



**COLORADO**  
Department of Health Care  
Policy & Financing



# In-Home Support Services (IHSS) **Program Guide**

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## Table of Contents

<b>Key Terms and Abbreviations .....</b>	<b>5</b>
<b>Chapter One: Welcome to IHSS .....</b>	<b>7</b>
A Day in the Life of an IHSS Member .....	7
Why Choose IHSS? .....	7
Understanding Self-Determination and Self-Direction .....	8
Principles of Self-Determination and Self-Direction .....	9
Self-Determination and IHSS .....	10
Chapter One Summary .....	11
<b>Chapter Two: Getting Started .....</b>	<b>13</b>
The IHSS Process .....	13
Available Services .....	15
Service Limitations for Attendants and Legally Responsible Person(s) .....	22
Chapter Two Summary .....	23
<b>Chapter Three: Partnering With an Agency .....</b>	<b>25</b>
IHSS Agency as an Employer .....	25
IHSS Agency as a Care Coordinator .....	26
IHSS Agency as a Recruiter .....	27
Continued IHSS Support .....	28
When to Contact Your IHSS Agency .....	31
Bringing Attendants to Your Agency .....	31
Chapter Three Summary .....	32
<b>Chapter Four: Being Proactive in IHSS .....</b>	<b>33</b>
General Preferences .....	33
IHSS Agency as a Partner .....	33
Developing a Relationship with your IHSS Agency .....	34
Involvement in Recruiting .....	34
Taking an Active Role in Training .....	35
Supervision .....	37

Accessing Emergency Care .....	39
Make an Emergency Plan.....	40
Taking Self-Direction to the Next Level.....	42
Chapter Four Summary .....	45
<b>Appendix A: Recruiting Guide.....</b>	<b>47</b>
Recruiting Goals.....	47
Attendant Requirements.....	48
Recruiting Attendants.....	48
Creating a Job Description .....	49
Screening Potential Attendants .....	50
Warning Signs! .....	52
What If You Don't Want to Interview Someone? .....	52
Interviewing Techniques.....	53
Avoiding Discriminatory Questions .....	56
Checking References .....	57
Selecting your Attendant .....	59
Background Checks.....	60
Appendix A Summary .....	62
<b>Appendix B: Resources .....</b>	<b>63</b>
Information and Assistance Services .....	63
Case Management Agencies (CMAs) Locations and Covered Counties.....	64
State Resources .....	67
Get More Involved in In-Home Support Services (IHSS) .....	68
State Organizations and Resources .....	68
Overview of Locations .....	70
National Organizations and Resources.....	72

## Key Terms and Abbreviations

This guide includes terms, concepts, and acronyms that may be unfamiliar to new In-Home Support Services (IHSS) participants. They are listed below for reference, and the term itself and its acronym are included in parentheses (). Each acronym is also defined when it is first used in the text.

**Attendant:** A person who is employed by an IHSS agency to provide IHSS. A family member, including a spouse, may be an attendant.

**Authorized Representative (AR):** An individual assigned by the member, or their parent or guardian, if appropriate, who has the judgment and ability to assist them in acquiring and receiving services under Title 2.5, Article 6, Part 12, C.R.S. The AR shall not be the eligible person's service provider.

**CDASS and IHSS Physician Attestation of Member Capacity form:** This form is completed by the member's physician and helps determine what supports a member requires to be safe in the home and community. The physician also determines if the member requires an Authorized Representative (AR). This form is required at initial enrollment and any documented change in the member's condition. Additional forms are required for Authorized Representatives.

**Colorado Department of Health Care Policy and Financing (HCPF):** The State agency that administers Health First Colorado, also known as Medicaid. HCPF oversees IHSS including federal and state authorization, Consumer Direct for Colorado, and the IHSS and case management agencies.

**Community First Choice (CFC):** Services and supports authorized by a 1915(k) granted pursuant to the Social Security Act and provided in home or community settings to a member who requires a level of institutional care that would otherwise be provided in a hospital, nursing facility, inpatient psychiatric institution for individuals under 21 years of age, or Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-ID).

**Consumer Direct for Colorado (Consumer Direct, CDCO):** The state of Colorado training and operations vendor for IHSS and CDASS, contracted by

HCPF to provide training and customer service for self-directed service delivery options to members, authorized representatives, and case managers.

**Direct Care Services Calculator (DCSC):** A tool used by a case manager or vendor to indicate the number of hours of attendant services a member needs for each covered service. For children, case managers must utilize the Age-Appropriate Guidelines provided by HCPF.

**In-Home Support Services (IHSS):** A service delivery option where members have flexibility and control over their services, including the selection, scheduling, and training of their attendants. Services are provided through a licensed Home Care Agency certified in IHSS, which manages the financial and employer aspects of service delivery.

**In-Home Support Services Agency (IHSS agency):** An IHSS agency is an agency certified by the Colorado Department of Public Health and Environment (CDPHE), enrolled in the Medicaid program and provides Independent Living Core Services. IHSS agencies employ and train attendants, and manage attendant payroll, taxes, certifications, and background checks.

**IHSS Agency Care Plan:** A written plan of care developed between the member or the member's Authorized Representative (AR), IHSS agency, and Case Management Agency that is authorized by the case manager.

**IHSS Shared Responsibilities Plan:** The IHSS Shared Responsibilities Plan is required for all members. This form may not be completed prior to the receipt of an approved Physicians Attestation form. The Shared Responsibilities Plan is completed by the member/AR and IHSS agency during initial enrollment and any documented change in the member's condition.

**Self-Determination:** This is the decision by a member to direct their own care. It's about having more independence and control over the member's life.

**Self-Direction:** This involves the day-to-day decisions the member makes about their own care. When the member is self-determined, they can choose who gives them care, when it is received, and how services are performed.

## Chapter One: Welcome to IHSS

Colorado In-Home Support Services, or IHSS, is a Health First Colorado service delivery model that combines traditional agency-based care with self-direction. In IHSS, members direct their care and set their care schedules with the support of an IHSS agency that takes care of hiring and employment. The agency performs background checks, sets hourly wages, pays attendants, and issues tax-related documents.

This agency support allows members to focus on their daily lives while the agency handles employment responsibilities. Members can choose to play a bigger role in employment and training, if desired.

Under IHSS, members may elect or require an Authorized Representative (AR). An AR may not be reimbursed for their role as AR, nor be paid as an attendant. AR's may also not be an AR for more than one IHSS member at a time.

### A Day in the Life of an IHSS Member

What does a typical day look like for an IHSS member?

*"I'm an early riser and like to get a jump on the day. During the week, Jane comes over at about 6 each morning, lets herself in, and helps me get ready for the day.*

*Once I've safely been transferred to my motorized chair and had breakfast, I'm ready to start my day. I work from about 8 until noon, and then my attendant helps me with lunch. I'm not as particular about who provides services during lunch.*

*My IHSS agency has been sending a few regulars I've gotten to know and really like. In the evenings, I've been training a new attendant, Janice, in my wind-down routine, and she's been really great so far."*

### Why Choose IHSS?

People choose IHSS for a variety of reasons. IHSS may be a good fit for you if:

- You want to make decisions about your care. You or your child may have been diagnosed with a disability or may need help with day-to-day activities. You are not alone. About 61 million Americans have a disability of some sort. It is important to remember that you have rights. Among these is the right to make decisions about your own care.
- You would rather not hire and employ your own attendants. IHSS is unique in that it has opportunities for members (and/or an AR, if applicable) to direct their care while having the safety net of an IHSS agency to support them with more difficult tasks, such as hiring and managing attendants.
- You are familiar with agency-based care, and you're interested in self-direction. Living with a disability is nothing new for you, your child, or your spouse. You're familiar with day-to-day life and are ready to start directing your own care. IHSS is a great first step.

Regardless of what brings you to IHSS, it's important to know your rights, both in IHSS and as a self-directed individual. In **Chapter Two, Getting Started**, you'll learn more about using services and scheduling. **Chapter Three** will provide information about working with an IHSS agency and training attendants to meet your needs.

## Understanding Self-Determination and Self-Direction

Self-determination is the decision to direct your own care. It's about having more independence and control over your life. It's the big picture, like driving from one side of the country to the other. There are many things you can do along the way and many decisions to make. Self-determination is the whole journey.

Self-direction is the day-to-day process of making decisions for your care. When you self-direct, you choose or direct: who gives you care, when it is received, and how services are performed.

If self-determination is a cross-country trip, self-direction involves choosing the meals, the hotels, the scenic routes, and the cultural events along the way.



Self-direction comes with a variety of rights that help you control your own care.

Those rights pertain to:

- Your case manager
- The IHSS agency
- The attendants
- The Colorado Department of Health Care Policy and Financing (HCPF)

## Principles of Self-Determination and Self-Direction

The five principles of self-determination help members and attendants with the following choices.

1. **Freedom:** The ability to choose where and with whom you live and how you organize all important aspects of your life with freely chosen assistance as needed. It means deciding for yourself:
  - What choices you want to make about your life.
  - What kind of services and supports to use (if any).
2. **Authority:** Employer Authority – You may select and present employees of your choice to the IHSS agency for hire. Employer authority allows you to manage, train, and even dismiss the employees who support you, including friends and family members.
3. **Support:** The ability to organize your support in ways that are unique to you. You may want or need support/assistance to:
  - Care for yourself
  - Be an active part of your community
  - Take care of your home
4. **Responsibility:** After your IHSS agency validates skills, it is your responsibility to train your attendants to your personal needs.

Along with freedom and choice, you have the responsibility to follow the rules of the IHSS service delivery option including working with your chosen agency ensuring your care needs are met.

5. **Confirmation:** The recognition that people with disabilities should have leadership roles in the redesign of the long-term care service system. An example of this is a member can use their experience with the IHSS service delivery option to help bring change to how those services operate.

One way is by engaging in the Participant Directed Programs Policy Collaborative (PDPPC) each month. The PDPPC is a joint monthly meeting for stakeholders HCPF. Visit the PDPPC website for more information:

<https://www.colorado.gov/pacific/hcpf/participant-directed-programs-policy-collaborative>

## Self-Determination and IHSS

IHSS is one of the service delivery options in Colorado. One benefit of joining IHSS is that it enhances the member's self-determination and decisions about their care.

There are several ways IHSS enhances self-direction and your ability to direct your services. Examples include:

Example	Reason
Present people they choose to the IHSS agency as a potential attendant.	You may recruit your own attendants, including family members, friends, and neighbors.
Train attendant(s) to meet their needs.	You may opt to have the agency train as well.
Dismiss attendants who are not meeting their needs.	You are not the employer, so you cannot fire attendants, but you can choose to dismiss them.

Example	Reason
Schedule, manage, and supervise attendants with the support of the IHSS agency.	Since the IHSS agency is the legal employer of record for your attendants, it is a good idea to keep your agency in the loop on any concerns you may have about your attendant's performance.
Determine, in conjunction with the IHSS agency, the level of in-home supervision as recommended by the member's doctor.	Make sure your needs are met.
Transition to alternative service delivery options at any time.	You can choose a different option if IHSS isn't right for you.
Communicate with the IHSS agency and case manager to ensure safe, correct, and effective delivery of services.	Participate in how services are delivered.
Request a reassessment if the level of care or service needs have changed.	If your health or needs change you can bring it up with your case manager.

## Chapter One Summary

Chapter One introduces IHSS and principles of self-direction. It includes your rights as a self-directing individual, guardian, or Authorized Representative, and describes what they mean. This chapter also includes examples of how a member self-directs on a daily basis in IHSS.

Chapter One highlights:

- IHSS is a self-determination model where you partner with an agency for service delivery.
- In IHSS, your agency employs attendants and is responsible for work-related issues.
- Self-determination is the big picture, like a long road trip.
- Self-direction is in the details, like choosing when to make a pit stop.
- Principles of self-determination and self-direction:
  - Freedom
  - Authority
  - Support
  - Responsibility
  - Confirmation
- IHSS rules govern the application of self-determination.

## Chapter Two: Getting Started

In this chapter we will look at the IHSS enrollment process and available services in IHSS.

### The IHSS Process

#### Step 1. Enroll in Community First Choice (CFC).

- IHSS is available to members on the CFC State Plan program. To start the application process, contact your local [Case Management Agency](#) (CMA).

#### Step 2. Meet with your Case Manager.

- Meet with your case manager to discuss why IHSS is right for you compared to other service delivery options.
  - Looking for your Case Management Agency (CMA)? Find it using the Colorado Department of Health Care Policy and Financing (HCPF) [Case Management Agency Directory](#).
- When you meet with your case manager, you will complete an assessment of your care needs and enrollment paperwork (additional information in Step 3).
- After completing the assessment process, your case manager will provide you with a list of IHSS agencies in your area, or you may review the HCPF [IHSS Provider List](#) for approved agencies in your area.

#### Step 3. Begin to complete required IHSS forms.

Below are forms required to enroll into IHSS:

- **Physician Attestation of Consumer Capacity** is completed by your (the member's) physician and helps determine what supports you need to be safe in your home and community. The physician also determines if the you require an Authorized Representative (AR). This form is required at initial enrollment and any documented change in your condition. An additional form is required for ARs. It is important to know that a person can be an AR or attendant, but not both.
- **The Direct Care Services Calculator** is a tool used by the case manager to indicate the number of hours of attendant services a member needs for

each covered service (Personal Care, Homemaker, and Health Maintenance Activities).

- **The IHSS Shared Responsibilities Plan** is required for all members. This form should not be completed before you have your Physician's Attestation form completed. The Shared Responsibilities Plan is completed by you (or your AR) and your chosen IHSS agency during initial enrollment and any documented change in your condition.

#### **Step 4. Select your IHSS agency.**

- Choose the IHSS agency that is the best fit for you. You may contact them and ask questions about their services.
- After picking an IHSS agency, your case manager will check that it is accepting new members. If they are not, work with your case manager to choose another agency or look into other service options.
- Your case manager will send your chosen IHSS agency a referral and your enrollment paperwork.

#### **Step 5. Enroll with your IHSS agency.**

- Your IHSS agency will review your referral and contact you to set up an intake assessment.
- Attend your intake assessment and share with your agency your needs and desires for care.
- After your intake assessment, your IHSS agency will create a care plan and send it to your case manager for approval.

#### **Step 6. Case manager approves Care Plan and completes the Prior Authorization Request (PAR) process.**

- Your case manager will review and approve your care plan. They will work with your IHSS agency to make corrections if needed.
- If additional information is needed, your case manager will contact you.
- After your case manager approves your care plan, they will enter your PAR in HCPF's system called the interChange (also called Bridge). A PAR has information about your authorized services, service hours, and certification period for IHSS.

## **Step 7. IHSS agency begins staffing and orientation.**

- Your IHSS agency will hire your attendants. As the employer, your agency is responsible for your attendants, but you are welcome to participate in the selection and interview process.
- Attend your IHSS agency's orientation.
- Work with your IHSS agency to train your attendants.

## **Step 8. Services begin.**

- Once your attendants are hired and trained, your IHSS agency will set up their work schedule and begin services.
- If at any time an attendant cannot come to work or doesn't show up, your IHSS agency is responsible for sending a backup attendant.
- Stay in communication with your IHSS agency to manage your attendants and get ongoing support. If you are struggling to work with your agency, you can contact Consumer Direct for Colorado (CDCO) or HCPF at [HCPF\\_PDP@state.co.us](mailto:HCPF_PDP@state.co.us) or 303-866-5638.
- After services begin, CDCO is always available to help answer questions about IHSS. As the Training and Support contractor, we have many resources available to help you navigate IHSS!

## **Available Services**

IHSS has three available service categories: Homemaker, Personal Care, and Health Maintenance Services. Tasks that fall outside of those categories cannot be performed under IHSS. For example, an attendant cannot be utilized for walking a dog or watering a lawn.

There are three main ways to use these lists:

- To guide conversations with your case manager
- To help self-direct services
- To become an Authorized Representative yourself

IHSS services can be used at/during:

- Home

- Offices/Work
- Grocery Shopping
- Community Events

## Homemaker Services

Homemaker Services are defined as general household activities to maintain a healthy and safe home environment for a member. Homemaker Services include:

- **Meal preparation and menu planning:** Preparing all meals for the day, including main meals and snacks; dietary/meal planning, packaging, and storing foods.
- **Shopping:** Assistance with the preparation of shopping lists, purchasing and putting away groceries, medications, and personal hygiene items.
- **Floor Care:** Sweeping, mopping, vacuuming, wiping, spot cleaning, stain removal, bathroom/kitchen floor.
- **Bathroom:** Cleaning the toilet, commode or bedpan, sink and counter, mirrors, and tub or shower.
- **Kitchen:** Wiping up spills in the refrigerator and tossing out old food. Cleaning of the kitchen floor and dishwashing is counted separately under Floor Care and Dishwashing.
- **Trash:** Collecting and disposing in an appropriate container.
- **Dishwashing:** Washing dishes in the sink, drying and putting away, loading and unloading dishwasher as well as wiping the counter, the top of the stove or inside of the microwave, and the outside of other kitchen appliances.
- **Bedmaking:** Making the bed, changing linens.
- **Laundry:** Sorting, washing, drying, ironing, and folding/hanging personal laundry and linens.
- **Dusting:** Brushing or wiping away dust or dirt from surfaces.



- **Appointment Management:** The process of planning, coordinating, and general oversight of appointments to achieve health care goals.
- **Banking/Money Management:** The process of budgeting, saving, spending, or otherwise overseeing the capital usage of a member.
- **Acquisition, Maintenance, and Enhancement of Skills (AME):** A task when the support is related to functional skills training and is desired by the member to accomplish Homemaker tasks. AME services include direct training and instruction to the member in performing Homemaker tasks. The provider or attendant shall be physically present to provide step-by-step verbal or physical instructions throughout the entire task.

## Personal Care Services

Personal Care is defined as services provided to an eligible member to meet the member's physical, maintenance, and supportive needs through hands-on assistance, supervision, and/or cueing. These services do not require a nurse's supervision or physician's orders. Personal Care includes:

- **Eating/feeding:** Assistance with eating by mouth using common eating utensils such as spoons, forks, knives, and straws.
- **Respiratory Assistance:** Cleaning or changing oxygen equipment tubes, filling distilled water reservoirs, and moving a cannula or mask to or from the member's face.
- **Skin Care:** Preventative skin care when skin is unbroken, including the application of non-medicated/non-prescription lotions, sprays and/or solutions, and monitoring for skin changes.
- **Bladder/Bowel Care:** Assisting member to and from the bathroom; assistance with bed pans, urinals, and commodes; changing incontinence clothing or pads; emptying Foley or suprapubic catheter bags, but only if there is no disruption of the closed system; emptying ostomy bags; and Perineal care.

- **Hygiene:** Shampooing, grooming, shaving with electric or safety razor, combing and styling hair, filing/soaking nails, oral hygiene, and denture care.
- **Dressing:** Dressing assistance with ordinary clothing and the application of non-prescription support stockings, braces, splints, and artificial limbs when the member can direct or assist.
- **Transfers:** The member has sufficient balance and strength to reliably stand and pivot and assist with the transfer. Adaptive equipment may be used in transfers when the member/attendant is trained in the use of the equipment and the member can direct and assist with the transfer.
- **Mobility:** The member can reliably balance and bear weight or when the member is independent with an assistive device.
- **Positioning:** The member verbally/non-verbally identifies when a position needs to be changed.
- Simple alignment in a bed, wheelchair, or other furniture.
- **Medication Reminders:** Asking if medications were taken, verbally prompting to take medications, handing the appropriate medication minder container to the member, and opening the container if the member is unable to do so independently Medication must be:
  - Preselected by the member, a family member, a nurse, or a pharmacist.
  - Stored in containers other than the prescription bottles
  - Marked clearly with the day, time, and dosage
  - Kept in a way that prevents tampering
- **Medical Equipment:** Cleaning and basic maintenance of durable medical equipment
- **Protective Oversight:** Supervising the member to prevent or mitigate disability-related behaviors that may result in imminent harm to people or property.

- **Accompanying:** Accompanying the member to medical appointments and errands, such as banking and household shopping, assisting with communication, documentation, verbal prompting, and/or hands-on assistance when the task cannot be completed without the support of the attendant, and providing one or more personal care services as needed during the trip.
- **Bathing:** Providing unskilled full or partial bathing or cueing for assistance, including shower, tub, sponge, or bed baths.
- **Acquisition, Maintenance, and Enhancement of Skills (AME):** A task when the support is related to functional skills training and is desired by the member to accomplish Personal Care tasks. AME services include direct training and instruction to the member in performing Personal Care tasks. The provider or attendant shall be physically present to provide step-by-step verbal or physical instructions throughout the entire task.

## **Health Maintenance Activities (HMA)**

Health Maintenance Activities (HMA) are defined as those routine and repetitive skilled health-related tasks that are necessary for health and normal bodily functioning, that an individual with a disability would carry out if they were physically able, or that would be carried out by Family members or friends if they were available. These activities include skilled tasks typically performed by a Certified Nursing Assistant (CNA). Health Maintenance Activities include:

- **Skin Care:** Applying treatment to broken skin or skin that has a chronic condition that may cause infection, including wound care, dressing changes, application of prescription creams, lotions, or sprays, and application of prescription medicine and foot care for people with diabetes when directed by a Licensed Medical Professional.
- **Hair Care:** Shampooing, conditioning, drying, and combing when performed in conjunction with Health Maintenance level bathing, dressing, or skin care. Hair care may be performed when the member is unable to complete the task independently, requires application of a prescribed

shampoo/conditioner dispensed by a pharmacy, or the member has open wound(s) or neck stoma(s).

- **Nail Care:** Soaking, filing, and trimming nails when medical conditions that may involve peripheral circulatory problems/loss of sensation are present.
- **Mouth Care:** HMA skincare is required in conjunction with the task, or injury or disease of the face, mouth, head, or neck; in the presence of communicable disease; member is unable to participate in the task; oral suctioning is required; decreased oral sensitivity or hypersensitivity; member is at risk for choking and aspiration.
- **Shaving:** HMA skincare is required in conjunction with shaving. Shaving may be performed when/if a member has a medical condition involving peripheral circulatory problems, conditions involving loss of sensation, the member takes medications associated with a high risk of bleeding, and/or if a member has broken skin at/near the shaving site or a chronic active skin condition.
- **Medical Management:** As directed by a Licensed Medical Professional to routinely monitor a documented health condition, including but not limited to blood pressures, pulses, respiratory rate, blood sugars, oxygen saturations, intravenous or intramuscular injections.
- **Accompanying:** Accompanying the member to medical appointments and errands such as banking and household shopping. Must include one or more health maintenance tasks as needed during the trip. Includes communication, documentation, verbal prompting, and/or hands-on assistance when the task cannot be completed without the support of the attendant.
- **Positioning:** HMA skin care is required in conjunction with positioning when the member is not able to identify with the attendant when the position needs to be changed.

- **Exercise:** Includes a passive range of motion; must be specific to the member's documented medical condition and require hands-on assistance to complete.
- **Dressing:** HMA skincare or transfers are required in conjunction with the dressing, or member is unable to assist or direct care. Including the application of prescribed anti-embolic stockings, pressure stockings, and/or prescribed orthopedic devices such as splints, braces, or artificial limbs.
- **Bladder Care:** HMA skincare or transfers are required in conjunction with bladder care, or member is unable to assist or direct care; external, indwelling, and suprapubic catheters; changing from a leg to a bed bag and cleaning of tubing/ bags as well as perineal care.
- **Bowel Care:** HMA skincare or transfers are required in conjunction with the bowel care, or the member is unable to assist or direct care; administration of a bowel program including but not limited to digital stimulation, enemas, or suppositories; care of a colostomy or ileostomy that includes emptying and changing the ostomy bag and application of prescribed skin care products at the site of ostomy.
- **Bathing:** HMA skin care, transfers, or dressing in conjunction with bathing.
- **Respiratory Care:** Postural drainage, cupping, adjusting oxygen flow within established parameters, suctioning of mouth and nose, nebulizers, ventilator and tracheotomy care and assistance with set-up and use of respiratory equipment.
- **Medication Assistance:** Set up, handle, and assist the member with the administering medications. The IHSS agency's RN must validate the attendant skills for medication administration and ensure that the completion of the task does not require clinical judgment or assessment skills.
- **Mobility:** HMA transfers are required in conjunction with the mobility assistance, or the member is unable to assist or direct care; hands-on assistance is required for safe ambulation and the member is unable to

maintain balance or to bear weight reliably due to illness, injury, or disability; and/or the member is not independent with adaptive equipment or assistive devices ordered by a Licensed Medical Professional.

- **Transfers:** The member is unable to perform transfers due to illness, injury, or disability, or member lacks the strength and stability to stand, maintain balance or bear weight reliably; the member has not been deemed independent with adaptive equipment or assistive devices by a Licensed Medical Professional.
- **Feeding:** HMA skincare or dressing in conjunction with the task, or oral suctioning is needed on a stand-by or intermittent basis; member is on a prescribed modified texture diet; physiological or neurogenic chewing or swallowing problems; syringe feeding or feeding using adaptive utensils is required; oral feeding when the member is unable to communicate verbally, non-verbally or through other means.

## **Service Limitations for Attendants and Legally Responsible Person(s)**

### **Frequently Asked Questions**

In IHSS, all individuals you hire, including family members or relatives, to provide your care are referred to as an 'Attendant'. Here are some common questions you may have about attendant services:

#### **Are there service limitations for attendants?**

Attendants may provide all three service types under IHSS: Homemaker, Personal Care, and/or Health Maintenance Activities (HMA). All attendants may not work more than 16 hours per day, except in documented emergency situations. If you and/or a member require more than 16 hours per day, a different attendant must provide these hours.

#### **What is a Legally Responsible Person (LRP)?**

A LRP is defined as a person who has legal responsibility to care for another person such as the parent or guardian of a minor child or the member's spouse.

## **Are there service limitations for an LRP?**

Yes. If you are considered the member's LRP, you may only provide up to 10 hours per week of Homemaker services. Your LRP is also considered an attendant, so they must also follow the 16-hour per day limitation.

## **What do services look like on a day-to-day basis for a member with a LRP?**

In a given day, an example would be that the LRP provides 3 hours of Personal Care, 2 hours of Homemaker, and 6 hours of Health Maintenance Activities. For an LRP there is a 10-hour limit for Homemaker. The LRP could split the Homemaker hours throughout the week depending on the needs of the member.

## **Chapter Two Summary**

Chapter two introduces the IHSS process, from enrollment to active services. It includes an overview and timeline of the organizations and professions you will need to work with while on IHSS. The steps are:

1. Enroll in Community First Choice (CFC)
2. Meet with the case manager
3. Begin to complete required IHSS forms
4. Select an IHSS agency
5. Enroll with your IHSS agency
6. Case manager approves Care Plan and Completes PAR process
7. IHSS agency begins staffing and orientation
8. Services Begin

Part Two of **Chapter Two** describes these services available in IHSS:

- Homemaker
- Personal Care
- Health Maintenance

Lastly, it covered service limitations for your IHSS attendants and Legally Responsible Person(s) providing your services.





## Chapter Three: Partnering With an Agency

The IHSS agency you choose wants you to succeed with self-direction. They can provide many types of support as the legal employer of record.

By now you have learned that your agency conducts interviews and trains attendants. Did you know that your agency also handles all work-related activities such as background checks, paychecks, taxes, etc.? Your agency is more than that; they truly are a partner in your IHSS services.

IHSS agencies also provide self-direction support, independent living skills training, peer counseling, and advocacy.

If you have been wondering whether you have what it takes to be self-directed and to live independently, your IHSS agency is there to help. They can provide the support you need to feel confident about participating in IHSS.

As we go through different ways your IHSS agency can support you, keep in mind that you can take a more active role, if desired. One way to become more active in your role is by recruiting and training attendants.

### IHSS Agency as an Employer

Your IHSS agency manages all administrative duties of being an employer, including:

- **Hiring** – Your IHSS agency performs all hiring-related duties, such as processing applications, making job offers, and determining rate of pay.
- **Taxes** – The IHSS agency calculates payroll taxes and issues W-2s at the conclusion of the year.
- **Payroll** – They process your attendant's time and issue paychecks on a regular schedule.
- **Employability** – The IHSS agency conducts these background checks to ensure attendants are legally able to provide care:
  - Criminal Background
  - Office of Inspector General

- Board of Nursing
- Colorado Adult Protective Service
- **Training and Evaluation** – Attendants are trained on tasks and job responsibilities, and their skills are evaluated on a regular basis.
- **Corrective Action and Discipline** – When an attendant has tardiness issues or is not performing their job well, the IHSS agency attends to their discipline. You should report any concerns you have to your agency so they can be addressed.
- **Scheduling** – While you develop a schedule of services with your IHSS agency, the agency coordinates with attendants to ensure that your services are delivered as determined by your Care Plan.

## **Member and AR Participation**

Ultimately, you decide when your services are provided. The IHSS agency coordinates your attendants to provide services on your terms. When an attendant is not performing as expected, makes mistakes, or is rude, it is up to you and/or your Authorized Representative (AR) to report the behavior to your agency. You can take a more active role in training to help attendants meet your specific needs.

## **IHSS Agency as a Care Coordinator**

Your IHSS agency also acts as a care coordinator for you. They:

- Develop a Care Plan and send it to your case manager for approval.
- A Care Plan illustrates the frequency, duration, and scope of the services your attendants are approved to provide.
- Provide 24-hour backup attendants for scheduled shifts.
- Your IHSS agency is legally required to back up scheduled visits when an attendant misses work through illness or hardship, or when you need more care due to an unforeseen circumstance.
- Your attendants should contact the IHSS agency when they are unable to work, and the agency will notify you that a different attendant will be attending to your needs.

- Provide access to a licensed health care professional/registered nurse (RN).
- If your health needs change, the IHSS agency RN can help you update your care plan. They can also help with training if you or your attendants have questions.
- If necessary, IHSS agencies can speak to your physician or other medical support to coordinate care.
- Provide orientation and training to you.
- Your IHSS agency will introduce you to IHSS and help you better understand self-determination and self-direction.
- Help with emergency planning
- Your IHSS agency will also help with forming an emergency plan if something unexpected happens. For example, if you live in a remote area, a backup generator may be necessary.

## **Member and AR Participation in IHSS**

Ask your IHSS agency about their policy for backup support and other services. It is good to have their phone number(s) handy. Put them in an easily recognized spot, such as on your refrigerator. During your orientation with your IHSS agency, ask about how they have helped others succeed. You can work with them to develop a plan to become more independent.

## **IHSS Agency as a Recruiter**

Your IHSS agency can also recruit new attendants on your behalf. You can also choose to be more involved with recruiting. Many IHSS members like to find their own backup attendants, especially neighbors, family, and friends who can be there at a moment's notice.

As a recruiter, your IHSS agency:

- Posts advertisements and seeks out potential attendants
- Reviews resumes and conducts phone screenings
- Conducts interviews
- Contacts attendant references

- Performs follow-up interviews, as necessary
- Hires attendants

## **Member and AR Participation**

When considering taking on a new attendant, or when a regular attendant has decided to move on, contact your IHSS agency to discuss your choices. They may have staff available and can send you potential attendants to help you until you find a good match. Losing a good attendant can be difficult, but your IHSS agency can help ease you through it.

## **Continued IHSS Support**

Your IHSS agency wants you to thrive in IHSS for a number of reasons. If you are happy with your IHSS agency, you're much more likely to recommend their services. Your success with IHSS is their success. To this end, IHSS agencies provide a number of other services and supports to you, known generally as Independent Living Core Services (ILCS).

## **Independent Living Core Services**

Independent Living Core Services are services that advance and support the independence of individuals with disabilities and to assist those individuals to live outside of Institutions. These services include but are not limited to:

- **Independent Living Skills Training**

Independent Living Skills Training includes almost anything an individual may need to maintain or increase their level of personal independence. Together with the member, the agency sets goals and develops action steps for the individual to achieve their goals. This process provides the opportunity for people to learn the skills and develop the necessary resources to maximize personal independence.

Examples of Independent Living Skills Training:

- Locating community resources
- Budgeting

- Using public transportation services
- Cooking
- Advocating for yourself
- Managing a household
- Planning nutrition
- Organizing
- Communicating
- Managing stress
- Accessing adaptive recreation
- Finding and scheduling an attendant
- **Peer and Cross-Disability Peer Counseling**

Peer and cross-disability peer counseling is the ability for members with differing levels of ability to connect with one another to find support. Peer counseling emphasizes the direct involvement of persons with disabilities as role models because, by virtue of their disability-related experience, people with disabilities are uniquely qualified to help their own peers. The agency should help members make these connections so that they may share their stories of success and find solutions for their challenges.

Examples of peer and cross-disability peer counseling:

  - Facilitating a Peer Support Group.
  - Connecting members who wish to help support their peers and those needing the support of peers through email, telephone and video chat.
  - Facilitating social events where members and others in the community can come together to connect, network, or find support.
- **Information and Referral Services**

Access to information and referral services is essential for people with disabilities. In addition to varied types of direct services, people need information on options, resources, and the issues that influence their abilities to achieve independent lifestyles.

Examples of information and referral services:

- Connecting a member to their case manager when questions regarding eligibility or Medicaid reassessment come up.
- Connecting a member to a Center for Independent Living that service their area.
- Providing information on the local senior center.
- Connecting a member to community resources.

- **Individual and Systems Advocacy**

Advocacy involves a process that empowers members to act on their own behalf and focuses on member control and self-reliance. The agency encourages self-advocacy through a problem-solving process to help the member identify alternative strategies and when and how to use them to overcome inhibiting or destructive situations.

Examples of advocacy:

- Promoting Disability Awareness
- Informing a member of their rights to appeal decisions made by agencies
- Educating members on their rights
- Assisting a member to problem-solve an issue related to their disability
- Connecting a member to the local Center for Independent Living to address an issue

- **Transition Services**

Transition services are important to ensure members maintain a level of independence within the community. Transitions occur in a variety of ways. Assistance with transitions can include supporting youth with disabilities to reach identified goals for successfully transitioning from school to adult life in the community; aiding people who are at risk of entering into institutions so the individual may remain in the community and identifying and

addressing unmet needs when a member has recently returned to the community from a nursing facility.

Examples of transitions services:

- Identifying a member's change in functional ability and assessing need for change in the service plan to help avoid hospitalization or facility placement.
- Assisting a member in finding adaptive equipment to sustain independence in the home.
- Supporting a member in calling their case manager to address or request more resources and services.

See **Chapter 4: Being Proactive in IHSS** for more information on recruiting.

## **When to Contact Your IHSS Agency**

The agency will reach out to your attendants and make arrangements that meet your needs. You should contact your agency first if you have any questions regarding your attendants or needs of your attendants.

For example:

- If your attendant was supposed to arrive at 11:00 am and hasn't arrived by 11:30 am.
- If your attendant was previously coming twice a day but is now only able to come once a day.
- If your attendant says they are unable to provide certain kinds of care.

Your agency will have policies and procedures in place to follow if an unexpected situation occurs. Be sure to contact your agency as soon as possible if:

- Your attendant doesn't show up.
- Your attendant is unable to provide care
- Your attendant is unavailable.

## **Bringing Attendants to Your Agency**

As mentioned earlier, part of directing and managing your own care can include choosing your own attendant. There are a few things to keep in mind:

- Your attendant will need to fill out an application with the IHSS agency and have background checks performed. Your attendant may not be eligible to provide services if they do not pass all the requirements of the background checks. It is the agency's responsibility to ensure services are provided safely.
- Your attendant will need to be approved to start working by the IHSS agency. Your agency will let both you and your attendant know what date they can begin providing services.
- The rate of pay your attendant earns is determined by the IHSS agency and must adhere to all state and county minimum and base wages. Pay rates and other benefits may vary based on the agency. Speak with your case manager if you would like a list of approved IHSS agencies. You get to choose which agency you work with.

## **Chapter Three Summary**

In this chapter, you learned that your IHSS agency is truly your partner. In addition to work responsibilities, IHSS Agencies act as advocates, provide self-direction support, and help IHSS members with life skills.

Communication is an important part of IHSS, and you should be in regular contact with both your IHSS agency and your case manager, especially when there is a change in condition or service needs.



## Chapter Four: Being Proactive in IHSS

As a Self-Directed individual, you can choose how involved you would like to be with your care.

In this chapter, we'll explore some of the ways you can get more involved in the recruitment process. We'll give you a simple overview of the different ways you can participate in recruitment. Plus, we'll share a helpful guide to make it easier for you to take a more active role in finding and recruiting attendants.

As you become more familiar with the self-direction options, you may decide at some point that you would like to take on the role of employing your own attendants through the Consumer-Directed Attendant Support Services (CDASS) service delivery option. While this can be a big step, requiring a lot more time and responsibility, it can be rewarding for people ready for complete control over their care.

At the end of this lesson, we will discuss considerations for those interested in transitioning to a different Participant-Directed Program, specifically CDASS.

### General Preferences

Remember also to keep your general preferences in mind as you receive services. For example, you may like bathwater to be a certain temperature, you may like your house cleaned in a particular order, or perhaps you prefer your bed made in a specific way.

Be sure to communicate how you like things done, especially if you find something uncomfortable or annoying. Think about these preferences ahead of time and create a list. You can provide it to your attendant and go over any questions they have. This sets your expectations early on, which can help resolve issues that may come up later.

### IHSS Agency as a Partner

As mentioned in **Chapter Three**, your IHSS agency is a partner in self-direction.

They may have an attendant on hand who meets your needs or may actively seek attendants for you. Your IHSS agency will complete all activities related to onboarding.

You have control over your level of involvement, including recommending attendants, interviewing, scheduling, and training.

## **Developing a Relationship with your IHSS Agency**

Good communication with your IHSS agency is essential. Regular contact helps your agency serve you best. They will better understand your health, your personality, and your needs. You can develop your partnership by contacting them when:

- There is a change in your needs or health (also contact your case manager).
- You are struggling with an attendant.
- You want to compliment an attendant.
- You have a question about self-direction or need help with life skills.
- You want to recruit a new attendant.
- You believe your attendant needs more training.

Your IHSS agency can also support you if you decide to be involved in recruiting new attendants or backup attendants. They can help with all parts of recruiting and be present with you during an attendant interview.

## **Involvement in Recruiting**

As an IHSS member, you can choose to partner with your agency and select your attendants if you want that level of involvement.

Complete guidelines for recruiting, interviewing, and selecting attendants are in Appendix A of this guide. You can access both Appendix A and Appendix B in the Resources lesson at the end of this guide.

If you have questions or need help with recruiting activities outlined in this appendix, ask your IHSS agency about other training they may offer.

## **Taking an Active Role in Training**

When you have a new attendant, there are certain topics you can discuss to help customize your care.

### **Orientation to Your Home**

Everyone has certain house rules, such as removing your shoes, or announcing yourself as you enter. You may want attendants to place their personal items in a specific location, always lock the door behind them, etc. Explaining these rules will help avoid misunderstandings. Consider how you like your home to be treated and share this with new attendants.

**Equipment:** While your IHSS agency will train your attendants on equipment, you can reinforce this training for any equipment related to your care that you may have in your home. Not all medical devices function exactly the same way. Contact your IHSS agency for help.

**Note:** Talk with your case manager if you need service-related equipment in your home. They may be able to provide it to you.

### **Safety**

It is important that attendants provide services to you in a way that is safe for everyone. You are also responsible for maintaining a safe environment for your attendant to work.

If you feel that an attendant is not working safely, contact your IHSS agency. They may ask in what ways the attendant is being unsafe. This allows the agency an opportunity for corrective action and retraining, if necessary.

Also, take time to ask your attendant if there are changes needed to make their work environment safer. You can talk to your IHSS agency about how these changes can be made.

## **Needles, Sticks, and Sharps**

The IHSS RN can train your attendants on the proper use and disposal of needles. Needles should never be recapped and should always be placed directly in a Sharps container after use. This helps prevent the spreading of bloodborne diseases.

**Note:** If a needle stick exposure occurs, you should report it to your IHSS agency immediately.

Some IHSS members want to be more hands-on with finding their own attendants than others. You should not feel pressured into participating more or participating less. As a Self-Directed individual, you make decisions about your own care.

## **Common Approaches**

If you are new to IHSS or self-direction, you may be asking yourself about common decisions other members make about recruiting and interviewing.

What seems to work for other IHSS members? Here are some typical approaches to selecting your own attendants:

1. The member recruits (or brings) attendants, and the IHSS agency does the final interviews and hiring.
  - Recruiting attendants and passing them along allows your IHSS agency to follow their procedures for ensuring quality employees.

This means you are trusting your IHSS agency for their final decision.

2. The IHSS agency recruits primary attendant(s), and the member recruits backup attendants.
  - This approach allows you to have more confidence in backup attendant availability. IHSS agencies may have limited staff on weekends and overnight shifts, which can make backup care at those times difficult.

It is also possible there may be a wider variety of attendants than if you had recruited your own.

3. The IHSS agency sends temporary attendants while you as the member/AR, recruits and interviews your primary attendant.
  - This option is more involved and takes longer; however, the results are more controlled.
  - The temporary attendants keep care needs met while you look for a long-term attendant just right for you.

## **Supervision**

To help keep you organized, consider maintaining a file for your attendants. This file can hold copies of notes from important attendant conversations, attendant reviews that both of you have signed, or any pertinent information about that specific attendant.

Think about how to keep personal information safe when you plan where to store your files. Your files may include private information, such as date of birth, social security number, and bank account numbers. Keep this information in a place that is secure, but that you can access easily if questions come up. You can keep notes in these files such as an attendant's shift information to help you remember which attendant will be arriving for what shifts. It is completely up to you to create an organized, simple system.

The IHSS agency is also required to maintain a copy of the attendants' employment paperwork. Because your agency is responsible for paying attendants, it is important that you keep your agency up to date on address or phone number changes. Your agency also issues W-2s to your attendants. To ensure the W-2 reaches the attendant in a timely fashion, it is your attendant's responsibility to provide the agency with a current address.

Ask your IHSS agency for information on processes for address, phone, and email changes for you and your attendants.

## **Attendant Performance**

It can be difficult to evaluate a person you are working with, especially when you rely on the services they provide and develop a close relationship with them.

One way to avoid making this an unpleasant situation is to plan regular evaluations.

Think about situations when you would praise your attendant and situations when you would need to see improvement. Your IHSS agency can also help you provide feedback and review attendant performance.

You can evaluate and coach your attendants. This includes tracking absences, late arrivals, and no-call/no-shows. You should track the dates and details of these occurrences in the attendant's employee file. Make sure to keep your IHSS agency informed of any problems with performance or attendance.

## **Attendant Dismissal**

It is suggested that you give attendants verbal and written warnings before dismissing them. Remember, everyone has "off days" when they are not at their best. It is important to work through them and seek support from your IHSS agency if you are struggling.

Your IHSS agency will have a process for addressing performance issues and can guide you accordingly. It is important to document all interactions with attendants and keep documentation in their employee file or send them to your IHSS agency for storage. Attendants should always be given the chance to improve less than desirable behaviors.

It is a good idea to follow common guidelines for employment, which will make it easier if you do need to let them go. Make sure to:

- Address issues with verbal and written warnings, calling out what was unacceptable and how it can be fixed.
- Document the "what, where, when, and who" of issues:
  - What happened?
  - Where did it happen?
  - When did it happen?
  - When did you provide the warning?
  - Who was involved or present?

- Keep a record of written warnings that have been discussed and be sure you and your attendant acknowledge the warnings by signing.
- Develop and file a corrective action plan with your employee and IHSS agency. The action plan should be detailed with specific timelines and requested changes in their performance.
- If you decide to dismiss an attendant, you need to inform your IHSS agency and follow their process.
- Even if the attendant stops working for you, they may continue working for the IHSS agency. There are Federal and State labor laws that may require a final check to be processed if the attendant chooses to no longer work for the agency.

## Accessing Emergency Care

Another important way that you can be more involved in self-direction is to plan for emergencies and emergency care. Thinking about how your services or your health may be affected by a disaster can be scary or uncomfortable. However, being prepared with a plan will bring some reassurance if the worst happens. Let's start off with a few tips regarding emergency services, such as 9-1-1 and notifications from your regional governments and agencies.

### Smart 911

Smart911 is a free service with which you can provide information about yourself, your medications, your home, and your family when you dial 9-1-1 from your smartphone. This is a great tool if you don't have a landline.

While smartphones are great for many things, they do not give emergency personnel a lot of information to work with. That's where Smart911 comes into play. By setting up a profile, you can choose how much information about you is available to firefighters, police, and EMTs.

You can identify:

- Medications you take

- If you have a disability
- The layout of your home
- How many people live with you
- If you have any pets or service animals

The list of options goes on from here. Smart911 is not available in all regions—your local government must adopt it.

## **Code Red**

Another tool that may be available in your area is an Android and iOS (iPhone) App called CodeRed. CodeRed issues weather and emergency alerts “pushed” by your local government. For locations where CodeRed has been implemented, this tool can alert you to any conditions or disasters that may affect you. To sign up for CodeRed, open the AppStore on your iPhone or Google Play Store on your Android and search for CodeRed.

## **Make an Emergency Plan**

It is also a good idea to have a plan in place in case of an emergency. Your IHSS agency is required to offer to help you with this. To start building an emergency plan, talk it through with your friends and family and invite your IHSS agency to the conversation. Discuss disasters that may occur in your area, which might be anything from floods to forest fires to blizzards.

Talk about any health conditions you may have, and what you would need to be safe if something were to happen. Also, consider where you would go or who you would stay with if you are unable to stay in your home.

You can find great emergency plan templates for planning your backup care on the American Red Cross Website or you can contact Consumer Direct for help creating an emergency plan.

## **What to Include in Your Emergency Plan**

Your plan should include all the information you need to safely get through an unexpected situation, and once you have a plan in place, be sure to share it with



your attendants. Your plan should include a list of all of your primary contacts and their phone numbers, in the order of who to call. The person at the top of your list should be the most knowledgeable and reliable. Be sure to include a neighbor or family member on your list who can provide services to you if your attendants are unable to reach you.

The plan should list all medications you take and how often you take them. It should identify where medications are located. Include in the list any devices you require, such as a CPAP or a nebulizer. Include a brief description of your health needs and any conditions you may have, including allergies.

If the disaster requires an evacuation from your home, identify safe places where you can meet up with friends and family. It's a good idea to have this thought out ahead of time, as it will prevent any confusion. Your Emergency Plan should be posted somewhere easy to find so that if you call 911, or emergency responders arrive at your home, they will quickly be able to find it.

## **Practice Your Emergency Plan**

Once you have an emergency plan in place, set aside time to practice it. This will help you identify if there are any parts of your plan that are incomplete or do not make sense.

## **Disaster Kit**

Have a small kit with items needed during a disaster stashed somewhere convenient.

Make sure to include your:

- Contact list
- Evacuation plan
- Medication (enough to last three days)

You can add items to this kit as you revisit your emergency planning with things like a change of clothes, a toothbrush, etc. Keeping a little bit of cash in your disaster kit can cover any small expenses if they should come up.

Also plan on what items you will need in the event of a blackout or isolating event where you cannot leave your home and others cannot reach you. It's a good idea to have a week's worth of food and at least one gallon of water for each person in your home per day stowed away.

## Taking Self-Direction to the Next Level

While IHSS is one of the service delivery options available to you, there are others. At some point, you may decide to take more responsibility and control with self-direction, including being an employer and hiring your own attendants.

CDASS (Consumer Directed attendant Support Services) is a service delivery option in which members, or their Authorized Representatives (AR), are trained on and control all aspects of their care within a service budget available to them. This includes hiring, recruiting, scheduling, training, firing, and managing one or more budgets.

CDASS is great for those who want more independence and do not mind the extra time and effort required with being an employer to their attendants. In CDASS, many of the IHSS responsibilities outlined in **Chapters Two and Three** are taken on by the member or AR. When you need a backup, you simply contact the attendant directly. When there is a scheduling change, you also coordinate directly with attendants.

The main difference is that there will not be an IHSS agency to help with training, payroll, attendant oversight, emergency planning, etc. With CDASS, payroll and employee taxes are handled by an FMS (Financial Management Services) agency. This means that you won't have to cut checks or issue tax documents.

If CDASS sounds like something you are interested in learning more about, please consider these resources:

- Review or download the CDASS Program Manual.
- Think about how easy or hard it may be to find your own attendants. CDASS members sometimes find that they have difficulty recruiting

employees. This is often because of circumstances beyond their control. They may live in a remote or sparsely populated area, or a booming economy may cause potential candidates to choose other work. If this is a concern, talk with your case manager, seek out current CDASS members for peer support, and/or reach out to Consumer Direct for Colorado (CDCO) for more information.

- Imagine yourself (or your AR) in the role of an employer. Sometimes employers must make hard decisions, such as corrective actions or terminating a difficult attendant. CDASS training makes these situations easier to navigate, but it will still likely be a difficult conversation.

If CDASS is the path you want to follow, the next step is to contact your case manager. You can transition from IHSS to CDASS. You can also return to IHSS if CDASS does not work out.

### **IHSS and CDASS: Key Differences**

<b>Program Area</b>	<b>IHSS</b>	<b>CDASS</b>
Attendant hourly pay and raises	The IHSS agency sets pay rates and pay raises.	You decide how much attendants are paid and when they receive a raise.
Managing a budget for services	The IHSS agency works with you to schedule services within your authorized care hours.	You are responsible for how services are used and for staying within your approved budget. There is no safety net if you run out of time/money.
Recruiting Attendants	You may recruit, as needed, with the support from the IHSS agency.	You are responsible for recruiting, hiring, firing, and employing attendants.
Scheduling	You contact your IHSS agency regarding	You schedule your attendants directly and

<b>Program Area</b>	<b>IHSS</b>	<b>CDASS</b>
	scheduling changes and needs.	contact them when needed.
Training	The IHSS agency trains your attendants and ensures their skills are validated at initial enrollment and during supervisory visits. You may train your attendants according to your specific needs and preferences.	You are responsible for all parts of employee training.
Firing/Dismissing	You dismiss attendants by contacting the IHSS agency.	You track attendant performance issues and terminate their employment. You must report their termination to your FMS agency.
Backup attendants	Your IHSS agency may help you find more attendants as needed.	You are responsible for always keeping a minimum of two attendants.
Service Delivery Option Availability by Medicaid Program	Community First Choice (CFC)	Community First Choice (CFC)

## Chapter Four Summary

Chapter four discussed the pros and cons of recruiting attendants and taking a larger role in your emergency planning. We also present the option of taking more responsibility in self-direction by becoming an employer.

Chapter Four highlights:

- You can take a more active role in training attendants if you want.
- You can recruit attendants. Your IHSS agency can help.
- Services like Smart911 and CodeRed can provide disaster information and help emergency personnel.
- It is good to be prepared for emergencies, such as:
  - Black-out, power outage, or isolation events
  - Events which require you to relocate
- You should have a small kit with enough medication and supplies for three days.
- Be sure to develop emergency plans with your friends, family, or advocates.
- IHSS is not the only option for self-direction in Colorado.



## Appendix A: Recruiting Guide

As described in **Chapter Four**, you may choose to have a more active role in recruiting and hiring attendants. Some members choose to create job descriptions, post advertisements, complete phone screenings, and more! Others may choose to work with their IHSS agency and their available employees. This Appendix is a resource guide for each stage of finding a new or backup attendant.

It is important to note that your IHSS agency is the legal employer of record and managing employer for all your attendant(s) hired. Because of this, your IHSS agency is responsible for all hiring and terminating steps, including running a Colorado Bureau of Investigation criminal background check on your attendants and following federal and state employment laws.

Your IHSS agency may also have policies, procedures, and forms they use with recruiting and hiring. By working with your IHSS agency during the hiring and recruiting process you'll run into fewer snags.

### Recruiting Goals

The goal of recruiting is to find the right person, or people, for your care. You want to start from a bigger pool of candidates - but not **too** big - and then narrow down your field as your search continues.

If a job posting is too specific, it may produce far fewer candidates than you'd like, or perhaps none. If a job posting is too generic, you may end up sorting through dozens of applicants. It's a balancing act. Try to be specific enough, but not restrictive.

Phone screening allows you to lower your number of potential attendants. You do not have to let people immediately know that you aren't considering them for the position.

Checking references and interviews is best done with the final 3-5 candidates. Even if you feel right about one of the candidates, you will still want to work with your IHSS agency on the final steps and onboarding.

Remember, your IHSS agency can help with every step along the way!

## **Attendant Requirements**

When considering recruiting and hiring attendants, IHSS requires:

- Attendants must be at least 16 years of age.
- Attendants under the age of 18 may not operate lifting devices (i.e. a Hoyer lift).
- Attendants must complete and pass the Colorado Bureau of Investigation Criminal Background Check, a Board of Nursing Check, and an Office of Inspector General (OIG) Check performed by the IHSS agency to be employable.
- Attendants must demonstrate competency in caring for the member to the satisfaction of the member or AR. Attendants must be able to perform the assigned tasks on the Care Plan.

Your IHSS agency must follow all state and federal laws regarding hiring your attendant.

## **Recruiting Attendants**

Before recruiting an attendant, you must consider what tasks need to be performed. Since you and your case manager have already worked together to establish your care needs, you can work with your IHSS agency to determine recruiting needs and what skills a person needs to complete the task approved.

Finding the right attendant takes time. The amount of time depends on your needs and preferences. Use all the available resources when considering whether you want to hire friends, family members, or neighbors. Using people you know can make the process easier, but it can also be tough on your relationship with that person long-term.

The Department of Labor and the Employment Opportunity Act prohibits employers from discriminating against any current and/or possible employee due



to their color, sex, religion, national origin and/or sexual orientation. Make sure you are recruiting attendants that are qualified to meet your care needs and not your biases.

## **Recruiting Tips**

We have listed the steps for you in the order they will occur during your recruiting process. Use this as a checklist or outline; it is completely up to you.

- Create a job description.
- Create a job advertisement.
- Post a job advertisement.
- Screen potential attendants.
- Interview attendants.
- Check references.
- Select employees.

## **Creating a Job Description**

A well-written job description will help you when screening and interviewing potential attendants. Be sure to explain the job in detail, including the pay range and any requirements you prefer them to have, such as being a non-smoker.

List the skills and experience you want your attendants to have and provide information on their potential schedule. Be sure to include your contact information. Remember, the more information you can provide, the easier it will be to find your ideal attendant.

The Department of Labor and Colorado's Equal Pay for Equal Work Act prohibits employers from discriminating against an employee's rate of pay. To avoid discrimination practices, Employers in Colorado must list the following on their job descriptions:

- Compensation range
- General description of the job
- Work benefits

Read our sample job description for an example of a good job description.

### **A Good Job Description Can:**

- Help you to identify your needs.
- Be used as a basis for your job listing.
- Provide applicants with a list of daily physical needs.
- Help you and your applicants ask careful questions during the interview.
- Provide a checklist of duties and responsibilities for your attendants.
- Be used as an attendant evaluation tool.
- Help solve disagreements between you and your attendants about their duties.

### **Sample Job Description**

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#### **In-Home Caregiver Needed**

Nonsmoker, vaccinated, 16 years and older needed to work for adult female with disabilities, to help with housekeeping and personal care tasks. Full time and/or as needed work available. Pay range, \$17/hr to \$30/hr, based on experience. Earns sick time. If interested, call (719) 555-5555 or send email to: [myemail@writeme.com](mailto:myemail@writeme.com)

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**Note:** Your IHSS agency may have a standard job description for recruiting attendants. You may be able to use this as a basis for your own.

### **Screening Potential Attendants**

Screening potential attendants will help you find the right people to meet your needs. It will also save you time and make the recruiting process a little easier for you. Not all applicants will meet your needs. You can take these people off your list. You will want to call applicants on the telephone and ask them a few questions and get a feel for their personality. On the next page are some guidelines for screening potential attendants by phone.

## **Phone Screening Guidelines:**

- Act quickly:
  - Call people back as soon as possible. Remember, good people find jobs quickly.
  - Be pleasant
  - Be friendly and pleasant on the phone.
- Provide some basic information about the job:
  - Describe your basic needs.
  - Let the applicant know the number of hours they would need to work each week, their schedule, and that the IHSS agency will discuss their hourly rate based on their skillset.
- Be organized:
  - Take notes and document all phone contact with the applicants.
  - Keep track of names and numbers.
- Ask a few questions:
  - Why are you interested in this kind of work?
  - What experience or training do you have?
  - Do you smoke?
  - If lifting and transferring are essential functions of the job, describe the requirement and ask, "Will you be able to perform these duties?"
  - Occasionally, I might need you to work more hours than your normal schedule. Can you do that?

## **Other Questions You May Want to Consider Asking:**

- Are you at least 16 years of age?
- What hours are you available?
- What days can you work?
- Are there any reasons you would not be able to travel to my neighborhood?
- Do you have a valid driver's license (If driving is part of the work)?

- Do you have experience providing household services?
- Do you mind assisting in bathing, toileting, and dressing?

**Use Caution: Do not ask questions that could reveal a disability.**

It is better to describe the needs of the position and the work environment than to ask a candidate if they will be able to perform the job duties.

For example, allergies and asthma are usually considered a disability by the Americans with Disabilities Act. It is illegal, then, to ask a potential caregiver if they have allergies. Instead, let them know you have cats, pets, or a service animal and ask if this changes their interest in the job.

**Do not ask:** Is there anything keeping you from lifting 50lbs?

**Ask instead:** This job requires lifting 50 lbs. Will you be able to perform that task?

If, at the end of your telephone screening, you think you would like to interview this person, decide how you want to conduct your interview. Interviews can occur face to face, over the phone, over video conferencing calls like Zoom, and/or done via phone applications such as FaceTime. Make those arrangements while you still have the person on the phone. If you are not sure, you can politely end the conversation by saying "Thank you for your time. I will be making my final selections by (date) and will notify my top choices on that day to set up another interview. Thank you again. Good-bye."

## Warning Signs!

- Inappropriate questions during screening process, such as questions about your address, medications, medical history, or drug testing
  - Unexplained gaps in employment
  - Reluctance to provide professional references
- Inconsistencies in prior job responsibilities and employer information

## What If You Don't Want to Interview Someone?

You are not obligated to interview anyone. Take plenty of notes during the screening process and keep your recruiting records. Let each person know you are taking names and phone numbers and will call them back if you decide to interview them. You may find that you would like to interview someone later even though your first reaction was to not move forward with their application. Keeping a list of people, you liked but did not choose makes a good back-up list for possible attendants if something comes up. Remember, recruiting is an ongoing process.

**Note:** The Equal Pay for Equal Work Act requires employers to keep job descriptions, wage history, and application information for hired employees during their employment and up to two years after employment ends.

## Interviewing Techniques

Have potential applicants send resumes for your review before setting up interviews. People may seem great in a conversation, letter, or e-mail, but you need more specific information before meeting them in person. A resume gives a written record of the person's experience, interests, qualifications, and references. What you discover on their resume may give you a different perspective about the applicant.

Once you have finished your pre-screening process and have reviewed the resume, if you like the applicant, it is time to set up an interview. Take time to plan how you want the interview to go. Interviews can be done face-to-face or through technology that allows you to video conference on your phone, tablet, or computer. Remember, the interview is for you and the applicant to see if the situation will work for the both of you. First impressions are important. Do not select anyone without interviewing them first.

## Guidelines for Interviewing Face-To-Face

### Be safe

- Contact your agency and arrange to hold the interview at their location, if possible. They may actively participate with you or your AR in the interview

process. Otherwise, hold the interview in a location that is safe for you. Your local church, apartment building, coffee shop, or community library may have rooms available for you to conduct interviews if you do not want to use your home.

- You can invite a friend or family member to sit in. In addition to safety concerns, having a second person is a good idea because that person may notice things during the interview that you do not.
- Most importantly, hold the interview when you are well-rested and where you are least likely to be interrupted.

### **Set the tone of the interview**

- Prepare and practice ahead of time to increase your level of confidence during the interview. First impressions are important.
- Make sure you are the interviewer if you have a friend present.
- Think about the location of the interview if you choose to have the interview in your home. The living room is a better choice than the bedroom.
- Wear clothes that convey confidence. Do not wear sleepwear.
- Sit facing the applicant so that you can observe eye contact and body language.
- Eliminate distractions. Turn the TV and radio off. Make sure pets and children will not interrupt

### **What if you are nervous?**

- Recognize that it is natural to feel nervous when interviewing.
- Remember that the prospective attendant is probably nervous too.
- Breathe deeply to quickly relieve anxiety.
- Prepare for the interview to help lower your anxiety level.
- Have a friend or family member with you to help calm your nerves.

### **Be prepared before the interview**

Make sure you have:

- A job description
- A checklist of duties for the shift(s) you are hiring (if you are using one)
- Information about your disability
- Information about special equipment you use
- A list of the interview questions you will ask (read the list of suggested questions we have included in this guide)

### **Planning the interview questions**

- Decide ahead of time what questions you will ask and write them down.
- Frame your interview questions to give you the information you need. At the very least, you want someone who is trustworthy, reliable, and responsible. Ask questions that will give you that information.
- Use the same list of questions for each applicant to help you compare their responses more easily.

### **When the applicant arrives**

Take an inventory of your first impression. Ask yourself:

- Do they look neat, clean, and presentable?
- Do they seem comfortable around you?
- Do you feel comfortable around them?
- Make the applicant feel comfortable. You can ask, "Did you have any trouble finding the location?"
- Find out as much as you can about them.
- Explain your disability to the applicant, but only to the point where you are still comfortable. You do not have to tell the applicant everything about you.

### **During the interview**

- Describe the job requirements in detail.
- Ask work-related questions that need more than a "Yes" or "No" answer.
- Tell the person what you expect in an employee.

- Tell the person about the work schedule.
- Be direct and clear about duties that might make a person uncomfortable.
- Notice not only what the person says, but also how they say it.
- Let the person ask lots of questions and then reply with honest answers.
- Give the person general information about wages, benefits, and the workings of IHSS. You can contact your IHSS agency for this information.
- Take notes. These will be useful when you are reviewing the candidates you've interviewed.
- Always use caution and remain in control of the situation. You may want to consider having a friend or relative with you during the interview.
- Remember, the IHSS agency can always help you.

### **Useful interview questions you can use**

- What did you like most about your last job?
- What did you like least about your last job?
- Why did you leave your last job?
- Why are you interested in this job and what makes you a good candidate?
- Tell me about a past job where you had to make a tough decision. What were the circumstances? How did it turn out?
- Tell me about a past job where you made a big mistake. What was the situation and how did it turn out?

### **Avoiding Discriminatory Questions**

The Equal Employment Opportunity Act prohibits employers from committing job discrimination. It is illegal to discriminate against an applicant or current employee because of their race, color, religion, sex (including gender identity, sexual orientation, and/or pregnancy), national origin, age, disability and/or genetic information. Under the laws enforced by the U.S. Equal Employment Opportunity Commission, employers are prohibited from establishing employment policies and practices that have a negative and discriminatory effects on possible applicants or current employees. Be sure job descriptions,



interview questions and other hiring resources reflect a nondiscriminatory policy. As a rule, the information obtained and requested through preemployment process should be limited and only essential for determining if an individual is qualified to meet your care needs.

**It can be discriminatory to ask questions about:**

- Children, number of, names, ages, childcare arrangements, or marital status.
- Disabilities or physical conditions which do not relate to an applicant's fitness to perform the job.
- Relationship status, including questions about being single, married, divorced, separated, widowed.
- Pregnancy, birth control, children, or future childbearing plans.
- Ancestry, national origin, race, or color, including indirect questions which would reveal this information.
- Religious affiliation, denomination, customs, holidays observed, or name of minister, including any questions that would show this information if answered.
- Age, except to ask if the person is of legal age to work (16).

## Checking References

Checking attendant references is another way to gather important information about the applicants' skills and work history. Examples of information you might get from checking references include the person's work-related skills and abilities, work habits, and re-employment eligibility. It is against the law for other employers to prevent an employee from receiving employment.

Be sure to ask specific, work-related questions when checking references. In IHSS, the best approach is to ask your IHSS agency to participate in reference checks with you. As the employer, your IHSS agency may have questions that will help find good candidates and weed out candidates that are not a good fit for you.

Who are good references? They are usually people who know your applicant as an employee. They know the person's work performance and habits. If your applicant has no prior caregiving experience, then other sources of reference may be previous employers, teachers, and co-workers.

Try to avoid family members or friends as references. They will not know about the applicant's work habits, and they are likely to tell you only the good things. When talking to a reference, explain the work the person will be doing. Remember to trust your instincts. Refer to the notes you made during the interviews so you will not forget the impression each person made on you.

**Here are some questions you should ask references:**

- How long have you known the applicant?
- What are their strengths and limitations?
- How do they handle stress?
- Do you think they are honest?
- Do you think they are reliable?
- How well do they get along with others?

**If the reference is a former employer, ask the following questions:**

- Were they dependable?
- Were they able to work independently?
- How often were they absent without notice?
- What was it like to supervise them?
- Can they handle doing a wide range of tasks?
- Why did they leave the job?
- Would you rehire them? If not, why?

You may not get many answers from references. Colorado Statue 8-2-114 prevents employers from maintaining or notifying any employer that a current or former employee has been blacklisted. Some people do not want to say anything bad about another person or are unable to respond based on company policy.

When a reference provides limited information, it's essential to approach the situation with professionalism and appreciation. There may be various reasons for this, such as company policies, legal constraints, or personal discretion, and it is not necessarily indicative of the candidate's qualifications. Reference checks are a tool to gather additional insights to inform your hiring decisions. If you are uncomfortable conducting reference checks independently, consider collaborating with your IHSS agency to assist with this aspect of the recruitment process.

## Selecting your Attendant

Now that you have narrowed down the larger group of possible attendants, you get to select the best possible people to work with you. Lay your papers out in front of you so you can find all your questions and answers. In making your choice, think about:

- What important skills and experience does each person have?
- What is your feeling or intuition about each person, based on the interview and reference checks?
- What useful information did you get from each person's references?
- Can you see yourself working with this person in your home?

Some qualities are hard to assess in people. Think about how comfortable you would feel giving directions or corrections to each candidate. This is important if you are going to hire a friend or relative. How will you feel spending a lot of time with the person? The lifestyle of an employee may bother you, but will it have anything to do with the quality of their work? Remember that safety, reliability, and quality work are the most important features for an employee to have.

## Making the Offer

Once you have completed the recruiting and interviewing process and have determined the appropriate candidate for the job, work with your IHSS agency to get them hired. Your IHSS agency will guide you through their hiring requirements and help get them onboarded. Your IHSS agency will do most of the work from this point and collaborate with you if any issues come up.

## **Hiring**

Your attendant is not ok to start working until your IHSS agency has given notice that the attendant is cleared to work. One of the most common delays in an attendant starting to work is incomplete paperwork. Agencies cannot backpay an attendant for services performed before their first day of work with the agency.

### **Required Employment Paperwork**

Each IHSS agency has required employment paperwork that must be completed. The following forms are required for every attendant:

- Colorado Bureau of Investigation Criminal Background Check
- Board of Nursing Check
- Office of Inspector General (OIG) Check
- I-9 Form
- W-4 Form

The IHSS agency may have other required forms and will give you instructions on how to complete them. Work with your attendant(s) to complete all paperwork and send all required documents. The sooner the paperwork gets submitted, the sooner the attendant(s) can begin training.

## **Background Checks**

### **Colorado Bureau of Investigation Background Check**

The IHSS program requires that all attendants pass a two-part check on their background and qualifications before beginning work as your attendant. The IHSS agency is responsible for performing this check as part of their role and will communicate any issues to you. If an attendant has a non-Criminal Barrier Crime, the agency will discuss your options as to whether the attendant can be hired. The Colorado Chance to Compete Act provides individuals with criminal records a chance to compete for a job within the workplace, while protecting the employer's ability to make whatever hiring decision the Employer deems

appropriate if the Employer is following all laws set forth by the Department of Labor.

### **Board of Nursing Check**

The Board of Nursing check is also run automatically. This does not affect most attendants. This check tells us if the attendant has had any adverse action as a health professional determined by the Colorado Board of Nursing. If the check reveals that their license or certification has been suspended or revoked, denied, or if they represent themselves as a licensed medical professional when employed, by state law, they will not be able to work under IHSS.

Per IHSS Rules and Regulations, a Nursing or CNA license is not required to provide IHSS services. However, if an individual has a suspended license, they are not eligible to provide services in IHSS.

### **Office of the Inspector General Check**

IHSS Agencies must run an Office of Inspector General (OIG) check on all potential attendants. This is required by law and an update is run every month. All attendants, even those already hired, are compared to the list.

OIG's List of Excluded Individuals/Entities (LEIE) provides information to the healthcare industry, patients, and the public regarding individuals and entities currently excluded from participation in Medicare, Medicaid, and all other federal healthcare programs. Individuals and entities who have been reinstated are removed from the LEIE. The OIG imposes exclusions under the authority of sections 1128 and 1156 of the Social Security Act. A list of all exclusions and their statutory authority is on the Exclusion Authorities page.

Reinstatement of excluded entities and individuals is not automatic once the period of exclusion ends. Those wishing to again participate in the Medicare, Medicaid and all federal healthcare programs must apply for reinstatement and receive authorized notice from OIG that reinstatement has been granted. Please use the contact information listed below as neither Consumer Direct Care Network, your IHSS agency, nor the Department has control over this data and is simply enforcing the law.

HS, OIG, OI Exclusions Staff  
7175 Security Boulevard, Suite 210  
Baltimore, MD 21244  
Phone: (410) 281-3060

## Appendix A Summary

If you decide to be involved in the recruiting and hiring process, there are many steps to navigate. This appendix is a resource guide for each step of finding a new or backup attendant.

Recruiting Guide highlights:

- **Be detailed.** A well-developed job description based on your care needs will help you develop your job listing, ad, or job description.
- **Be creative.** There are many ways you can post a job listing.
- **Be safe.** When interviewing:
  - Do not share your address with a potential attendant.
  - Meet in a public location and bring a friend.
  - Check the prospective attendant's references.
- **Be equitable.** Do not ask interview questions that are discriminatory in nature.
- **Be available.** Together with the IHSS agency, you will support your attendants in completing the necessary employment paperwork required by the IHSS agency to begin work.
- **Be informed.** All attendants must complete and pass the Colorado Bureau of Investigation Criminal Background Check, a Board of Nursing Check and an Office of Inspector General (OIG) Check performed by the IHSS agency.
- **Be ready.** Attendants cannot start working until the IHSS agency has given notice that they are cleared to work.

## **Appendix B: Resources**

This Appendix includes resources that you may find helpful on your IHSS journey.

### **Information and Assistance Services**

#### **What is Information and Assistance (I&A)?**

The [Centers for Medicare & Medicaid Services \(CMS\)](#) requires states to provide “a system of supports that are responsive to an individual’s needs and desires for assistance” with various aspects of self-directed services. In Colorado, this system of support is called Information and Assistance.

I&A services are designed to help participants navigate Medicaid programs, manage their services, and learn how to perform the responsibilities of a manager. Our I&A staff can help you navigate resources, develop skills to be an effective employer, and learn more about various Consumer Direction topics.

What can I&A services do for you?

- Expand your understanding of self-directed services.
- Ease scheduling struggles.
- Help you decide if the people you hire are doing a good job.
- Provide guidance on how to train the people who work for you.
- Help you stay within your budget.
- Equip you with tools to retain quality attendants.
- Help you with other things to manage your self-directed services.

CDCO provides I&A coordinators to partner with you for your Consumer-Directed needs. If you have questions or concerns about what the role of your I&A coordinator is and if they can help with an additional need, please reach out to your I&A coordinator or your case manager.

Case Management Agencies (CMAs) assist individuals and families with accessing necessary services and supports to meet their needs. Including intake, eligibility

determination, service plan development, arrangement for services, delivery of services, coordination, monitoring, and termination/discharge from services.

Your case manager and IHSS agency will be great resources for finding community resources and advocacy support needed to be successful with your Self-Directed services.

## **Case Management Agencies (CMAs) Locations and Covered Counties**

### **A&I Avenues**

Counties served as CMA: Boulder, Broomfield, Gilpin

1665 Coal Creek Drive

Lafayette, CO 80026

Phone: 303-439-7011

Fax: 866-931-0763

### **Community Connections**

Counties served as CMA: Archuleta, Dolores, La Plata, Montezuma, San Juan

281 Sawyer Drive #200

Durango, CO 81303

Phone: 970-259-2464

### **Developmental Pathways**

Counties served as CMA: Arapahoe, Douglas, Elbert

14280 E. Jewell Avenue, Suite A

Aurora, CO 80012

Phone: 303-360-6600

### **Foothills Gateway**

Counties served as CMA: Larimer

301 Skyway Drive



Fort Collins, CO 80525

Phone: 970-226-2345

### **Garfield County Human Services**

Counties served as CMA: Garfield, Eagle, Pitkin, Summit

195 W 14<sup>th</sup> Street

Rifle, CO 81650

Phone: 970-945-9191 Ext. 3100

Email: [GarfieldCMA@garfield-county.com](mailto:GarfieldCMA@garfield-county.com)

Fax: 970-963-1974

### **Jefferson County Dept. of Human Services**

Counties served as CMA: Clear Creek, Jefferson

900 Jefferson County Parkway Suite 170

Golden, CO 80401

Phone: 303-271-4216

Email: [jeffcocma@jeffco.us](mailto:jeffcocma@jeffco.us)

### **Las Animas County Dept. of Human Services**

Counties served as CMA: Huerfano, Las Animas

219 S. Chestnut St.

Trinidad, CO 81082

Phone: 719-422-7077

Fax: 719-845-0801

### **Montrose County Human Services**

Counties served as CMA: Montrose, Ouray, San Miguel

1845 S. Townsend Avenue

Montrose, CO 81401

Phone: 970-252-5000

Fax: 970-252-5024

### **Northeastern Colorado Association of Local Governments**

Counties served as CMA: Cheyenne, Kit Carson, Lincoln, Logan, Morgan, Phillips, Sedgwick, Washington, Yuma

231 Main Street Suite 211

Fort Morgan, CO 80701

Phone: 970-867-9409 or 1-888-696-7212 (Toll-Free)

Fax: 970-867-1850

### **Otero County Dept. of Human Services**

Counties served as CMA: Bent, Crowley, Otero

13 W. 3rd Street, Room 110

La Junta, CO 81050

Phone: 719-383-3166

Fax: 719-383-4607

### **Prowers County Public Health and Environment**

Counties served as CMA: Baca, Kiowa, Prowers

1001 S. Main Street

Lamar, CO 81052

Phone: 719-336-1015

Fax: 719-336-8748

### **Rocky Mountain Health Plans**

Counties served as CMA: Alamosa, Chaffee, Conejos, Costilla, Custer, Delta, Fremont, Gunnison, Hinsdale, Grand, Jackson, Lake, Mesa, Mineral, Moffat, Rio Blanco, Rio Grande, Routt, Saguache

2775 Crossroads Blvd.

Grand Junction, CO 81506

Phone: 800-346-4643 or 970-243-7050

Email: [CMA\\_RMHP@uhc.com](mailto:CMA_RMHP@uhc.com)

### **Rocky Mountain Human Services**

Counties served as CMA: Adams, Denver

9900 E Iliff Avenue

Denver, CO 80231

Phone: 303-636-5600

### **The Resource Exchange**

Counties served as CMA: El Paso, Park, Pueblo, Teller

6385 Corporate Drive, Suite 301

Colorado Springs, CO 80919

Phone: 719-380-1100

### **Weld County Case Management Agency**

Counties served as CMA: Weld

315 N. 11th Avenue

Building C

Greeley, CO 80631

Phone: 970-400-6950

Fax: 970-346-6951

### **State Resources**

Toll-free Resources in Colorado:

The Nurse Advice Line provides Health First Colorado (Colorado's Medicaid program) members free medical information and advice, in both English and Spanish, 24 hours a day, every day of the year: (800) 283-3221

- Colorado Dial 211 to receive access to Health and Human Services information and referrals

A list of IHSS Resources can be found on [CDCO's website](#).

## Get More Involved in In-Home Support Services (IHSS)

Participant-Directed Programs Policy Collaborative (PDPPC) is a joint monthly meeting for stakeholders and the Colorado Department of Health Care Policy and Financing (HCPF).

PDPPC is a place where stakeholders, like yourselves, can work with the Department to receive up-to-date information, and/or discuss issues relating to the program.

PDPPC meets on the 4th Wednesday of every month from 1 p.m. to 2:30 p.m. The final month of each quarter, the meeting will be from 1 p.m. to 4 p.m. Meetings are held via Zoom and members can come and go from the meetings as needed.

To receive more information:

- Please reach out to the HCPF Participant-Directed Programs Unit at:
- HCPF\_PDP@state.co.us or (303) 866-5638.

## State Organizations and Resources

Organization	Website
Colorado Cross Disability Coalition	<a href="http://www.ccdconline.org/">http://www.ccdconline.org/</a>
Ability Connection Colorado	<a href="http://abilityconnectioncolorado.org/">http://abilityconnectioncolorado.org/</a>
Advocacy Denver	<a href="http://www.advocacydenver.org/">http://www.advocacydenver.org/</a>
American Council of the Blind	<a href="http://www.acb.org/">http://www.acb.org/</a>
American Foundation for the Blind	<a href="http://www.afb.org">http://www.afb.org</a>
Colorado Center for the Blind	<a href="http://cocenter.org">http://cocenter.org</a>
Colorado Commission for the Deaf, Hard of Hearing and Deafblind	<a href="http://www.ccdhhdb.com/">http://www.ccdhhdb.com/</a>

Organization	Website
Colorado Developmental Disabilities Council	<a href="http://www.coddc.org/">http://www.coddc.org/</a>
Colorado Family for Hands & Voices	<a href="https://co-hv.org/">https://co-hv.org/</a>
Colorado Statewide Independent Living Council	<a href="http://coloradosilc.org/">http://coloradosilc.org/</a>
Easter Seals Colorado	<a href="http://www.easterseals.com">http://www.easterseals.com</a>
Family Voices Colorado	<a href="http://familyvoicesco.org/">http://familyvoicesco.org/</a>
Hearing Loss Association of America, Colorado Chapter	<a href="http://www.hearinglosscolorado.org/">http://www.hearinglosscolorado.org/</a>
JFK Partners	<a href="http://www.jfkpartners.org">http://www.jfkpartners.org</a>
National Federation of the Blind	<a href="https://nfb.org/">https://nfb.org/</a>
Parkinson Association of Rockies	<a href="http://www.parkinsonrockies.org/">http://www.parkinsonrockies.org/</a>
Rocky Mountain Down Syndrome Association	<a href="http://www.rmdsa.org/">http://www.rmdsa.org/</a>
Rocky Mountain Stroke Center	<a href="http://www.strokecolorado.org/">http://www.strokecolorado.org/</a>
The Arc of Colorado	<a href="http://www.thearcofco.org/">http://www.thearcofco.org/</a>
The Colorado Association of the Deaf	<a href="http://www.cadeaf.org/">http://www.cadeaf.org/</a>
United Cerebral Palsy	<a href="http://ucp.org/">http://ucp.org/</a>

## Colorado Centers for Independent Living (CIL)

Colorado's nine non-profit Centers for Independent Living (CILs) work to support self-direction services, living and independence based on the idea that all people

with disabilities can live with dignity, make their own choices, and participate fully in society.

To learn more about Centers for Independent Living visit the [Independent Living Services | Division of Vocational Rehabilitation \(colorado.gov\)](#).

## **Overview of Locations**

Below is contact information for Colorado's Centers for Independent Living listed by the counties they serve.

### **Atlantis Community (Denver)**

Counties Served: Adams, Arapahoe, Clear Creek, Denver, Douglas, Elbert, Jefferson

[Website: Atlantis Community](#)

Phone: (303) 733-9324

### **Center for Independence (Grand Junction)**

Counties Served: Chaffee, Delta, Eagle, Garfield, Gunnison, Hindsdale, Lake, Mesa, Montrose, Ouray, Pitkin, San Miguel

[Website: Center for Independence](#)

Phone: (970) 241-0315

### **Center for People with Disabilities (Boulder)**

Counties Served: Adams, Boulder, Broomfield, Gilpin, Jefferson, Weld

[Website: Center for People with Disabilities](#)

Phone: (303) 442-8662

### **Center Toward Self-Reliance (Pueblo)**

Counties Served: Alamosa, Baca, Bent, Conejos, Costilla, Crowley, Custer, Fremont, Huerfano, Kiowa, Las Animas, Mineral, Otero, Prowers, Pueblo, Rio Grande, Saguache

[Website: Center Toward Self-Reliance](#)

Phone: (719) 546-1271

### **Colorado Springs Independence Center (Colorado Springs)**

Counties Served: Cheyenne, El Paso, Kit Carson, Lincoln, Park, and Teller

[Website: Colorado Springs Independence Center](#)

Phone: (719) 471-8181

### **Connections for Independent Living (Greeley)**

Counties Served: Logan, Morgan, Phillips, Sedgwick, Washington, Weld (shared), and Yuma

[Website: Connections for Independent Living](#)

Phone: (970) 352-8682

### **Disabled Resource Services (Fort Collins)**

Counties Served: Jackson and Larimer

[Website: Disabled Resource Services](#)

Phone: (970) 482-2700

### **NorthWest Colorado Center for Independence (Steamboat Springs)**

Counties Served: Grand, Moffat, Rio Blanco, Routt, and Summit

[Website: Northwest Colorado Center for Independence](#)

Phone: (970) 871-4838

### **Southwest Center for Independence (Durango)**

Counties Served: Archuleta, Dolores, La Plata, Montezuma, and San Juan

[Website: Southwest Center for Independence](#)

Phone: (970) 259-1672

## National Organizations and Resources

Organization	Website
Administration for Community Living	<a href="https://acl.gov/">https://acl.gov/</a>
Americans with Disabilities Act	<a href="https://www.ada.gov/">https://www.ada.gov/</a>
Americans with Disabilities Act, U.S. Department of Labor	<a href="https://www.dol.gov/agencies/odep/ada">https://www.dol.gov/agencies/odep/ada</a>
American Association of People with Disabilities	<a href="https://www.aapd.com/">https://www.aapd.com/</a>
List of Disability Organizations - U.S.A.	<a href="https://www.disabled-world.com/disability/foundations/us-organizations.php">https://www.disabled-world.com/disability/foundations/us-organizations.php</a>
National Council on Independent Living	<a href="https://www.ncil.org">https://www.ncil.org</a>
National Network	<a href="#">Information, Guidance and Training on the Americans with Disabilities Act</a>
National Organization on Disability	<a href="https://www.nod.org/">https://www.nod.org/</a>