

(4) A community access service:

(a) Shall be provided by a community access specialist;

(b) Shall be designed to support a participant to participate in meaningful routines, events, and activities through various community organizations;

(c) Shall be designed to empower a participant in developing natural supports;

(d) May be participant directed;

(e) If participant directed, may be provided by an immediate family member, guardian, or legally responsible individual of the participant in accordance with Section 10 of this administrative regulation;

(f) Shall stress training that empowers a participant in acquiring, practicing, utilizing, and improving skills related to:

1. Connecting with others;

2. Independent functioning;

3. Self advocacy;

4. Socialization;

5. Community participation;

6. Personal responsibility;

7. Financial and

8. Other skills related to optimal well-being as defined in the participant's person-centered service plan;

(g) Shall be designed to result in an increased ability to develop natural supports and access community resources including educational, recreational, religious, civic, or volunteer opportunities with an outcome of:

1. Less reliance on formal supports; and

2. Greater reliance on natural or unpaid supports as established in the participant's person-centered service plan;

(h) Shall have an emphasis on the development of personal social networks, membership opportunities, friendships, and relationships for the participant as established in the participant's person-centered service plan;

(i) Shall be provided outside the participant's home or residential setting and occur during the day, in the evening, or on weekends;

(j) Shall not duplicate residential support or day training services, or authorized therapies;

(k) Shall be provided to a participant with a:

1. One (1) to one (1) staff to participant ratio; or
2. Ratio of one (1) staff to no more than two (2) participants according to the participant's person-centered service plan, if the participant invites a friend;

(l) Shall occur in an integrated community setting;

(m) Shall be an impact service and the participant's person-centered service plan shall define steps to decrease the provision of the service as the participant becomes more independent in accessing and becoming part of the community;

(n) Shall be documented in the MWMA by:

1. A note documenting each contact, which shall include:
 - a. A full description of each service rendered;
 - b. Evidence of training or service to support outcomes designated in the participant's person-centered service plan;
 - c. The date of the service;
 - d. The location of the service;
 - e. The beginning and ending times of the service;
 - f. The signature and title of the individual providing the service; and
 - g. The date the entry was made in the record; and
2. A monthly summary note, which shall include:
 - a. The month and year for the time period the note covers;
 - b. An analysis of progress toward the participant's outcome or outcomes;
 - c. Identification of barriers to achievement of outcomes;
 - d. Projected plan to achieve the next step in achievement of outcomes;
 - e. The signature and title of the community access specialist completing the note; and
 - f. The date the note was written; and

(o) Shall not exceed 160 fifteen (15) minute units per week alone or in combination with community access group services.