Pikes Peak Respite Services Provider Resources

Important Links

PPRS and Staff Portal https://pikespeakrespiteservices.com/

Vida HR - https://identity.myisolved.com

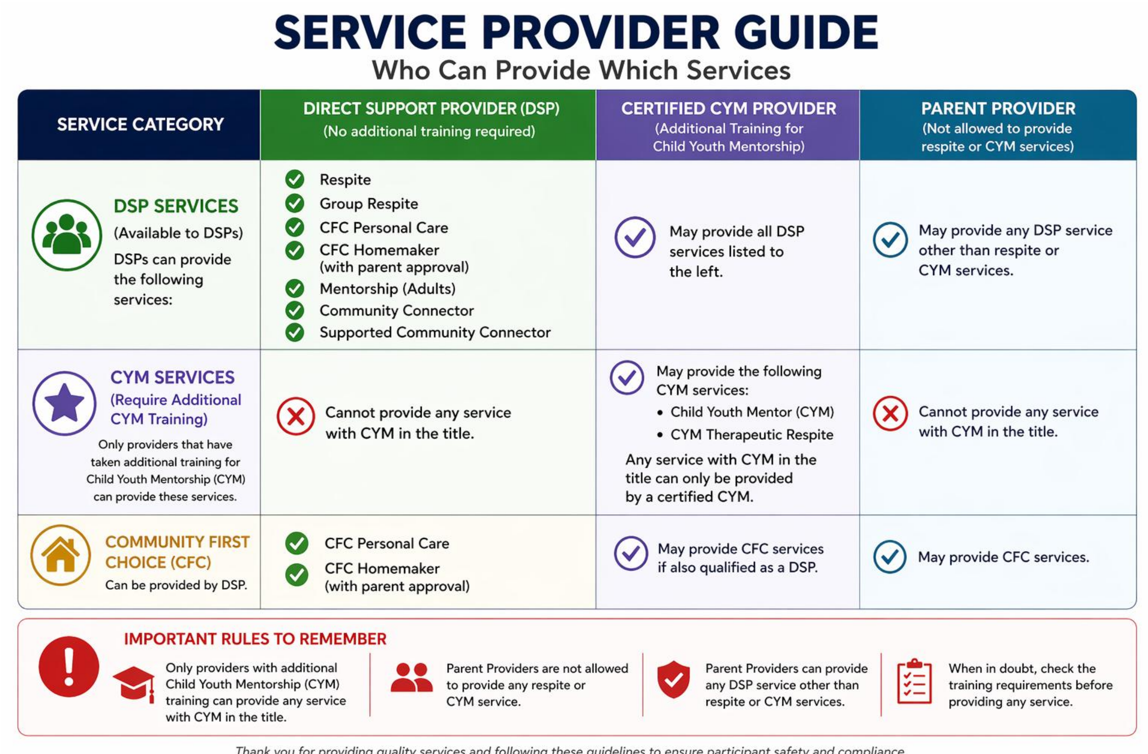
PPRS Newflash Group - https://www.facebook.com/groups/156823936506856

PPRS Facebook Page -
https://www.facebook.com/search/top?q=pikes%20peak%20respite%20services

Sirius Care - https://pprs.siriuscare.net

1. Provider Contact Rule

Every client has an assigned Admin. This Admin is your PRIMARY contact for all issues including shifts, training, and documentation.



SERVICE PROVIDER GUIDE

Who Can Provide Which Services

SERVICE CATEGORY	DIRECT SUPPORT PROVIDER (DSP) (No additional training required)	CERTIFIED CYM PROVIDER (Additional Training for Child Youth Mentorship)	PARENT PROVIDER (Not allowed to provide respite or CYM services)
DSP SERVICES (Available to DSPs) DSPs can provide the following services:	Respite Group Respite CFC Personal Care CFC Homemaker (with parent approval) Mentorship (Adults) Community Connector Supported Community Connector	May provide all DSP services listed to the left.	May provide any DSP service other than respite or CYM services.
CYM SERVICES (Require Additional CYM Training) Only providers that have taken additional training for Child Youth Mentorship (CYM) can provide these services.	Cannot provide any service with CYM in the title.	May provide the following CYM services: • Child Youth Mentor (CYM) • CYM Therapeutic Respite Any service with CYM in the title can only be provided by a certified CYM.	Cannot provide any service with CYM in the title.
COMMUNITY FIRST CHOICE (CFC) Can be provided by DSP.	CFC Personal Care CFC Homemaker (with parent approval)	May provide CFC services if also qualified as a DSP.	May provide CFC services.

IMPORTANT RULES TO REMEMBER

- Only providers with additional Child Youth Mentorship (CYM) training can provide any service with CYM in the title.
- Parent Providers are not allowed to provide any respite or CYM service.
- Parent Providers can provide any DSP service other than respite or CYM services.
- When in doubt, check the training requirements before providing any service.

Thank you for providing quality services and following these guidelines to ensure participant safety and compliance.

Provider Rules – This is not a comprehensive list. Please refer to the Employee Handbook for further clarification.

W2 Employees

- Max 40 hours/week
- Max 12 hours/day (10 for Respite)
- Submit shifts within 48 hours
- No guests, pets, or outside children
- No overtime

CRITICAL COMPLIANCE:

- Follow Plan of Care (POC) and DCSC EXACTLY
- Only bill authorized services
- Do NOT cross services

Service Descriptions

CYM (Child & Youth Mentorship)

Requirement: Must be a **Certified CYM Provider**
Purpose
- Emotional regulation
- Coping skills
- Social development

Service Expectations
- Must be **goal-based and aligned with the Plan of Care (POC)**
- Requires **active teaching, coaching, and behavioral support**
- Must include **ongoing engagement and intervention** (not passive supervision)

WRAPAROUND ADDENDUM (WHEN APPLICABLE)
Only applies if the client is actively enrolled in Wraparound services and has an assigned Care Coordinator.
- CYM services must be **directly aligned with the Wraparound Plan of Care**
- Providers are required to **coordinate with the assigned Care Coordinator**
- Services must be **individualized based on current Wraparound goals**
- Documentation must reflect **progress toward Wraparound outcomes**

Monthly Requirement
- CYM providers must **review and incorporate monthly outcome statements**
- Services must be adjusted to reflect **current needs, progress, and identified priorities**

Key Standard
👉 CYM services must support the **overall Wraparound process**, ensuring consistency across all team members and interventions.
Example:
Client participated in a CYM session focused on emotional regulation, coping skills, and appropriate social behavior. The goal of the session was to increase the client's ability to manage emotions and respond appropriately during challenging situations.
At the start of the session, client demonstrated mild frustration when transitioning between activities. Staff provided 1:1 support using verbal prompting, modeling coping strategies such as deep breathing, and offering choices to support regulation. Client required initial prompting but was able to utilize coping strategies with support.
Throughout the session, staff actively engaged with the client by reinforcing positive behaviors, redirecting when needed, and modeling appropriate responses. Client participated in structured activities and demonstrated improved ability to follow directions and remain engaged. Occasional redirection was needed, but client was able to return to task with minimal support.
Client showed progress by demonstrating increased use of coping strategies and improved emotional regulation compared to previous sessions.
Plan for future sessions is to continue building coping skills, increasing independence, and reducing the need for prompts.

CYM Therapeutic Respite

• Certified CYM ONLY
• ACTIVE therapeutic intervention required
• NOT passive supervision
• Max 4 hours/day

Client participated in a Therapeutic Respite session focused on supervision and emotional regulation support. At the start of the shift, client showed mild frustration during transitions. Staff provided 1:1 therapeutic support including verbal prompting, redirection, and modeling coping strategies such as deep breathing. Client responded positively and was able to transition with reduced frustration.

Throughout the shift, staff maintained active engagement by monitoring behavior, providing prompts, and reinforcing positive choices. Client participated in structured and preferred activities and required intermittent redirection but was able to return to tasks with minimal support.

Staff continued implementing coping strategies to prevent escalation. Client demonstrated progress by maintaining emotional regulation for longer periods and requiring fewer prompts compared to previous sessions.

Services were provided with continuous supervision and active therapeutic support. No safety concerns were observed.

Plan is to continue building independent use of coping skills and reduce reliance on staff support.

RESPITE

• Supervision only
• NOT goal-based
• Max 10 hours/day

Client received respite services focused on supervision and ensuring safety throughout the shift. Client remained stable and engaged in preferred activities within the home and community setting. Staff provided continuous supervision and monitored behavior and environment to maintain safety.

Client participated in routine activities and responded appropriately to expectations. Occasional verbal redirection was provided as needed, and client was able to follow directions with minimal support. No significant behavioral concerns were observed during the shift.

Staff ensured the client remained in a safe environment at all times and supported general daily routines. Client remained calm and cooperative throughout the duration of the shift.

No safety concerns or incidents occurred.

COMMUNITY CONNECTOR

• Must be community-based – services not allowed in home
• Must be goal-based

COMMUNITY CONNECTOR (CC) – SERVICE REQUIREMENTS & TRAINING

SERVICE OVERVIEW

Community Connector (CC) services are designed to support individuals in **building skills through meaningful participation in the community**.

These services must:

- Be **goal-based**
- Occur in **integrated community settings**
- Promote **independence, interaction, and skill development**

SUPPORTED COMMUNITY CONNECTOR (ADULT)

Service Description

Supported Community Connector is a **goal-based service that supports adults in building independence through active participation in integrated community settings**. The focus is on **teaching and developing skills needed to access, navigate, and engage in the community**, rather than completing tasks for the individual.

This service must:

- Occur in **public, integrated community settings**
- Be **1:1 support**
- Be **skill-building and instructional ("teach, don't do")**
- Align with the individual's **Plan of Care (POC) goals**
- Promote **independence, social interaction, and community inclusion**

Staff are expected to:

- Provide **prompting, modeling, and coaching**
- Support **decision-making and problem-solving**
- Gradually **fade supports as independence increases**

❌ This service is NOT:

- Running errands for the client
- Passive supervision or companionship
- Personal Care or Homemaker services
- Staff completing tasks instead of teaching

Audit-Ready Example

Client participated in a Community Connector activity at a local community center and public park to work on social interaction, communication, and engagement with peers. The goal of the session was to improve the client's ability to initiate conversations, follow directions, and participate appropriately in a community setting.

At the start of the shift, client required prompting to transition into the activity and was initially hesitant to engage with peers. Staff provided 1:1 support through verbal prompts, modeling appropriate social behaviors, and encouraging participation. During structured activities at the community center, client followed directions with occasional redirection and was able to remain engaged for most of the activity.

At the park, client was supported in initiating interaction with peers. With prompting, client greeted peers and participated in shared play activities. Staff continued to model communication and provided reminders to stay on task and engage appropriately. Client required intermittent redirection but was able to return to activity with minimal support.

Throughout the session, staff provided consistent support including prompting, modeling, and reinforcement of positive behaviors. Client demonstrated progress by increasing participation and initiating peer interaction with fewer prompts compared to previous sessions.

All activities occurred in integrated, public community settings and allowed for interaction with individuals outside of the household. No safety concerns were observed during the session.

Plan for future sessions is to continue increasing independence with social interaction and reducing reliance on staff prompts.

CORE SERVICE REQUIREMENTS

1. One-to-One Service Delivery

- Community Connector services are **STRICTLY 1:1**
- Staff may only support **one client at a time**

2. Supervision of Others

- If other children are present:
  - A **parent or responsible adult must supervise them**
- ❌ Staff may **NOT supervise siblings or other children**
- ❌ Paid supports cannot take on **caregiver roles for others**

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3. Community-Based Requirement

Services must occur in:

- **Public, integrated settings**
- Locations available to the **general community**

Examples:

- Libraries
- Community centers
- Parks
- Volunteer sites
- Recreational programs

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4. Activity Requirements – Community Connector

Activities must be:

- Inclusive and **open to the public**
- Interactive (NOT passive)
- Focused on **skill-building**

❌ NOT allowed:

- Passive activities (watching, observing only)

- Entertainment-only activities
- Activities without interaction

AGE-APPROPRIATE GUIDELINES & EXAMPLES

UNDER AGE 6 (RARE & EXCEPTIONAL)

⚠️ Community Connector for this age group is:

- **VERY limited**
- Only approved in **extreme or unusual circumstances**

Must show:

- Needs **far beyond same-age peers**
- Support beyond typical parenting

Example: Art Workshop (Age 5)

- Requires **constant 1:1 behavioral support**
- Includes:
  - Transition support
  - Safety intervention
  - Communication development
- Staff implements behavior plan to:
  - Reduce escalation
  - Improve compliance
  - Build communication

AGES 6–9

Examples include:

- Community classes (art, music, library programs)
- Early reader groups
- Community gardening

Support may include:

- Communication assistance
- Behavioral support
- Transition support

AGES 10–13

Examples include:

- Youth programs (clubs, theater, music)
- Volunteer opportunities (food banks, shelters)
- Leadership groups (4-H, scouting)

Support includes:

- Staying on task
- Following directions
- Social participation

AGES 14+

Examples include:

- Volunteer work (libraries, hospitals, shelters)
- Advanced programs (art, theater, culinary)
- Civic engagement or youth councils

Support includes:

- Communication with staff
- Managing schedules
- Task completion
- Self-advocacy

ACTIVITIES OUTSIDE THE SCOPE (NOT ALLOWED)

❌ Non-age-appropriate activities
❌ Passive or observational participation
❌ Private or non-public activities
❌ Routine childcare or supervision
❌ Entertainment-only activities
❌ Tasks that belong to other services (Personal Care, therapy, etc.)
❌ School-based social skill replacement
❌ Paying for activities (fees, food, etc.)
❌ **Movies, Park, Hiking, Zoo outside of a group, eating at restaurant with only family or provider**

DISTINCTION FROM PARENT RESPONSIBILITIES

Community Connector:

- Must go **BEYOND typical parenting duties**

It CANNOT:

- Replace supervision parents normally provide
- Be used for routine childcare

Important Rule

Services are only allowed when:

- The client requires **significantly more support than peers**
- Needs are **extraordinary and well-documented**

For Young Children

- Services should be **rare**
- Typical behaviors like:
  - Supervision
  - Redirection
  - Assistance
    → Are considered **parent responsibilities**

DISTINCTION FROM OTHER SERVICES

Community Connector may NOT:

- Replace **Personal Care**
- Replace **Therapy or Behavioral Services**
- Replace **School-based services**

Key Rule

👉 If another service can meet the need,
Community Connector should NOT be used

SUMMARY FOR STAFF

✓ Must be:

- 1:1
- Community-based
- Goal-driven
- Interactive

❌ Must NOT:

- Be passive
- Replace parenting
- Duplicate other services

DOCUMENTATION REMINDER
Always include:
Task + Support + Who + Response + Progress + Location + Goal

EXAMPLE DOCUMENTATION

"Client attended library group. Staff provided prompts for communication and modeled social interaction with peers. Client initiated conversation with support and showed improved engagement. Activity took place at public library and aligned with communication goals."

Documentation Requirements

REQUIRED FORMAT:
Task + Support + Who + Response + Progress + Location + Goals

Example:
Client practiced social skills at park with peers. Staff prompted interaction and modeled conversation. Client engaged and showed improved confidence.

COMMON ERRORS:
• Missing location
• No progress
• Too vague ("had a good day")

In addition, all documentation should clearly answer:

- **Who** was involved? (Client and staff)
- **What** activity or task was completed?
- **What** Goal/Goals were worked on (If a goal related service)
- **When** did it occur? (During the shift/session)
- **Where** did the service take place?
- **How** was support provided? (Prompts, modeling, redirection, etc.)
- **Why** was the service provided? (Connection to goals/POC)

Community Connector Documentation

Documentation must include:

1. **Task** – What skill was worked on?

2. **Support you provided** – What did YOU do?

3. **Who they interacted with** – Who was involved?

4. **Response** – How did they respond?

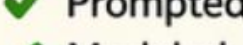
5. **Progress** – What progress was made?

6. **Location** – Where did the activity take place?

1. TASK — What skill was worked on?

- ✔ Practicing social interaction
- ✔ Building coping/regulation skills
- ✔ Improving attention and focus
- ✔ Problem solving
- ✔ Communication skills
- ✔ Following directions
- ✔ Self-advocacy
- ✔ Other goal-based skills

2. SUPPORT — What did YOU do?



- ✔ Prompted
- ✔ Modeled
- ✔ Coached
- ✔ Redirected
- ✔ Encouraged
- ✔ Provided visual support
- ✔ Offered choices
- ✔ Other individualized support

3. WHO THEY INTERACTED WITH — Who was involved?

- ✔ Peers
- ✔ Community members
- ✔ Staff/volunteers
- ✔ Other program participants
- ✔ Family members
- ✔ Other (specify)

4. RESPONSE — How did they respond?

- ✔ Engaged in activity
- ✔ Initiated interaction
- ✔ Followed directions
- ✔ Participated with support
- ✔ Used coping strategies
- ✔ Communicated needs
- ✔ Other (specify)

PROGRESS — What progress was made?

- ✔ Worked on goals
- ✔ Improved skill
- ✔ Increased independence
- ✔ Used strategies more consistently
- ✔ Made positive choices
- ✔ Other progress (specify)

9. LOCATION — Where did the activity take place?

- ✔ Community center
- ✔ Library
- ✔ Park
- ✔ School
- ✔ Local store
- ✔ Restaurant
- ✔ Other (specify)

MUST WORK ON GOALS!

Activities and supports must connect to the individual's goals in their plan.

- ✔ Align with goals
- ✔ Individualized
- ✔ Meaningful
- ✔ Measure progress
- ✔ Make a difference!

QUICK FORMULA:

Task + Support + Who + Response + Progress + Location + Goals

COMMON MISTAKES TO AVOID

- ✘ Don't go to the movies.
- ✘ Must mention location (church, park, outing).
- ✘ Don't overlap common parental duties.
- ✘ Only listing the activity (church, park, outing).
- ✘ Not explaining what YOU did.
- ✘ No mention of peers/community interaction.
- ✘ No outcome or response.
- ✘ Too vague ("had fun", "did well").

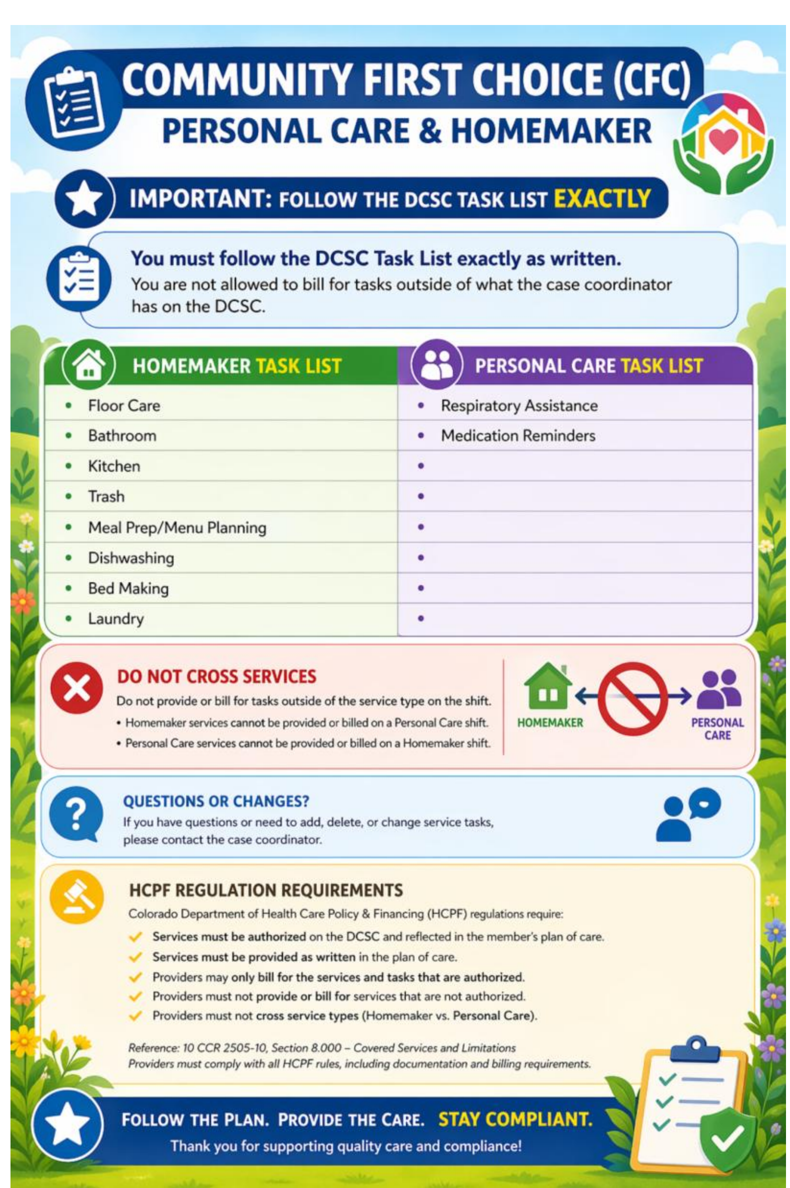
★ **Clear, complete documentation shows the impact YOU make!** ★

CFC Services (Personal Care & Homemaker)

Follow DCSC Task List EXACTLY.
Do NOT cross Homemaker and Personal Care.

Homemaker Tasks:
Cleaning, laundry, meal prep

Personal Care Tasks:
ADLs such as hygiene, medication reminders, respiratory support



MENTORSHIP

Service Description

Mentorship is a **goal-based service focused on teaching and developing independent life skills** to support the individual's ability to function more independently in daily life. This service is intended to build practical skills through **active teaching, guidance, and practice**, not passive support or supervision.

- Be **skill-building and instructional**
- Align directly with the **Plan of Care (POC) goals**
- Include **hands-on teaching, prompting, and coaching**
- Demonstrate **progress toward independence over time**

Common areas of focus include:

- Budgeting and money management
- Time management and scheduling
- Decision-making and problem-solving
- Communication and self-advocacy
- Daily living skills (non-ADL)

❌ Mentorship is NOT:

- Supervision or companionship
- Task completion done by staff
- Personal Care or Homemaker tasks

Audit-Ready Example

Client participated in a Mentorship session focused on budgeting and decision-making skills. The goal was to increase the client's ability to manage money and make appropriate spending choices.
Staff provided instruction on identifying needs versus wants and guided the client through a simple budget plan. Client required initial prompting to categorize expenses and understand priorities. Staff used modeling and verbal cues to support decision-making.
Client worked on organizing a weekly budget and identifying necessary purchases. With support, client was able to complete tasks and demonstrated engagement throughout the session.
As the session progressed, client required fewer prompts and showed improved understanding of budgeting concepts. Client demonstrated progress by making appropriate spending choices with increased independence.
Staff provided consistent support through prompting and reinforcement. Session remained aligned with Plan of Care goals.
Plan is to continue building independence and reduce reliance on prompts.

6. Sirius Care – Logging & Post-Dating Shifts

HOW TO LOG A SHIFT:

1. Go to https://pprs.siriuscare.net
2. Log in
3. Click "Click Here"
4. Select client → Add Shift
5. Enter correct date/time, service, location
6. Add documentation
7. Click Submit

POST-DATING RULE:

You may log shifts up to 48 hours after completion.

7. Fixing Rejected Shifts

1. Go to https://pprs.siriuscare.net
Log in
2. Click "Click Here"
3. Ongoing Shifts
4. Select rejected shift
5. Click Details
6. Fix documentation
7. Click Update

MUST INCLUDE:

Task, Support, Response, Progress, Location

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