation skills training, crisis prevention skills, positive behavior management, and disciplinary techniques are focused on helping children and young adults build positive personal relationships and self-control.
    - What behavior management model is used?
    - If not already explained under staff training, describe how staff are trained and maintain any current certification on the behavior management model.
    - How is the behavior management model trauma informed?
- How does the behavior management model build on a child’s or young adult’s strengths?
- Does your behavior management model include emergency physical intervention (restraint) or seclusion? If yes, please describe in detail the rationale for the model used in your program.

**Behavior Rehabilitation Model:**

- What behavior rehabilitation model does your program utilize?
- Explain in detail the behavior rehabilitation model, and curriculum, policy, and procedure to implement the model.
  - If not already explained under staff training, describe how staff are trained and maintain any current certification on the behavior rehabilitation model.
  - How is the behavior rehabilitation model trauma informed?
  - How does the behavior rehabilitation model build on a child’s or young adult’s strengths?

**BRS Goal development and monitoring:**

- Who is involved in the development of the ISP and MSP?
- How are BRS goals identified for the ISP, and MSP?
- How does the program complete the assessment and evaluation of the BRS client to write the Assessment and Evaluation Report?
- How are behavioral changes assessed, monitored and evaluated?
- How are positive behaviors reinforced and incentive for negative behavior reduced?
- What Quality Assurance measures are implemented to ensure fidelity to the implemented behavioral management and rehabilitation models?
- How does your agency monitor, track, document and review progress toward client goals daily, weekly, and monthly?

**Daily structure and BRS programming:**

- Please provide a proposed weekly schedule of BRS programming.
- What does the daily and weekly schedule of BRS services look like?
- Who is responsible to perform BRS services (Please indicate specific positions given the task).

**Incident Reports:**

- What are the criteria for considering an occurrence with a child or young adult which would require an incident report?
- What is your procedure for reviewing and reporting of incident reports among staff, DHS and others?
• Please provide a sample incident report form, and if you are an operating program currently, a sample of completed incident report.

• **Transition and Aftercare Services:**
  
  o How does your program incorporate family members or other aftercare resources into your service plans for the child or young adult?
  o Does your program assist in identifying aftercare resources?
  o If yes, what specific methods and services do you incorporate?
  o Does your program have any specific methods of outreach and aftercare services beyond what is required in Oregon Administrative Rule?

**Placement Related Activities**

• Describe how your agency keeps records in an individual, confidential file as described in OAR 413-090-0070 (2). Provide a sample file format.

• Describe how your agency provides the daily care for the child or young adult under 413-090-0080, including your relationships with local schools, physical and mental health providers, and dental providers.

• Describe your agency’s policy on a child’s or young adult’s personal belongings, including clothing and other personal items held by the child or young adult.

• Describe your agency’s practices regarding a child’s or young adult’s access to the following:
  o Educational activities
  o Vocational activities,
  o Religious instruction and practice, and attending religious gatherings
  o Structured recreational and sports activities, including participation in team or club sports
  o Arts and culture, including theatrical and musical events or participation in community or school events, or clubs

• Describe how your agency supports academic success and assists the child or young adult in school, including your relationships with local schools attended by the child or young adult in your agency.

In addition to your written materials describing your readiness to provide behavior rehabilitation and placement services to children and young adults, please submit copies of the following information, if applicable, for your program and service type:

• Copy of the agency’s license(s).
• Copy of the agency’s Medicaid provider enrollment.
• An organization chart for the agency and each individual BRS program, if more than one program is or will be operated by your agency.
• Staffing schedules with identified staff members (if currently employed) and the weekly work hours directly supervising BRS clients OAR 410-170-0030(8). This should be a sample of what the first week of staffing will look like when a program is
in operation.

- Initial Service Plan format OAR 410-170-0070(1)
- Assessment and Evaluation Report format OAR 410-170-0070(2)
- Master Service Plan format OAR 410-170-0070(3)
- Master Service Plan, 90 day update format OAR 410-170-0070(4)
- Aftercare and Transition Plan OAR 410-170-0070(5)
- Discharge Summary OAR 410-170-0070(6)
- Aftercare Summary OAR 410-170-0070(7)
- Weekly log of service hours 410-170-0080(4)(c)
- Verification of employee and direct care staff training (initial and ongoing)
- A description of what a typical week in program may look like, including all activities, responsibilities for a child or young adult in a typical week.

Please submit the information to:

Department of Human Services
Office of Child Welfare Programs
Kevin George and Adam Rodakowski, Managers, Well Being Program
500 Summer St. NE E-77
Salem, OR 97301