

Community Rehabilitation Program (Sheltered Workshop)

A Community Rehabilitation Program is a day/night service which provides work-oriented services including various combinations of evaluation, developmental skills training, vocational adjustment, job placement, and extended or sheltered employment to individuals of all disability groups sixteen years of age or over who have potential for gainful employment. This service is designed for individuals who have demonstrated that they do not require the intensive training and structure found in programs such as ADVPs, but have not yet acquired the skills necessary for competitive employment. It provides the individual opportunity to acquire and maintain life skills, including appropriate work habits, specific job skills, self-help skills, socialization skills, and communication skills. This service focuses on vocational/productive work activities for individuals who have potential for gainful employment, as determined by Vocational Rehabilitation Services or the ability to participate in a community rehabilitation program. Community Rehabilitation Programs are subject to Department of Labor Federal Wage and Hour Guidelines for the Handicapped.

Guidelines:

- (1) May only be provided in a VR approved facility or a facility licensed under G.S. 122-C.
- (2) Only direct client attendance time is reported.
- (3) Preparation, documentation and staff travel time are not reported.
- (4) Documentation in the client record is required.
- (5) Community Rehabilitation Program services provided to clients who are sponsored by Vocational Rehabilitation in an area operated program are to be reported and a revenue adjustment to be made; OR such services can be excluded from both cost finding and event reporting in accordance with funding guidelines. All Community Rehabilitation Program services to area program clients which are supported by area program funding are to be reported.

Therapeutic Relationship and Interventions

There should be a supportive, therapeutic relationship between the providers and consumer which addresses and/or implements interventions outlined in the service plan.

Structure of Daily Living

This service is designed to adhere to the principles of normalization and community integration.

Cognitive and Behavioral skill Acquisition

This service is intended to assist individuals to prepare to live and work as independently as possible.

Service Type

This is day/night type of service under NC Administrative Code 10A NCAC 27G .5500. This service is not billable to Medicaid.

Resiliency/Environmental Intervention

This service focuses on assisting the individuals in acquiring and maintaining life skills, with a focus on vocational/productive work activities.

Service Delivery Setting

May only be provided in a licensed or VR approved facility.

Medical Necessity

Per 10A NCAC 27G .2306 (b)(3), a qualified professional or an associate professional shall certify the eligibility of each client for the Community Rehabilitation Program service according to the following criteria:

- A. The person has a condition that may be defined as a developmental disability as defined in GS 122C-3 (12a).
- AND
- B. NC SNAP or Supports Intensity Scale (SIS)
- AND
- C. The recipient is experiencing difficulties in at least one of the following areas:
 1. Functional impairment
 2. Crisis intervention/diversion/aftercare needs, and/or

3. At risk of placement outside the natural home setting.	
AND	
D. The recipient's level of functioning has not been restored or improved and may indicate a need for clinical interventions in a natural setting if any of the following apply:	
1. At risk for out of home placement, hospitalization, and/or institutionalization due to symptoms associated with diagnosis.	
2. Presents with intensive verbal, and limited physical aggression due to symptoms associated with diagnosis, which are sufficient to create functional problems in a community setting.	
3. At risk of exclusion from services, placement or significant community support systems as a result of functional behavioral problems associated with the diagnosis.	
4. Requires a structured setting to foster successful integration into the community through individualized interventions and activities.	
Service Order Requirement	
N/A. Per 10A NCAC 27G .2306 (b)(3), a qualified professional or an associate professional shall certify the eligibility of each client for this service.	
Continuation/Utilization Review Criteria	
Consumer requires this service continue to acquire or maintain life skills or to prepare for competitive employment in the community.	
Discharge Criteria	
Consumer's level of functioning has improved with respect to the goals outlined in the service plan, or no longer benefits from this service. The decision should be based on one of the following:	
1. Consumer has achieved service plan goals; discharge to a lower level of care is indicated.	
2. Consumer is not making progress, or is regressing, and all realistic treatment options within this modality have been exhausted.	
Service Maintenance Criteria	
If the recipient is functioning effectively with this service and discharge would otherwise be indicated, Community Rehabilitation Program services should be maintained when it can be reasonably anticipated that regression is likely to occur if the service is withdrawn. The decision should be based on any one of the following:	
A. Evidence that gains will be lost in the absence of Community Rehabilitation Program services is documented in the service record.	
OR	
B. In the event there are epidemiologically sound expectations that symptoms will persist and that ongoing treatment interventions are needed to sustain functional gains, the presence of a DSM-5 (or any subsequent editions of this reference material) diagnosis would necessitate a disability management approach.	
<i>*Note: Any denial, reduction, suspension, or termination of service requires notification to the recipient and/or legal guardian about their appeal rights.</i>	
Provider Requirement and Supervision	
The facility must have a designated full-time program director and a designated program coordinator. At least one staff member shall be designated as a client evaluator. The required staff ratio is one staff to ten or fewer clients.	
Documentation Requirements	
Documentation in the client record is required as specified in the Records Management and Documentation Manual.	
Appropriate Service Codes	
Medicaid	NC TRACKS
Not Billable	YP650