

OPTIONS COUNSELING
VIRGINIA STATEWIDE STANDARDS

Title: Options Counseling Statewide Standards

1.0 Introduction

1.1 Guiding Principles

- A. Options Counseling involves respecting the right of individuals to control and make choices about their own lives.
- B. Relationship-building and establishing trust are essential to understanding individuals' preferences and needs; counselors must take time to listen and use culturally competent, person-centered approaches.
- C. Options Counseling is a process, not an event. It may include multiple contacts over a short-term period, or may be ongoing over a longer period of time.

1.2 Definitions

Individual Action Plan: A documented plan developed by the individual with the support of the Options Counselor as a result of Options Counseling that contains the individual's goals, along with the action steps, resources needed, time lines and responsible parties to achieve the goals.

Individual Support Record: Documentation, by an agency offering Options Counseling, that captures the information required in Section 5.1 (B) through (D) of these Standards. The record may be written or electronic and may incorporate processes and documentation tools already in place or may be a form used exclusively for Options Counseling.

Options: All alternatives that are available in an individual's community from which the individual can choose to reach the individual's goal/s.

Options Counseling: An interactive decision-support process whereby individuals, with support from family members, caregivers, and /or significant others, are supported in their deliberations to make informed long-term support choices in the context of the individual's preferences, strengths, needs, values, and individual circumstances.

Options Counselor: Any individual who provides Options Counseling as described in these Standards. Care coordinators, transition coordinators, peer counselors, case managers and others, who have been trained in the standards, may provide Options Counseling.

Person-Centered Practices: Practices that focus on the preferences and needs of the individual, empower and support the individual in defining the direction for his or her life, and promote self-

determination, community involvement, contributing to society and emotional, physical and spiritual health.

Surrogate Decision-Maker: A person legally authorized to make decisions on behalf of an individual who has been declared legally incapacitated.

Unit of Service: The number of contacts (interactions), and the time spent in hours or portions thereof, with and on behalf of each individual. The hours shall be recorded in 15-minute increments

1.3 Eligible Individuals

A. Options Counseling is available to all individuals age 18 and over with a disability and to adults age 60 and over who request long-term supports and/or who are planning for the future regarding long-term supports.

B. Individuals are eligible for Options Counseling regardless of their ability to pay.

2.0 Awareness, Education, Outreach and Marketing

A. Agencies providing Options Counseling shall use statewide universal language to raise awareness, provide education, and/or actively market the availability of Options Counseling to the following, within the agencies' local or regional services areas:

1. Adults 60 and older; and adults 18 and older who have a disability;
2. Individuals residing in hospitals and other institutional settings;
3. Family members, caregivers and supporters;
4. The general public;
5. The medical community, including hospitals;
6. Administrators and staff of long-term support facilities;
7. Long-term support ombudsmen;
8. Providers of long-term community supports and other local agencies having regular contact with older adults and/or individuals with disabilities;
9. Social workers;
10. Health and human services agencies;
11. Local government officials and policy makers; and
12. Advocates and advocacy organizations.

B. Awareness and education activities shall include both outreach and response to inquiries for information.

- C. Awareness, education and marketing activities shall be directed both to individuals who pay privately, and to individuals who cannot pay.
- D. An agency providing Options Counseling shall identify key partners to assure streamlined eligibility and access to federal, state and local supports and work collaboratively with them to develop an overall Options Counseling implementation strategy.

3.0 Supports Delivery Elements

3.1 Initiating the Options Counseling Process

- A. The situational elements that can trigger Options Counseling include, but are not limited to:
 - 1. A life altering personal event or situation;
 - 2. A significant change in the individual's circumstances;
 - 3. Concerns expressed by the individual or the individual's family member or surrogate decision-maker;
 - 4. A life transition;
 - 5. A referral or self-referral to Options Counseling; and/or
 - 6. Availability of new benefits and supports.
- B. During an eligible individual's initial contact with the agency, the situational elements that trigger Options Counseling can be identified by use of a standardized questionnaire and response to the following questions:
 - 1. Do you understand the information I have given you? (if "no," refer to Options Counseling; if "yes," ask next question);
 - 2. Do you need additional information? (if "yes," refer to Options Counseling; if "no," ask next question);
 - 3. Do you know what your next steps are? (if "no," refer to Options Counseling; if "yes," do not refer to Options Counseling).
- C. Options Counseling is initiated by:
 - 1. The request of an eligible individual or the individual's surrogate decision-maker; or
 - 2. The consent of an eligible individual who is offered Options Counseling or the consent of the individual's surrogate decision-maker.
- D. Agencies shall assure that no eligible individual is excluded from Options Counseling.
 - 1. Agencies may set fee schedules that are designed to assure maximum participation of eligible individuals in Options Counseling.
 - 2. Agencies shall assure that Options Counseling is coordinated with any applicable points of entry into support systems.

3. Agencies shall assure that individuals receive and have access to the agency's existing bill of rights and grievance procedures.

3.2 Providing Options Counseling

- A. Options Counselors shall actively encourage the eligible individual to involve others, who provide support to the individual, in the Options Counseling process.
- B. Options Counselors shall involve the eligible individual and all others the individual wishes to involve in Options Counseling except as follows:
 1. When the individual declines to have other individuals present at any point in the counseling, the Options Counselor shall respect the individual's wishes.
 2. If the individual has been declared legally incapacitated, the Options Counselor shall require that the individual's surrogate decision-maker be present through all phases of Options Counseling.
- C. Options Counselors must make every effort to understand each individual's preferences, needs, values and circumstances by:
 1. Developing rapport and trust with the individual;
 2. Listening to the individual;
 3. Understanding that no two individuals have exactly the same preferences, needs, values or circumstances;
 4. Using person-centered practices; and
 5. Using a series of questions and scenarios that assist the individuals in evaluating options.
- D. The following information must be provided during Options Counseling, dependent upon the individual's unique needs, values and circumstances:
 1. Existing long-term support options available in the individual's community tailored to the individual and including information about the individual's current situation;
 2. Planning ahead for long-term support;
 3. Understanding self-directed and agency-directed supports, and the differences between the two;
 4. Medicare and Medicaid benefits and options; and
 5. Other supports and benefits available in the individual's community including:
 - a. Informal supports;
 - b. Social security benefits;
 - c. Financial and legal planning resources;
 - d. Older adult or disability rights resources;

- e. Housing and transportation resources;
 - f. Opportunities for employment or volunteering;
 - g. Social and recreational resources;
 - h. Communication and assistive technology resources; and
 - i. Caregiver support.
- E. The following support, as applicable, shall be provided to the individual while the individual is considering and making decisions:
- 1. Honoring requests for additional information;
 - 2. Providing Options Counseling in the environment that the individual chooses;
 - 3. Using the method or mode of communication that the individual uses and prefers;
 - 4. Explaining potential risks, consequences and costs of each available option;
 - 5. Exploring alternatives and arranging on-site or virtual tours;
 - 6. Coordinating transportation or giving the individual the information to coordinate transportation;
 - 7. Helping the individual articulate his or her own values, needs and preferences;
 - 8. Listing options, as requested, and their consistency with the individual's stated goals;
 - 9. Clarifying roles of the individual and the Options Counselor; and
 - 10. Providing information and facilitating decision-making at a pace appropriate to the individual.
- F. Decisions made as a result of Options Counseling shall be made by the individual or the individual's surrogate decision-maker. The Options Counselor shall respect the individual's right to make decisions that entail a certain amount of risk and shall take action to prevent an individual from engaging in risky behavior consistent with legal requirements.
- G. The Options Counselor shall work with the individual to develop an individual action plan for implementing the decisions made as a result of Options Counseling.

3.3. Implementing and Following up Decisions Made as a Result of Options Counseling

- A. The Options Counselor shall arrange for delivery of the supports chosen by an individual as a result of Options Counseling, involving others as needed to get the supports fully in place by:
- 1. Assisting with referrals; and
 - 2. Conducting follow up to assure referrals are in place and adequate for the individual's support.

- B. The Options Counselor shall assist the individual to make an effective transition to the supports that the individual has chosen by:
1. Contacting the individual and conducting other follow-up as necessary to verify referrals made;
 2. Determining whether the referrals were implemented effectively; and
 3. If adjustments are needed, supporting the individual in determining the best alternative course of action.
- C. Once the supports are in place:
1. The Options Counselor shall follow up to determine the extent to which the individual's goals have been met.
 2. Agencies shall also follow up using a uniform instrument, administered in the method or mode of communication that the individual uses and prefers, to measure individuals' satisfaction with the Options Counseling process and the choices the individual has made.
- D. Evaluation for the purpose of quality improvement/quality assurance and program compliance shall be conducted on three levels:
1. System-wide;
 2. Agency, in accordance with Section 4.5 A. below; and
 3. Individual, using the following domains:
 - a. Choice (Whether the individual was in charge of plan that is developed);
 - b. Heard (Individual's perspectives, values and preferences were understood and respected);
 - c. Supports (Whether the individual received supports needed towards accomplishing their goals);
 - d. Informed (Whether the individual was given comprehensive information about options available at the time); and
 - e. Autonomy (Whether the individual was empowered to make his or her own decisions)
- E. Options Counseling may be terminated when an individual:
1. Is no longer seeking support;
 2. No longer has unmet goals;
 3. After six months has not responded when contacted;
 4. Has exhausted an appeals process and there is a finding that termination is necessary; or
 5. Is dissatisfied and the Options Counselor has no further alternatives available to the individual.

- F. An individual shall be re-engaged in Options Counseling at any point he or she indicates a desire to pursue additional support options.

4.0 Staffing

4.1 Core competencies

- A. Staff who determine the need for Options Counseling must :
 1. Have training in the statewide protocol set out in section 3.1 B. of these Standards; and
 2. Demonstrate accurate use of the protocol.
- B. Agency staff who deliver Options Counseling must have training in the statewide Options Counseling curriculum and be able to:
 1. Understand individuals' unique preferences, values, needs and circumstances;
 2. Understand and educate individuals about public and private sector resources;
 3. Facilitate knowledge of informal supports and self-direction;
 4. Encourage future orientation and goal-setting;
 5. Follow up after Options Counseling is complete; and
 6. Communicate with sufficient skill and clarity, using the individual's preferred mode of communication, so that individuals will be able to make informed choices.

4.2 Staff Roles

- A. The following agency staff shall be able to determine an individual's need for Options Counseling:
 1. Staff who typically have initial contact with individuals, family members, caregivers and/or health and human service providers who contact the agency;
 2. Staff who typically provide transition assistance to individuals; and
 3. Staff who provide benefits counseling, assist in determination of eligibility or otherwise facilitate the delivery of supports.
- B. An agency providing Options Counseling shall have a minimum of one staff who delivers, and is held out to the public as delivering, Options Counseling.

4.3 Credentials

- A. Staff who determine the need for Options Counseling shall have the following minimum qualifications:
 1. Good listening, interviewing and communication skills;

2. Knowledge of the issues confronting older adults and individuals with disabilities; and
3. Successful completion of the statewide training module in determining the need for Options Counseling.

B. Staff who deliver Options Counseling shall have the following minimum qualifications:

1. Bachelor's degree, or equivalent experience as determined in writing by the hiring agency;
2. At least one year of experience working directly with older adults and/or individuals with disabilities;
3. Knowledge about long term supports and funding systems;
4. Knowledge about the issues confronting older adults and individuals with disabilities;
5. Good listening, interviewing and communication skills; and
6. Successful completion of the statewide Options Counseling training curriculum.

4.4 Continuing Training

Agencies providing Options Counseling shall require successful completion of an annual statewide Options Counseling best practices training to ensure that staff who deliver Options Counseling have appropriate decision-support skills and knowledge about available resources.

4.5 Monitoring and Supervision

A. Agencies providing Options Counseling shall implement ongoing monitoring to ensure that:

1. Options Counseling is delivered in accordance with these standards; and
2. The outcomes of Options Counseling can be tracked and measured for evaluation.

B. Agencies providing Options Counseling shall implement ongoing supervision for all staff involved in determining the need for and delivering Options Counseling.

C. Options Counseling supervisors must have training in the Options Counseling administration curriculum and must possess the experience or educational training to oversee staff development, program management, program planning, policy/procedural maintenance, and program evaluation.

4.6 Staffing ratios

Agencies providing Options Counseling shall assure that staff who determine the need for and who deliver Options Counseling have sufficient time to devote to their Options Counseling duties.

5.0 Administrative

5.1 Individual support records

- A. Individual support records shall be maintained for each individual receiving Options Counseling.
- B. Staff who determine the need for Options Counseling shall document the following information in the individual support record:
 - 1. Person making the original contact and relationship to the individual who receives Options Counseling (self, family member, surrogate decision-maker, caregiver, health or human service provider, other);
 - 2. Situation that triggered Options Counseling;
 - 3. The individual's demographic profile;
 - 4. The individual's preferred contact information;
 - 5. The individual's or surrogate decision maker's permission to share information with an Options Counselor; and
 - 6. The date of referral to Options Counseling.
- C. Staff who deliver Options Counseling:
 - 1. Shall document the following information in the individual support record:
 - a. The date the initial contact was made by the Options Counselor;
 - b. Whether the individual is new to Options Counseling or is reengaging in Options Counseling and if reengaging, the reason why;
 - c. Others involved in Options Counseling, their relationship to the individual and contact information;
 - d. The individual's preferred method or mode of communication and preferred environment for Options Counseling;
 - e. The individual's relevant current circumstances, which may include:
 - i. Paid and informal supports;
 - ii. Employment/ financial resources and benefits;
 - iii. Financial/legal plan for future;
 - iv. Housing;
 - v. Transportation;
 - vi. Social and recreational activities; and
 - vii. Assistive technology;

- f. The options discussed with the individual including alternative supports and, if the individual requests it, the risks and benefits of each;
 - g. The individual's action plan reflecting the individual's preferences, needs, values, personal goals/desired outcomes, and definition of success; decision/s made by the individual or the surrogate decision-maker; referrals made by name, date and type of support; and confirmation of implementation of the plan, including enrollment or other evidence of actual receipt of any support to which the individual was referred; and
 - h. Progress notes referencing each interaction, including the date of contact.
2. Are encouraged to document the individual's future projected immediate, intermediate and long term support needs.
- D. Staff who provide follow-up shall document the following information in the individual support record:
1. The date contact is made with the individual;
 2. The outcome of the follow up;
 3. Whether the individual's goals have been achieved, are unmet or have changed; including what supports the individual received, ;
 4. Whether the individual has followed the plan, and, if not, the reason why; or whether the individual needs direct assistance to continue implementing the plan; and
 5. The date and reason for termination of Options Counseling.

5.2 Data collection and reporting

- A. The agency shall collect the following data on an individual basis and report it on an aggregate level:
1. Demographics of individuals served;
 2. Level of individual satisfaction with the Options Counseling process (Choice, Heard, Supports, Informed, and Autonomy) and other evaluation measures such as individual satisfaction with choices and decisions made;
 3. Number of individuals, whose goals include living in the community, and who are living in the community six months and 12 months following termination of Options Counseling;
 4. Number of individuals:
 - a. Provided Options Counseling;
 - b. Terminated from Options Counseling; and
 - c. Reengaged in Options Counseling; and
 5. Number of individuals achieving their goals.