Goal Engagement Program

* = required field

I. Service Capacity

A.	Describe the staffing network you have developed to provide all three components of the Goal Engagement Program (Occupational Therapist (OT), Registered Nurse (RN) and home repair specialist).*					
В.	3. Provide the number of regular full- and part-time multidisciplinary team employees. * 1) OT: 2) RN: 3) Home repair specialist:					
C.	C. Describe your agency's in-house capacity to provide translation for consumers when needed. *					
Langu	ıage	# Administrative Staff	# Multidisciplinary Teams			
-	have no in-house translation I English-speaking ability.*	n capacity, describe your proced	dure for serving consumers who have			
II . Ge r A.		ures otifying the ASAP about circums services (such as no answer at t				

В.	Goal Engagement Program services include up to ten in-home visits by the OT or RN. Describe how you ensure that the services include at least one RN visit. *		
C.	Describe how you ensure that purchases related to home safety, minor home repairs, and relatives and services do not exceed \$1,800.00 per Consumer, per year.*		
Consur	nsumer Goals mers receive a structured set of home visits conducted by a multidisciplinary team consisting of an ational Therapist (OT), Registered Nurse (RN) and home repair specialist.		
	Describe the role of the OT in working with the consumer to identify areas of concern using a standardized assessment tool and engaging the consumer to develop meaningful goals and an action plan. *		
2.	Describe the role of the OT in recommending strategies that can be implemented by the home repair specialist.*		
3.	Describe the focus of the RN visits.*		

	goals to customize the service according to the action plan.*			
5.	Describe coordination among the team members to ensure services are targeted to meet the goals identified by the consumer.*			
IV. Sta	aff Qualifications			
	Describe how you ensure that members of the multidisciplinary team meet the following qualifications:			
•	Occupational Therapy elements of the service must be performed by an Occupational Therapist with a valid Massachusetts license or by either a certified Occupational Therapy assistant or an Occupational Therapy student under the direct supervision of a licensed Occupational Therapist.*			
•	Skilled nursing elements of the service must be performed by a Registered Nurse with a valid Massachusetts license. *			
•	If the scope of work involves minor home repairs, agencies and individuals employed by the agencies must possess any licenses/certifications required by the state (e.g., Home Improvement Contractor, Construction Supervisor License, Plumber's license, etc.).*			

4. Describe how each member of the multidisciplinary team focuses on the consumer's identified

В.	Staff providing OT and nursing must be CAPABLE certified through Johns Hopkins University. Describe how you ensure that this qualification is met.*			
	h a CAPABLE training Certificate for each orces.* Name of attachment:	f your OT and RN staff providing Goal Engagement		
V. Tr	aining and In-Service Education			
А	. Describe orientation for multidisciplinar	y team employees.*		
В	Describe in-service education for each o specialist) comprising the team. *	f the three disciplines (OT, RN and home repair		
VI. Sı	upervision			
A	· · · · · · · · · · · · · · · · · · ·	, including frequency, documentation, and for each of the three disciplines (OT, RN and home		
VII. F	Proposed Rate for Goal Engagement Se	rvice		
Provi	der employee who completed this form*			
Name	2:	Date:		