



UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF SERVICES FOR PEOPLE WITH DISABILITIES POLICY AND PROCEDURES		
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EMERGENCY SERVICES MANAGEMENT COMMITTEE: ESMC		
RATIONALE: This policy is intended to ensure that decisions about emergency funding for a Person on the division waiting list are fair, consistent, and transparent. Authorizing Code: 26B-6-402; 26B-6-403 Rule: R539-2; R512-80; R512-205; R380-80 Federal Code: 24 CFR 578.3 Forms: ESMC Referral - One-time Funding form; ESMC Referral - Ongoing Funding form		
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I. DESCRIPTION

This policy establishes guidelines for reviewing requests for emergency funding for a Person on the division waiting list. The Emergency Services Management Committee (ESMC) may approve one-time and ongoing funding for services to address emergency situations, as determined by this policy.

II. DEFINITIONS

The following terms are defined for this policy as:

- A. **Abuse:** means the same as defined in Sections 26B-6-201, 62A-4a-101, 80-1-102, and R512-80-2, and as applied in (IV)(T) of this policy. It also includes:
 1. non-accidental harm or injury;
 2. attempting to cause harm;
 3. inappropriately using physical restraint, medication, or isolation that could cause harm to a vulnerable Person;
 4. an act, or attempted act, of sexual intercourse, sodomy, incest; or
 5. molestation of a child or vulnerable Person.
- B. **Adult Protective Services (APS):** means the unit within the department’s Division of Aging and Adult Services (DAAS) charged with investigating reports of abuse or neglect of a vulnerable adult, as provided for in 26B-6-205.
- C. **Attrition funds:** means the public funds that the division uses to provide services as described in Section 26B-6-402. These funds revert to the division after a Person who receives services ceases to receive those services, as described in Subsection 26B-6-402(7) (c).
- D. **Attrition savings and allocation summary report:** means a division finance report that

outlines the amount of attrition funding that is available for use, and the attrition funding that has already been allocated by the ESMC.

- E. **Carry-forward money:** means the public funds that the division uses to provide services as described in Section 26B-6-402. These are funds that were not spent before the end of the fiscal year, as described in subsections 26B-6-402(7)(d) and 26B-6-402(7)(e).
- F. **Caseworker:** means division staff who provides assistance with intake, eligibility, waiting list updates, and waiting list services.
- G. **Child Protective Services (CPS):** means the unit within the department's Division of Child and Family Services (DCFS) charged with investigations of abuse and neglect of children, as provided for in Section R512-205-4.
- H. **Department:** means the Department of Health and Human Services (DHHS).
- I. **Division:** means the Division of Services for People with Disabilities, as defined in Section 26B-6-401.
- J. **Emergency Services Management Committee (ESMC):** means the division committee that reviews requests for services to address emergency situations.
- K. **ESMC chair:** means a staff role appointed by the division director who screens referrals to the ESMC, participates in the appointment of members to ESMC, and then presides over meetings of ESMC.
- L. **Grave danger:** means mortal danger that imminently threatens an individual's health, life, or well-being.
- M. **Harm:** means physical or emotional pain, damage, or injury, as defined in Rule R380-80 "Provider Code of Conduct and Client Rights."
- N. **Homelessness:** means the same as defined in 24 CFR 578.3, ("Homeless") and as applied in (IV)(T) of this policy. It refers to a Person or family who lacks a fixed, regular, and adequate nighttime residence, including:
 - 1. a primary nighttime residence that is a public or private place not meant for human habitation;
 - 2. a publicly or privately operated shelter designated to provide temporary living arrangements including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs; or
 - 3. when the Person is exiting an institution where the Person has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
- O. **Immediate:** means within the next 30 calendar days.
- P. **Neglect:** means the same as defined in Sections 26B-6-201; 62A-4a-101; 76-5-110; and 80-1-102 and as applied in (IV)(T) of this policy. It includes abandonment or the failure to provide necessary care, including nutrition, education, clothing, shelter, sleep, bedding, supervision, health care, hygiene, treatment, or protection from harm. Self-neglect occurs when a vulnerable adult is no longer able to care for their own well-being or provide basic necessities due to a mental or physical impairment.
- Q. **Person:** means an individual who is in services, or who is eligible for services with division.

- R. **Support coordinator:** means an employee of the division (division support coordinator) or an individual contracted with the division who assists with:
 1. assessing the need of a Person receiving division funding;
 2. completing written documentation of support;
 3. developing a service and support plan for a Person receiving division funding;
 4. monitoring the appropriate spending of a Person's annual budget;
 5. monitoring the health and welfare of the Person; and
 6. monitoring the quality of each service used by a Person receiving division funding.
- S. **Supports:** means housing; the availability of help from family, friends, or community members; resources through insurance; or similar resources.
- T. **Waiting list:** means a queue for Persons who have been assessed and determined eligible for division services but who are waiting for funding to become available.
- U. **Well-being:** means the ability to obtain adequate food, water, medication, health care, shelter, cooling, heating, safety, or other necessary resources.

III. POLICY

- A. ESMC may use attrition funds to fund a one-time or ongoing emergency service request for a Person who is on the division waiting list. ESMC may use carry-forward money to fund a one-time waiting list service.
 1. ESMC shall review each submitted request for one-time or ongoing emergency funding after it has been screened by the ESMC chair.
 2. ESMC shall determine that the request meets either one-time or ongoing criteria as outlined in this policy.
 3. The ESMC shall use trauma-informed, cultural, and linguistic competency best practices when evaluating a Person's circumstances and well-being. Choice of lifestyle or living arrangements may not, by themselves, be evidence of the Person's inability to care for their own well-being.
- B. ESMC may prioritize the funding of approved requests based on:
 1. the support that is currently available to a Person; and
 2. how soon a Person's current support may be exhausted.
- C. The ESMC chair or their designee shall review the Attrition Savings and Allocation Summary Report each month, with the assigned Division of Finance and Administration (DFA) representative or their designee, to monitor the person-centered budget, in accordance with Section R539-2-8.
- D. The division may not provide services if there are no available funds.
- E. ESMC membership shall be at the discretion of the division director or their designee.
 1. The division director shall appoint an ESMC chair.
 2. The ESMC chair and division leadership shall appoint additional division staff.
 3. Appointed division staff shall represent subject matter expertise in different areas of the division's service system.
 4. Appointed division staff shall demonstrate expertise in behavioral health, physical health, and available community resources.
- F. The ESMC may provide input on the services offered to the Person for their initial budget.
- G. A Person approved for services through ESMC may not use the caregiver compensation service delivery method during the first year of receiving division services. The caregiver

compensation service delivery method implies that a Person is in a relatively stable environment with a caregiver who has the capacity to meet the Person's health and safety needs. The Person therefore, would not meet ESMC criteria.

- H. If a Person is approved for and accepts services, they shall complete and return all required initial division forms, and any other applicable Medicaid forms, within 45 days of when the forms were sent.
 - 1. If the forms are not returned to the division within 45 days, the Person is no longer eligible to receive emergency funding.
 - 2. If the Person cannot complete the forms on their own, the Person may request assistance from the caseworker to complete the applicable division and Medicaid forms.
 - 3. ESMC shall document the date the forms are sent, and the mode of sending in USTEPS.
- I. ESMC shall monitor the person-centered budget and provide support coordination for each Person that comes into services through ESMC for the first four fiscal quarters that the Person is in services.
- J. If an ESMC request is denied, the caseworker may subsequently submit a new referral if the Person's circumstances have changed such that their situation may now meet ESMC criteria.

IV. PROCEDURE

ESMC schedule.

- A. Regular ESMC meetings are typically held in the third week of each month that funding is available.
- B. The chair may schedule interim meetings as necessary to review a referral if:
 - 1. the referral clearly identifies that the emergency shall occur before the next regular meeting; and
 - 2. no other support can meet the need under the circumstances.
- C. To be considered for review, referrals to ESMC may be received no later than the afternoon of the second Monday of the month the review is requested.

ESMC referrals.

- D. The caseworker shall submit the ESMC Referral – One-time Funding form, or the ESMC Referral – Ongoing Funding form, no later than the Friday afternoon of the first week of the month.
 - 1. The forms shall be submitted through Google Forms.
 - 2. The referral form shall include documentation confirming that all community, natural, and family resources were explored and exhausted before requesting emergency services.
- E. An ESMC referral shall identify whether the Person was known or unknown to the division before requesting the ESMC review. For this purpose, the caseworker shall use the following three categories:
 - 1. a Person who is on the waiting list and was referred to ESMC by the caseworker because of a change in circumstances;
 - 2. a Person who is completing intake and was referred to ESMC by the caseworker after making an eligibility determination; or
 - 3. a Person who has not started the intake process but was referred by another

agency or by an individual who requested emergency services for the Person.

- F. If circumstances change significantly before an ESMC meeting, the caseworker may update a referral that has been submitted prior to the meeting by emailing the ESMC chair.
- G. ESMC shall review referrals in the following order of priority:
 - 1. homelessness;
 - 2. loss of caregiver or deterioration of the family's ability to support the Person;
 - 3. an immediate threat to the health and safety of the Person or their family; or
 - 4. the Person has a place to live but needs a less restrictive place to live (e.g., they are a Utah State Hospital resident who no longer needs that level of supervision).

ESMC Decisions.

- H. The ESMC shall reach a unanimous decision whether to issue an approval or denial. If a unanimous decision cannot be reached, the division director or their designee shall review the available information and make the final decision.
- I. Before rendering a decision, the ESMC shall review:
 - 1. the criteria for either a one-time or ongoing emergency request, as described in sections Q and R below; and
 - 2. the referral form.
- J. A final decision on funding shall be contingent upon verification that funds are available by the assigned Division of Finance and Administration (DFA) representative.
- K. A final decision on the Person's initial budget shall be contingent on approval by the Request for Services team.

Notification of funding.

- L. The ESMC chair shall inform the caseworker of the funding decision no later than two business days after the final decision has been made.
- M. The caseworker shall notify the Person of the final decision.

Quarterly oversight of person-centered budget spending for the initial plan cycle.

- N. Upon entry into services through ESMC, a division support coordinator shall track each person-centered budget authorized by the ESMC for the first four fiscal quarters to ensure that the budget is utilized appropriately for the Person's needs.
- O. The ESMC chair shall meet at the end of each of the first four quarters with each division support coordinator assigned to a Person approved for ESMC services.
 - 1. The ESMC chair and the division support coordinator shall monitor the person-centered budget, in accordance with Section R539-2-7.
 - 2. The ESMC chair and the division support coordinator shall use the quarterly spending report as a basis to make changes to the budget to better align the budget total with the Person's needs.

Criteria for one-time services.

- P. To qualify for one-time services, the referral shall establish that:
 - 1. one-time services may help prevent placement into a more restrictive setting;
 - 2. temporary funding may reduce or resolve the crisis situation because the funding would enable the Person to continue to reside in their home;
 - 3. one-time services are determined to be the most appropriate way to address the Person's need as compared to natural supports, other agency supports, or to a less restrictive division support;

4. one-time services are temporary, and shall prevent or delay the need for on-going services; and
5. there is an immediate but temporary health crisis and/or a safety issue for the individual and/or family that would be mitigated by one-time services.

Criteria for ongoing services.

- Q. To qualify for ongoing services, the Person:
1. may not have any family members, friends, or community supports that are willing and able to provide needed support;
 2. shall meet division eligibility requirements and has requested division services, or else meets the requirements and conditions for a civil commitment;
 3. if over 18 years of age, shall enroll in, or is awaiting a decision on, Supplemental Security Income; and
 4. has health and safety needs that may be adequately met by the division services.
- R. In addition to all the criteria of (IV)(R), the Person shall also be presently experiencing:
1. homelessness;
 2. loss of caregiver;
 3. severe behavior support needs; or
 4. abuse and neglect.
- S. Homelessness as a criterion for ongoing services means that the Person is homeless or has received an eviction notice and the Person's ability or inability to perform activities of daily living and instrumental activities of independent living puts them in grave danger. The Person's choice of lifestyle or living arrangements may not be considered as the sole evidence of inability to care for their own well-being.
- T. Loss of a caregiver as a criterion for ongoing services means:
1. the Person is unable to care for themselves and lacks a primary caregiver, or their caregiver is permanently incapacitated due to health or a physical condition that may not exclusively include age;
 2. the caregiver has had a demonstrated and substantial shift in health or physical condition that prevents them from continuing to provide necessary care on an ongoing basis; and
 3. the lack or loss of the caregiver would put the Person in grave danger.
- U. Severe behavior support needs, as a criterion for ongoing services, means that the Person has current and ongoing severe behavior that puts them or others in grave danger. For this purpose, grave danger includes:
1. behavior that has resulted in the injury or death of another individual or animal;
 2. physical assault or abuse of another individual, animal, or self that resulted in substantial harm; or
 3. recurring or accelerating homicidal or suicidal ideation that has been documented by a medical professional whose scope of licensure includes the ability to render diagnoses.
- V. The division shall accept documentation of severe behavioral support needs from a medical professional whose scope of licensure includes the ability to render diagnoses.
1. The documentation shall affirm that there is a risk of significant violence or of self-harm.
 2. Acceptable forms of documentation may include a written assessment submitted to division staff through emails, a signed letter, a medical form, etc.
- W. ESMC may consider other specific behavioral concerns as criteria for ongoing services

including:

1. behavior that resulted in physical harm to self or to others and required medical intervention;
 2. maladaptive behaviors as defined in Section R432-1-3 that resulted in property damage; or
 3. credible allegations, criminal charges, or investigation by APS or CPS, resulting from claims of rape, sexual abuse, or aggravated sexual assault, especially where the individual is currently without supervision or treatment, and is deemed likely to reoffend.
- X. Abuse and neglect as criteria for ongoing services means that a Person applying for services has experienced documented physical abuse, sexual abuse, or severe neglect.
1. Division staff shall assure that any allegations of abuse or neglect have been properly documented and submitted to law enforcement or to APS/CPS as required by statute.
 2. To be considered a criterion for ongoing services, a threat of abuse or neglect shall currently exist, and be likely to seriously jeopardize the individual's health or safety.
 3. The Person does not have any natural or paid supports that could mitigate the situation and the abuse and neglect cannot be resolved without division intervention.
- Y. The Person is not eligible for ESMC services if they are a minor in DCFS custody and eligible for a state match agreement.