Special Topic Webinar - Home-Based Back up Plan and Wavier questions 7.27.22

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## **Questions received before webinar:**

### Adult Waiver:

When the Settings Rule are completed to update the performance measures that reflects CMS recommendations, consistency across the various waiver programs and two new performance measures? Will there be training to ensure that this update is consistent across the state? I'm not aware of the state conducting training on the performance measures because the performance measure is based on some type of data gathering that's being completed during the waiver year. The performance measure language is based on requirements within the waiver language.

Is Updating words and terms for consistency throughout the application and revising restraint and restrictive intervention language something that is being completed by DHS/DDD? Is this completed If not, when will it be completed? This is completed and approved by CMS as of July 1, 2022.

What does adding Assistive Technology as a standalone service mean? Does this impact how individuals apply for this? Assistive Technology had been part of the Adaptive Equipment service definition previously. It was causing some confusion regarding what it is and how to use it, so we weren't seeing any use over the last few years. This has no impact on how individuals use it or apply for it.

What is a HBS plan, what are some examples and who is responsible for developing this Backup Plan? HBS is an acronym for Home Based Services. I'm hoping this question was answered during the presentation.

How can we ensure that the number of required ISC visits from 2 to 4 annually are being done with all the additional responsibilities of the ISCs? The ISCs are required to document when a visit is conducted. Our Bureau of Quality Management conducts onsite reviews annually and looks at the documentation from these meetings.

# **Children's Support Waiver:**

What is the process to switch from the children to the adult waiver? Is there a documented process and how long is this process? Who do we contact if there are issues or excessive delays? When you meet the eligibility requirements, you reach out to your ISC and tell them you wish to transfer from the children's waiver to the adult waiver. The ISC completes the paperwork and submits it to the Division.

Is a Back Up Plan required Children HBS participants? Yes. Anyone receiving HBS services, especially Personal Support, are required to have a backup plan.

Our daughter 16 years old was chosen for support waiver for children and young adults If I don't take the PUNS selection today, will I have to go to the back of the line again? You have 1 year to use the selection letter and enter services. If you don't begin services within that year, you will remain on the PUNS list for a future selection. To provide clarification, you will not lose any accrued time and will continue to accrue time uninterrupted. The children's selection will have no impact on any adult time waiting.

What is the process in terms of time on the waiting list in the Seeking service category if my son who is 20 years old, who was selected does not take the selection now, will he lose time or will his time continue to be counted? There will be <u>no</u> negative impact. If he chooses not to utilize the children's HBS selection opportunity, he will not lose any adult time waiting. He will remain on PUNS and will be selected whenever his amount of time waiting is included.

If families receive information that conflicts with the information, we are receiving in the webinar today, what is the process for resolution? I don't understand this question. The purpose of this webinar is to share information about these topics. You could reach out to The Arc Ligas family Advocate program or to someone at DDD.

Why did the state select people 18 and 20 years old for the children's waiver, if they are legally adults already? Our intent was to be able to offer some type of benefit to individuals before they became eligible for adult selection because the adult waiver currently isn't selecting individuals until they are over 22 years old. The Children's Waivers are open to individuals up to their 22<sup>nd</sup> birthday. We felt anyone who was eligible for the children's waiver should be allowed to be included in this PUNS selection.

Do they have to remain in the children's waiver until the age of 22? No, you're not required to remain in the children's waiver until the age of 22. The purpose of this selection was to hopefully increase the number of individuals in the Children's Support Waiver and is meant to offer relief ahead of adult selection. Individuals should work with their ISC if they believe their current level of services is not meeting their needs.

Can they transition earlier? If so, what is the process to switch from Children to Adults? Previously answered.

Can my ISC help me with the process of getting Medicaid? Section 9.3 of the ISC Manual states ISC responsibilities include "...assisting individuals and families who will be entering a DDD Waiver to apply for Medicaid Benefits". Specific to children, the ISC will "...help the family apply for Medicaid benefits and to ensure that the child's Medicaid application is prioritized". The ISC can assist with the redetermination of Medicaid benefits but ultimately the responsibility for maintaining Medicaid eligibility is the responsibility of the individual/family.

The age to apply for Medicaid as a family of ONE is at 18 or 19? We're not Medicaid eligibility experts so I would need to reach out to the proper state agency to answer this question. I

recommend you visit <u>Illinois.gov - IL Application for Benefits Eligibility (ABE) ABE Home Page</u> to see if you can find an answer on that site.

I am a parent/ legal guardian of an 18-year-old. Can I be the PSW? The Adult Waiver is the only waiver that allows parents/legal guardians to provide PSW services. The ability to be a PSW for your child is not about their age, it's about the waiver they're in.

My child is no longer in High School, I need a day program while I work. Does the Children's waiver allow me to get a CDS? No, the Children's Support Waiver doesn't have day program services available in it.

Do I have to have guardianship to get services? I may need more context for this question but on the surface, no a person doesn't have to have a guardian to receive services.

I am in the process of obtaining legal guardianship, will I be able to make decisions for my child in the meantime? Potentially yes. The waivers allow for a person who is receiving services to choose who can assist them with making decisions. If your child says you can assist with decision making, you can help make decisions.

Can a PSW live outside of Illinois? A PSW can live outside of Illinois. However, they must complete all of the required background checks and all services must be provided in the State of Illinois. The PSW would also have to be available to meet if there is an investigation from an Illinois Agency such as the OIG, APS, DDD, etc.

Is SDA required or optional under the Children's waiver? SDA is an optional service under the children's support and adult waiver.

Can I use a PSW to travel outside of Illinois with our family for a vacation? We recently provided clarification on this topic in the waiver manual update. IDHS: VI. Waiver Activities and Services (state.il.us)

- 1. Illinois doesn't allow waiver services to be provided out of state. Should DDD decide to allow out of state waiver services, the following requirements must be met:
  - a. Waiver services furnished out of state must meet the State of Illinois waiver standards and requirements in all respects; and
  - b. When waiver services are furnished out of state, they are subject to the same monitoring requirements as in state waiver services.
- 2. In an effort to allow individuals to integrate with a broader community and maintain relationships with family and friends residing outside of Illinois, the DDD will allow individuals to receive Personal Support services out of state when meeting the following requirements:

- a. The individual notifies their ISC Agency prior to leaving the state and immediately upon their return to the state;
- b. The service is provided by an individual who is an approved Illinois Medicaid provider prior to leaving the state;
- c. The service is provided during a vacation or visit to family or friends who don't reside in Illinois; and
- d. The period of receiving services out of state doesn't last longer than 2 continuous weeks (14 calendar days).

Will my SSI or other state benefits be impacted? I need more context for this question.

Will the ISC reach out to me to switch us to adult services when I am eligible, or do we have to contact them? This should be discussed during your monitoring visits and during the development of your PP as you're approaching your 18<sup>th</sup> birthday. You and the ISC should be developing a transition plan for when you will transition to adult services.

If I choose HBS is there a timeline as to when I should be in service? There's no specific timeline for when you should be in service. It is dependent on how quickly you can find and secure service providers, those service providers enrolling to be a provider, etc. Each case is different. If this question is regarding the recent PUNS selection for Children's Support Waiver services, yes, you must begin waiver services by the end of June 2023.

What does adding restraint and restrictive intervention language for youth who are receiving services from a Support Services Team (SST) mean? Can you provide some examples? The Children's Support Waiver previously didn't allow for individuals to be restrained. There are some individuals who are working with an SST in order to avoid being placed in an institution. Through this process, there may be times when a restraint would be warranted because the individual may hurt another person or themselves. This language allows the restraint to be applied by a person who is trained to apply restraint, trained on the limits of the restraint, and trained to report the occurrence to the provider or ISC.

#### **Children's Residential Waiver:**

Will the residential option be available in the next children PUNS selection? At this time, entry to the Children's Residential Waiver is through crisis only. I don't anticipate this will change in a future children's PUNS selection. I also can't guarantee there will be another children's PUNS selection in the near future.

Can you provide examples of what updating language to be consistent with person-centered planning mean? There are several names for the Plan that is developed during the person centered planning process such as Personal Plan, Person Centered Plan, Individual Service Plan, Service Plan, etc. We changed all references to this plan into a single reference and called it the Person Centered Plan or PCP.

What does remove the ability of providers to utilize seclusion in the delivery of waiver services mean? Seclusion had been allowed in previous versions of the Children's Residential Waiver because it's allowed in Rule 384 which is a DCFS rule that governs the Children's Group Homes. DCFS is in the process of removing seclusion as an option in the Rule and we met with the CGH providers and were assured none of them are using seclusion anyway so we removed the ability to use it from the waiver.

Can you please explain what specific to the Behavior Intervention and Treatment waiver service changes for the Children's Waivers, please be aware that this definition is being updated in our waivers based upon updates within the State's Medicaid State Plan to the Applied Behavioral Analysis (ABA) service mean? Please provide examples. HFS is adding Applied Behavioral Analysis to the state plan so the service is more broadly available to all individuals on Medicaid. We can't have a service in the waiver that's available through the state plan. So, in order for us to keep this as a waiver service and not make individuals receive it through the state plan, we had to make some clarifications in the language to make sure it's set apart from what's available in the state plan.

We have been told that SST cannot be used for people under 18, does this remain true? If, so what are the alternatives for children that need behavioral intervention? I can say SST is accepting individuals under the age of 18 who are on the PUNS list and/or in the waiver. In fact, in FY 22, they provided services to 76+ children under the age of 18. However, they're not accepting individuals under the age of 18 who are open to DCFS services because they have their own service option.

### **Questions received during webinar:**

What is an HBS backup plan? It's a plan developed for home based participants who utilize Personal Support Workers to ensure there is a plan for when the PSW doesn't show up when scheduled. The goal of the plan is to ensure the health and safety of the individual.

Is this completed by the ISC? The family? The Individualized Back Up Plan is completed during the person-centered planning process. It is to be completed with the ISC, individual served, and anyone else the individual wants to participate.

What is the role of the SDA? Please refer to the consumer handbook for information about the SDA and other agencies who can assist you: IDHS: Consumer Handbook for Home-Based Services (state.il.us).

Who completes the backup plan form, ISC, SDA, EOR? Previously answered.

When was this implemented, back-up plan? Who is responsible for filling this out when utilizing agency based PSWs? This was part of the waiver renewals which were effective 7/1/22. The agency should be responsible for providing back up PSWs. Work with your PSW agency and the ISC to develop a plan when the agency is unable to provide a backup PSW.

Are both versions of the Individualized Back-up Plan form accessible to screen readers and available in a braille ready format? The forms meet accessibility requirements.

My other question was regarding a scenario that I have unfortunately encountered and am asked frequently as an SDA: If the EOR dies or becomes incapacitated, does Aces\$ have any special protocols to ensure that PSW timesheets can be processed while a successor EOR is awaiting an EIN?? If an EOR passes away, ACES\$ will expect 1 timesheet from the worker with a note on the timesheet informing ACES\$ the EoR is deceased. If an EoR is incapacitated, the family will need to appoint another employer.

The process of activating a new EOR has always taken 1-2 months in my years of experience, so I feel like I should be prepared to answer questions about this "what if" scenario. If a person has identified a backup EOR/ successor EOR and they fill out the EOR enrollment packet right away, the PSWs would still not be paid for quite a while, and I am not sure we can have that be an "acceptable" plan! There can only be one EIN# linked to a participant. The current employer EIN# needs to be retired and all current timesheets are paid under the that EoR before switching. There are two entities involved (IRS and IDES) with activating employers, there may be additional information needed or a pre-existing EIN# not eligible to be used for domestic workers.

I'm wondering if this back-up plan is also required if someone utilizes agency-based DSPs? The agency would be responsible for having backup staff available. We recommend you work with your PSW agency and ISC to develop a plan for when the agency is unable to provide backup PSWs.

The backup plan will affect the unit rate and approved monthly hours if an employer does not know when a backup person will be needed. How is this being handled? Access will not do separate service authorizations. If a backup plan is utilized, it's because the regular PSW didn't show up to provide services. The backup PSW is replacing the normal PSW. Because of this, the use of a backup PSW shouldn't affect the unit rate or approved monthly hours. Additionally, the EoR should be aware of backup PSW hours since they would have to approve the timesheet. If an EoR decides to add an additional worker on the service authorization, that individual would need to enroll as a PSW. If the new PSW (Back Up PSW) and EoR agree to the same pay rate as the existing worker, the unit rate will remain the same. The employer is responsible for PSW schedules and ensuring they stay within budget for Personal Support Worker services.

When are the Back Up Plan Forms Due? And Who do we send them do? What is the plan to roll this out to existing agency based PSWs? The ISCs are required to complete the forms upon the development of the Personal Plan. The Back Up Plan should be provided to any provider agency who is identified in the plan, a copy kept in the individual's file at the ISC, and a copy kept by the individual at their home. A copy can be provided to the SDA, if applicable.

Should the ISC include it with the personal plan given to the SDA? The Back Up Plan can be shared with the SDA. It likely makes sense to do so.

Does this need to be submitting as part of the funding request I'm assuming this question is relating to the Back Up Plan. No, the Back Up Plan is required as part of the Personal Plan.

DO we start these now, or wait until the PP comes due? The ISCs will complete these as the PP becomes due. By the end of Fiscal Year (FY) 2023, everyone who requires a Back Up Plan should have one completed.

There is a concern that there is no Back-Up plan required for those in Family CILA that face the same dilemma. Back up staff is part of the rate paid to Host Family CILA providers, so they are responsible for providing these services. Anyone is welcome to use the Individualized Back Up Plan form, but it's not required to be completed by Host Family CILA providers at this time.

Will the backup employer be able make changes? A back up EOR wouldn't be able to make any permanent changes. Their purpose is to make sure the individual served is able to receive services during a time when there's a temporary service interruption.

I'm wondering if this back-up plan is also required if someone utilizes agency-based DSPs? The agency would be responsible for having backup staff available. We recommend you work with your PSW agency and ISC to develop a plan for when the agency is unable to provide backup PSWs.

Is this a July 1 implementation? For those individuals who have already completed their annual Personal Plan in July, do ISC's need to retroactively complete the back-up plan for those plans? Back Up Plans are required to be completed as part of the person-centered planning process for Fiscal Year (FY) 23 (July 2022 – June 2023). Therefore, if a PP was completed in July and the Back Up Plan wasn't completed, the ISC will have to go back and complete the Back Up Plan. This could be completed during one of the quarterly monitoring visits.

Will acceptance of Children's waiver (currently age 16) automatically transition into adult services (at same or better support level) at age 18? No. Individuals are not automatically moved from the Children's Waiver to the Adult Waiver.

If you got the Children's waiver but your son is 20, can I get the adult waiver? No. Your child will either need to utilize services available through the children's selection (until their level of need changes), or wait to be selected from the adult waiver PUNS selection.

Will there be adult waiver letters be sent out as well as children's waiver? The Adult PUNS letters were sent out to selected individuals on July 11, 2022 and new selections are expected to occur every summer going forward.

What are the differences between the Children's and Adult besides the PSW option for parents? This question was answered during the presentation. Please refer to the video.

Some folks have been told by their ISC that their family member needs to finish transition services at school (or accept their high school diploma) before they can switch to the adult waiver. How should they respond to their ISC? If in a Children's Waiver, an individual is allowed to transition to the Adult Waiver upon their 18<sup>th</sup> birthday. The individual/family should work with their ISC to develop a plan for transitioning from one waiver to the other prior to their 18<sup>th</sup> birthday. If remaining with Home Based Services, the individual's budget will remain at 2x SSI in the Adult Waiver until they leave the Special Education system.

Why would someone not want the children's waiver if the child is under the age of 16? Individual's and/or their families may have different reasons for why they would choose not to enter services at this time.

We can't have a productive discussion with our ISC about increased need for added services if our young adult has never been on a waiver (age 18). However, the difference of the parent being allowed to be a PSW (Children's vs Adult) is a very important need for many individuals. Productive conversation seems vague and lends itself to not having consistency between the ISC's. If you received a PUNS selection letter for the Children's Waiver, your only option initially is to enter Children's Support Waiver services. Upon entry to the Children's Waiver, you will have discussions with the ISC as part of the Person-Centered Planning process.

If the child reaches 18 and has received the Children's waiver but they do not continue on receiving services in the public school system and choose to go on into CDS wouldn't that then automatically have to be converted to Adult Waiver? There isn't an automatic transition from the Children's Waiver to the Adult Waiver. You must request this through your ISC. CDS services aren't available in the Children's Waiver, so this isn't a service option for anyone in those waivers. You would have to transition to the Adult Waiver in order to receive these services.

Can someone in the Children's Waiver use the dollars for CDS? No. CDS isn't a service option in the Children's Waivers.

Will a child be able to use their funding for CDS when they are out of school for summers or during school breaks? No. CDS and other day programs aren't service options in the Children's Waivers.

If the individual only has an SDA who is now responsible for the Implementation Strategy? Last I heard the provider no longer had to complete an IS. I don't know who the "provider" is in this question. I need more information to properly answer.

I ask because my son will be 22 in September. Not sure what kind of letter my son would receive after 22. I don't know which previous question this one is referring to.

What if a family continues to follow Covid safety protocols and are not willing to have non immediate family members enter their private residence how is this new mandatory 4 in person visits by ISC going to be handled? This is a difficult situation to respond to because we want the health and safety of the individual to be taken into account, but we also have a requirement to ensure the person is receiving the services identified in the Personal Plan and ensure the person is living in safe and healthy environment. There's also a concern the individual receiving services is being isolated from the broader community during this time. There are COVID safety protocols that allow a person to go into the community or allow for in person meetings that would keep all participating individuals safe. We recommend you work with the ISC to determine what your concerns are so they can be addressed as thoroughly as possible to allow an in person meeting.

Are ISCs able to instruct the families that the 4 mandatory visits will occur by phone or zoom and not in the family home, if the ISC chooses so? Or is it still up to the individual families to decide whether they feel comfortable or uncomfortable having people in their homes due to the ongoing pandemic? This question was answered during the presentation so please refer to the presentation for a more thorough response. Please refer to the most recent Information Bulletin posted on this subject: <u>IDHS: UPDATED - V.3</u> - ISC Remote Monitoring Activities (state.il.us).

Can the individual selected for Children's HBW utilize a Ligas Hold status for 2 years, if they are not ready, as is possible in the Adult Waiver? No. Ligas hold will not be available to those who received the Children's selection letter.

If I understand correctly, I have a 19 yr. old that was on the Children's PUNS pull. She is living in an ICF/DD so this pull would not be beneficial to her because she cannot use it to move to a CILA? Correct. The Children's PUNS selection was for HBS services only.

Will DDD start requiring electronic reporting from PSWs as DRS is already doing? Electronic Visit Verification (EVV) is going to be required for PSW services in the future. The EVV vendor is currently being selected and the contract finalized. Once this is completed, the Division will be sharing information with the community.

In the "new" CSW agreement from July 1, does it include plans for continued PUNS selections for children, or are future children's selections based on appropriations? Language in the Waiver indicates entry will be through PUNS selections as appropriations are available. There aren't any guarantees for future PUNS selections for the Children's Support Waiver at this time.

Are Providers also required to have a backup plan since they bill the home-based waiver for services and there is a major issue here with the disruption in services and staff at these programs which greatly impacts the individuals being served. Provider agencies should have policies in place for when a staff member doesn't come in to work on a day they're scheduled.

How does this work for underaged clients where their parents can't be PSW and there are nobody else to do that? The Children's Support Waiver doesn't allow for parent's to be their PSW. A person could work with a PSW Agency to hire PSWs or work with an SDA to assist in finding qualified PSWs.

Does the backup plan apply to family model and agency model PSWs? Is this form in addition to the backup plan included in the Implementation Strategy for agency model PSWs? I don't know what the "family model" being referenced is. Agency based PSWs should have a backup plan in place for when the PSW providing services through their agency doesn't show up for work. The individual can work with the PSW agency and ISC to ensure there's a plan in place should the agency's back up plan not happen.

For individuals not yet in waiver services completing an initial personal plan in PAS, how is the backup plan accomplished? What if the family is not yet aware of how they will accomplish the backup plan since they are in the stage of just determining the types of services interested in? If the person isn't receiving waiver services, there's no need to have a Back Up Plan. Waiver services can't be started until a Personal Plan has been developed and the needed/desired services identified. It's during this initial PP development that a Back Up Plan would be developed.

How does this work for those in PAS, not yet receiving services? Previously answered.

Getting a new Employer of record enrolled with Aces\$ has typically taken 1-2 months.. what happens when the current EOR dies and the PSW services cannot be authorized until the new EOR is in place?? Previously answered.

Does the back-up plan need to be re-done annually? Or if it's done once and nothing changes, can it just remain on file? The Back Up Plan should be revisited at least once a year during the Person-Centered Planning process to ensure the plan is still accurate.

Can a PSW for an AHBS Waiver consumer who has been actively working throughout an Employer switch submit timesheets within the last 90 days? In this situation, the current Employer on file is deceased and the individual applying to be the new Employer is currently in the enrollment process. There is a gap between Employer's, but the PSW has continued to provide everyday care to the consumer. The PSW is the mother of the consumer (single parent and sole natural support to the consumer currently). Please work with ACES\$ to resolve this situation. If the new EoR's enrollment process takes more than 3 months to complete, ACES\$ can submit a request to the Division to bill beyond the 3-month requirement. These requests are reviewed individually and only approved based on emergency situations. In cases of death of an employer, the last timesheet can be paid out. The New employer date is based on the SS-4 which can be dated the day after the EOR passed away. The worker payments will be delayed; however, there will not be a gap or missing pay. If it takes more than 6 weeks for the transfer, please contact ACES\$.

This is the first I am hearing that the children's waver is 4x the SSI and can be rolled over. (think she is referring to flexibility in children wavier) Can someone tell me more about this before I make my decision? My son has gotten the puns child waiver since not 22 yet and still in a program. I am confused now. Please refer to the HBS Consumer Handbook: IDHS: Consumer Handbook for Home-Based Services (state.il.us)

## Choose the Services that Fit Withing Your HBS Budget

Children's Support Waiver - Children ages 3 to 21 can be in the Children's Support Waiver. If you fall into this category, you have an ANNUAL budget that is 2 times Supplemental Security Income (SSI). For example, effective January 1, 2022, the annual maximum is \$20,184 and the maximum monthly amount is \$1,682. People in the Children's Support Waiver have an option for flexible spending between months. Flexible spending allows you to spend up to 4 times the monthly allotment of SSI in a month. For example, if the average monthly individual allotment is \$1,682 for individuals in the Children's Support Waiver who choose to flex their spending, the monthly maximum would be \$3,364. You can also spend less than 2 times the monthly allotment of SSI in a month. The money that is not used in a month carries over until the end of the calendar year. This means that if you did not spend your full allotment in some earlier months of the year, you can spend more than your monthly allotment in some later months of the year as long as you do not go above the annual spending limit. Said another way, if your spending exceeds your monthly allotment up in some of the early months, you will need to cut back on your spending in later months to meet your annual allotment limit. Money unspent at the end of the calendar year cannot be accessed in the next year.

Adult Home-Based Waiver - Individuals who are at least 18 can be enrolled in the Adult Home-Based Services (AHBS) waiver. They have a monthly budget of 3 times SSI. For example, effective January 1, 2022, the annual maximum is \$30,276 and the maximum monthly amount is \$2,523. Money does not carry over to the following month so it must be used within the month it is allocated. The AHBS waiver does not allow flexible spending. Because it is a monthly budget, money not spent does not carry over to the next calendar year.

Individuals enrolled in the AHBS waiver who are 18 - 21 years old and enrolled in a Special Education program have a monthly budget of 2 times SSI. For example, effective January 1, 2022, the monthly Individual Budget is \$1,682 per month. This money must be used within the month. The AHBS waiver does not allow flexible spending. The money that is not spent, does not carry over to the next month. Because it is a monthly budget, money not spent does not carry over to the next calendar year.

Can parent be PSW and employer at the same time if the family don't know anyone to be their employer especially if the parent is the guardian of their adult with DD/ID who are receiving adult waiver. What can families do in this case? Thank you! No. There is a conflict of interest when the EoR and PSW are the same person, so this isn't allowable. The family can use agency based PSW services to accommodate this issue.

What if the individual has a paranoid/mental illness and will not allow the ISC into the home? The SDA is allowed in the home. That will need to be addressed with the ISC. The waiver requires the visits to be in person so any issue related to the person's developmental disability that doesn't allow for in person visits would need to be worked through with the ISC.

Since the Child Waiver is an annual budget do they follow the 90 day max to recoup funds from ACESS? Yes, the requirement for submitting timesheets within 3 months of the service date is a requirement for all of the DDD waiver services.

How do PSWs get paid if the EOR has an emergency? The EoR is responsible for confirming/approving timesheets submitted by the PSW. There is a period of time an EoR has to approve timesheets to ensure a PSW gets paid.

Last question can the PSW and employer be the same person? No. There is a conflict of interest when the EoR and PSW are the same person.