# LIFE SKILLS DEVELOPMENT 1 (COMPANION) LSD1

This synopsis of the service identified is from the IBudget Handbook but it is not all inclusive and is not limited to what is here. Each employee is responsible for the information in the IBudget Handbook whether the employee reads the information or not. Use the information provided here with the information, including definitions, in the JOB DESCRIPTION – ALL SERVICES description.

**Description**
- non-medical care, supervision, and socialization activities
- provided to recipients age 21 years or older
- must be provided in direct relation to the achievement of the recipient’s goals as specified in the recipient’s support plan
- provides access to community-based activities that cannot be provided by natural or other unpaid supports
- should be defined as activities most likely to result in increased ability to access community resources without paid support
- can be scheduled on a regular, long-term basis
- can be volunteer activities performed by the recipient as a pre-work activity or activities that connect a recipient to the community
- provided by licensed home health or hospice agencies or solo or agency providers who are not required to be licensed, certified, or registered

**Who Provides**
- licensed home health or hospice agencies
- solo or agency providers who are not required to be licensed, certified, or registered

**Service Requirements**
- Limited to the description of services described on client Support Plan and current approved cost plan
- **CANNOT** be provided simultaneously with:
  - Life Skills Development Level 2 (Supported Employment)
  - Life Skills Development Level 3 (Adult Day Training)
  - Personal Supports Services

**Place of Service**
- **CANNOT** in the provider’s home or the home of a relative or friend of the provider
- Can be provided in:
  - client’s own home
  - client’s family home
  - the community
- May be provided to individuals who reside in a licensed facility while the client is engaged in a community activity as long as the companion service is not duplicative of what is required by the residential provider licensing requirements

**Limitations & Exclusions**
- Transportation and travel costs are **NOT** reimbursed separately (costs are integral to the service and included in the rate)
- Client should have no more than a maximum of the equivalent of 112 hours per week of all LSD services combined

**Minimum Qualifications**
- 18 years or older **AND**
- high school diploma or GED (effective 9/2015) **AND**
- 1 year of verifiable experience (direct work with individuals receiving services in a medical, psychiatric, nursing, or childcare setting or with individuals with developmental disabilities) **OR**
- college or vocational school (30 semester hours, 45 quarter hours, or 720 classroom hours) in lieu of required experience

**Minimum Training Requirements**
- Zero Tolerance
- HIPAA
- Direct Care Core Competency
- Medication Administration Course & Validation, if working with client who takes medications
- Behavioral Emergency Procedures, if working with client with Behavior Plan
- CPR
- First Aid
- HIV/AIDS/Infection Control
- Requirements for ALL Waiver Providers
- Overview of APD Waiver Provider Requirements

**Other Training**
- Pre-Service Certification (APD)
- Provider Verification
- General Hire Training
- Client-Specific Training
- DD & IBudget Handbooks
- Waiver Services Agreement & Attachments
- Documentation Requirements
- Bill of Rights, Chapter 393.13
- Person-Centered Planning
- Rights & Choices
- Emergency Preparedness
- Core Assurances
- Incident Reporting

**Documentation to Maintain**
- copy of claim submitted for payment
- copy of service log sent monthly

**Documentation Provided to WSC**
- copy of service log sent monthly (at the time of the last billing of the month)

**Required Employee Documentation**
- If transporting client in private provider vehicle, copies of valid:
  - driver license
  - vehicle registration
  - automobile insurance
- Proof of all required training
- Proof of education/experience
- Proof of background screening