December 27, 2005

QUALITY ASSURANCE REVIEW

Scope of Review

The on site review for Easter Seals was completed September19-23, 2005 by Lori Wertz and Leslie Howe for the period of April 2004 through September 2005. All areas of service were reviewed: Work/Day services, Supported Living, Supported Employment, and Community Supports. There were 15 folks in the random sample in addition to all of the Community Supports individuals.

General Areas

A. ADMINISTRATIVE

Accreditation

Easter Seals has national accreditation by CARF. Their last CARF survey was completed May 3-5, 2004. Easter Seals received a three-year accreditation and they are scheduled for review again in May 2007. Recommendations from the review included the following:

Section 1 - Business Practices

Criterion 1 -*Input from Persons Served* -no recommendations

Criterion 2 - *Accessibility* - no recommendations. Consultation on monitoring and planning towards eliminating barriers for people they serve was provided.

Criterion 3 - *Information Management and Performance Improvement* - recommend developing a comprehensive written technology plan for security of data. Consultation provided on expanding the types of information gathered about the characteristics of the people served to identify critical factors in predicting success or lack of it and suggestion on sharing their successes with the community.

Criterion 4 - *Rights* - recommend expanding the grievance procedure to include external review and consultation on displaying rights where people who are served usually congregate and referencing that MAP is available at any time in the grievance process.

Criterion 5 - *Health and Safety* - recommend addressing safety practices on a daily basis rather than annually in training (Outsources was cited specifically due to safety concerns in shipping and receiving area). Consultation on evaluating the security of all the entrances to sites with street traffic access and using a standard route form for evacuation plans.

Criterion 6 - *Human Resources* - recommend considering timeliness of evaluations as a significant factor for supervisors when their performance is evaluated.

Criterion 7 -*Leadership* - no recommendations but consultation on adding a phrase in employee conduct policy that conveys the organization's no reprisal policy and maintaining a strong presence in locations that are removed from the central headquarters.

Criterion 8 - *Legal Requirements* - no recommendations or consultations

Criterion 9 - *Financial Planning and Management* - recommend a quarterly review of a representative sample of records be conducted to document that dates of service coincide with billing and bills accurately reflect service provided and to identify corrective action if necessary. Also recommend the risk management plan expand to include fiscal accountability and legal exposure.

Section 2 - Records of Persons Served - no recommendations but consultation on eliminating alternate versions of release of confidential information forms

Section 3 - Individual-Centered Service Planning, Design, and Delivery

Recommend specific entrance criteria be developed and presented in a format that can be understood for each service or program offered. Consultation on better coordination better between vocational and residential objectives and goals allowing for a more holistic plan that consistently addressed the needs and concerns of the individuals served throughout the organization, strengthening the quality of objectives

written (some goals were generic and nonspecific or written in a way that was difficult to track or understand), looking at alternative formats for communicating service plans, establishing procedures should Easter Seals consider serving criminal offenders, and considering integrating information into IPs so it can be easily and clearly identified and consistently utilized.
Section 6 - Standards for Employment Services - there were several recommendations and consultation in the areas of principle standards, employment planning services, employee development services, employment skills training services, organizational employment services, and community employment services.

Agency internal communication systems:
Easter Seals appears to have a good internal communication system despite the size of the agency.

Fiscal (results of A133 audit, referrals to Medicaid Fraud or QAD review, client funds & record keeping).
The Desk Review of the A-133 Audit report was completed on 11/22/04. Results indicate that the audit was acceptable and no instances of noncompliance were reported. No referrals were made to Medicaid Fraud or QAD. A copy of the desk review audit report, and year-end reports for Transportation, Community Supports, Supported Living, and Day program were received August 3 and 23, 2005 and are on file in the Easter Seals contract file in the Developmental Disabilities office.

Significant Events from the agency
Changes in management personnel have taken place since the last review. The direction comes from Billings and a local director is responsible for the Great Falls operations only. This appears to be working well. This change was taking place at the time of the on-site survey.

Policies & administrative (DDP) directives
Easter Seals added an Incident Management Coordinator position with respect to the new state Incident Management Policy and updated their Incident Management Policy to reflect recent changes in Developmental Disabilities Program policy. Unfortunately at the time of the on-site review the Incident Management Coordinator had left her position. Another qualified staff person at Easter Seals was filling in until a decision is made on how to fill that position.

Easter Seals is also participating in the Rates Reimbursement Project in Region II.

Licensing
Easter Seals does not have any licensed group homes. They have a current Department of Labor Certificate on file.

QAOS Sheets
A routine QAOS Sheet was written in the past year concerning an inappropriate response to the medical needs of a consumer that was shared with Quality Life Concepts. This was responded to by the two agencies coming up with a joint policy to follow.
Quality Assurance Observation Sheets from last review included medication errors, incident reporting, Supported Living fire drills, consumer satisfaction surveys, enrollment in DDCPT within 45 days of hire, clients sleeping at day programs, determining time on task, old IP data sheets, safety at an individual's apartment, and IP goals not measurable. All responses were accepted.

Medication Errors
Easter Seals documents medication errors and sends this information in Incident Reports and trends to DDP. In the past year medication errors include staff errors such as meds not given and/or were given late or a pill was found on the floor. The pharmacy was contacted when errors were discovered, and no adverse effects were experienced. It remains important that medication errors continue to be addressed.

Rights Restrictions
Easter Seals has no behavioral programs that use aversive techniques. It appears that Developmental Disabilities Program has approved most rights restrictions. This will be discussed later in the day services section.

Incident Reporting (Trends)
Incident Reports are written when appropriate and routed according to policy. Trends are tracked by Easter Seals and documentation is shared with the Developmental Disabilities Program. Incident Reports were found in consumer files. Easter Seals has been diligent in following/implementing the new Incident Management Policy. They report to Adult Protective Services per the policy. They have hired an Incident Management Coordinator. But did not have a staff person in that position at the time of the on-site review. They remain in compliance with the policy as other trained staff people acted as coordinator. Occasionally incidents are reported late. Occasionally incidents are marked incorrectly. The Incident Management Committee meets weekly to discuss critical incidents. Trends do not appear to be sent monthly to the Quality Improvement Specialist. Easter Seals is striving to follow the ever-changing Incident Management Policy but there remains room for improvement.
Quality Assurance Observation Sheet 1

Criminal Background Checks
No new staff files were reviewed as there were no new staff people hired within the previous 3 months of the review. Files from more seasoned staff had criminal background checks.

Fire Drills
The documentation for fire and other evacuation drills were available in all day service sites. Fire extinguishers are inspected yearly. The fire inspector found no violations at Outsources during the annual inspection.

Appendix I
There are no specific contractual agreements between DDP and Easter Seals requiring staffing ratios due to the new rates project. During on-site visits to the center during the summer months it was noted that several of the rooms were down a staff person due to vacations and vacancies. During the survey all sites had more than adequate staffing.

Easter Seals did Consumer Satisfaction Surveys and those were available to the reviewers.

Staff Satisfaction Surveys for were completed. These are analyzed and used for planning purposes.

Staff interviews were completed in each area of day services as well as Supported Living and Supported Employment. The reviewers also completed consumer interviews. Each individual interviewed indicated that they were satisfied with the services they received and had been made aware of their ability to choose their service provider. In fact two individuals were ports to Easter Seals from another provider. They stated they were happier with the services they received from Easter Seals.

Orientation Training
Easter Seals has an extensive orientation training package, which includes CBT, Confidentiality, Client Rights, Abuse & Neglect Reporting, Abuse Prevention, MANDT, Basic Behavior Principles, Positive Reinforcement, and Instructional Strategies. Easter Seals uses parts of the DDCPT curriculum to supplement the CBT. However, at the time of the on site review there was no official training person on staff. No decision had been made to replace her or not. Therefore, this begs the question how new staff that work in intensive services will be enrolled in training within 30 days of hire. This Quality Improvement Specialist feels that a provider the size of Easter Seals needs a staff trainer in order to meet contractual obligations.
Quality Assurance Observation Sheet 2

Specific Services Reviewed

A. Residential
Accomplishments
Easter Seals' Supported Living program serves 6 clients. The consumers appear happy with the services provided and supports offered are appropriate to the clients' needs. Staff people are enthusiastic about their jobs and have developed good rapport with the folks they serve. Easter Seals has an exemplary Supported Living program that is person-centered. The consumers continue to get quality services and quite possibly more than what the cost plans indicate.
Quality Assurance Observation Sheet A-1

Programmatic Deficiencies
None noted.

i. HEALTH AND SAFETY
Vehicles
Most folks receive transportation from community sources or are transported in company or staff vehicles or by families/friends as far as could be seen.

Consumers
All of the consumers in Supported Living services who were interviewed were satisfied with the services they receive. They lived in their own apartments and liked where they lived. One was instrumental in assisting another individual in getting an apartment in her building. They now provide natural supports to each other.

Medication Safety (psychotropics, training, programs, prns, certification,errors)
Medications were reviewed and no concerns were discovered. Staff people are med certified. Training for independence with medications is taking place when needed. Some individuals have PCA services and get reminders to take their medication, some are independent, and some have Supported Living staff assist them until they reach maximum independence in taking their meds. . IP did not state if she was independent or not. This will be addressed in the service delivery section of this review.

Sites (appearance, evacuation drills, SL apartments, emergency back-up, etc.)
Folks served through Supported Living reside in their own homes or apartments in the community. The apartments/homes we visited were clean and uncluttered. One individual had just done her fall cleaning and her apartment was sparkling when the surveyor arrived. Decorations were individualized. Each person had a calendar of activities of interest to them posted in their homes.

Most of the apartment complexes have their own safety procedures. Easter Seals also does safety drills and documentation of this was found in files. Training was provided if necessary and staff ensured folks in basement or second floor apartments had training on how to exit in an emergency. When interviewed, all folks appeared to know what to do in case of an emergency. Fire extinguishers were present in apartments. Emergency and on call numbers were posted. At the Workforce Development Center there is an emergency logbook for all Supported Living consumers and each client keeps a card in his/her wallet with emergency information on it. This information is available to the on call staff in case of emergency.

ii. SERVICE PLANNING AND DELIVERY

Individual Planning (Assessment, implementation, monitoring)
IP planning was found in files and objectives appeared to be implemented in a timely fashion. Supported Living staff completed assessments and they were found in files. Satisfaction was noted in the IP. Individual preferences were not always addressed in the IP. Some objectives were not always clear or measurable and did not always match long-range goals. This was a company-wide problem.
Quality Assurance Observation Sheet 3

Leisure / Recreation
Consumers interviewed participated in a variety of recreational/leisure activities of their choice. A calendar was posted in each home to alert staff and consumers of scheduled activities in the community and of other appointments. Art classes and Special Olympics were a few preferred activities. Hobbies done at home included painting, puzzles, reading, and games.

Client Rights (restrictions/promotion of rights, grievance procedure)
No rights restrictions were found with Supported Living consumers. Staff people were aware of client rights and review them with the consumers annually for IP meetings. In fact the staff promoted individuals' rights.

Medical / health care
Health care was monitored for the most part by Easter Seals staff. Some consumers had families who were very involved in their care and kept track of medical appointments. Medications and medical appointments were documented and all seemed in order.

Emotionally Responsible Care Giving
This Quality Improvement Specialist witnessed Easter Seals staff demonstrating emotionally responsible care giving. Staff gave support and provided appropriate training for independence. Many choices were given to consumers regarding preferences and plans appeared to be individualized.

Consumer Surveys
The Quality Improvement Specialist completed a few questions from consumer surveys during interviews. Choices were clearly given to folks regarding how they spend their time, with whom, and where. All were happy with their living arrangements. Some had moved to different locations since last review. Easter Seals assisted in finding new housing. Case Managers completed surveys with each client. They were filed with the IP documents. Easter Seals also does a satisfaction survey with their consumers.

Agency's consumer satisfaction surveys (do you? what info? what do you do to address?) (accreditation requirement)
Easter Seals had a file of all surveys they completed this past year with the consumers in a file at the main office.

iii. **STAFFING**

Screening/Hiring
Policies were reviewed and seemed appropriate. A copy of the employee handbook was supplied to the surveyor during the on-site visit.

Orientation/training
Policy was reviewed. Some staff reported they were satisfied with the training they received. They were trained in CBT and CPR/First Aid as well as how to interact with the consumers, safety practices, rights, medications, and other training. Easter Seals keeps documentation of the training attendance and what topic was presented.

Ratios
Ratios are not a concern for Supported Living; services are received according to the cost plan on an individualized basis.

Staff Surveys
The Quality Improvement Specialist completed surveys with Supported Living staff. Questions were answered within guidelines with little or no prompting. Easter Seals also completes staff surveys. They were on file in the main office.

iv. **INCIDENT MANAGEMENT**

APS
Easter Seals has met with APS to discuss reporting issues. There is no documentation of actions have been taken by APS in the past year concerning Easter Seals.

Incident Reporting
This was addressed in the administrative area in a Quality Assurance Observation Sheet. It is worth commenting that the Supported Living staff faithfully report incidents and follow up when necessary.

B. **Work/Day/Community Employment**

Accomplishments
Easter Seals maintains facility based and community employment. Supported Employment staff continues to place clients in the community. Enclave crews continue to work at a couple sites in Great Falls. A "tool box" folder with helpful advice for staff continues to be utilized at the Center. A cleaning checklist for each area of the center is also utilized. Work orders show documentation of the date of the request and the date of completion. Attendance records for transportation and day services are kept at all locations.
All day services areas were observed and reviewed.

The Center
Staff supervision of consumers was appropriate in all the areas at the center during the on-site visit. Individuals were involved in a variety of work and leisure activities. Weekly opportunities are offered for activities in the community. Opportunities to make choices and exercise self-determination were apparent. Staff members were observed assisting individuals with meals

and snacks. A concern still exists about engagement in daily life vs. custodial care for a few of the individuals served, but this area appears to be improved since last review.

Outsources/Mailroom
The Outsources site appeared slightly more organized during visits for this survey. It still appeared crowded and busy. Groups of consumers were engaged in a variety of work and leisure activities throughout the large room. Staff people were assisting/supervising each group. Opportunities for community inclusion continue and documentation was found supporting this. Wages earned were recorded in each consumer's file. The enclave crews were not observed this review period.

Community Access
The individuals are included in community activities 1-2 times per week. Relief staff people are scheduled to assist with outings. This makes it easier and safer for the folks who go on the outings or those who remain behind. Opportunities for choice and self-determination were observed and documentation was also found in files. The size of this group seems much more manageable than the other facilities. It was easier for the surveyor to observe interactions at this site. Daily leisure activities are offered. The staff assisted with snacks, meals and activities.

Programmatic Deficiencies
These were addressed from the previous review and in the administrative section. New deficiencies will be noted in the specific areas where they occurred.

i. HEALTH AND SAFETY
Vehicles
This information can be found in the transportation section.

Consumers
The Quality Improvement Specialist interviewed consumers at all facility sites. All were satisfied with their services.

Medication Safety (psychotropics, training, programs, prns, certification, errors)
Medication documentation was looked at in all day service areas. Medications were stored in locked boxes and staff did triple checks. Only med certified staff assisted with meds. Photos were present in the med books as an added safety measure. was the only individual who did not have a photograph with his med information. Copies for some prescriptions were found in the med books. Some concerns were noted at Outsources. had a med sheet with no month listed on it. ' had a med signed for but the name of the medication was not written on the sheet. It was unclear if this individual got one or two medications. There were some missing initials for witnesses and observers. had a medication in August that appeared to be for short term use but no start date or end date was noted on the med sheet. Some PRN medication protocols could not be found. The 1998 Med Policy was found buried in the middle of the med book at Outsources. Community Access did not have a policy for meds in their book but did have med error procedure. The Center books appeared to be in good order. Some reports have been made to the Quality Improvement Specialist that communication between residential and vocational services regarding PRN medications needs improvement, especially at the Center.
Quality Assurance Observation Sheet 4

Sites (appearance, evacuation drills, SL apartments, emergency back-up, etc.)
The day services areas were clean/sanitary and uncluttered. Evacuation routes were reviewed. Egress was good. Fire extinguishers were in or near each area of day services. Monthly safety drills were on file in the office and were looked at for frequency. In case of emergency, the day service used codes for back up for different situations such as emergency medical personnel called.

Daily walk throughs in each area were completed and documented. Safety remains a priority.

Supplies seemed to be adequate and most were locked up for safety. The supply closet in the State Room was found to be unlocked but was immediately locked again after showing the surveyor the closet. All areas had MSDS books in accordance with OSHA requirements. Outsources had no paper towel in the second bathroom. It was found in an unlocked cabinet outside the bathroom. There was a strong odor in the first bathroom at Outsources and this was mentioned to the staff to be followed up. Cleaning supplies were in locked cabinets in all other locations.

The sink in the kitchen area of Community Access had the hot and cold knobs reversed. This was a safety concern for the surveyor as someone could try to get a drink of water thinking it was cold water and possibly get burned. It is a rule that no one is in the kitchen unattended. The Quality Improvement Specialist witnessed this firsthand. This should be adequate for the needs of those served at that site. The hot water temp was under 120 degrees.

Fire extinguisher at Workforce Development Center was due to be checked by the end of the month. Other areas had current fire extinguishers. Inspections were completed with favorable results. Documentation was found on site.

ii. **SERVICE PLANNING AND DELIVERY**
Individual Planning (Assessment, implementation, monitoring)
IP plans were reviewed for all the sampled folks. Files had IP packets in them and staff had access to them. Assessments were completed by Easter Seals staff and placed in files. It was difficult to find information on current objective data at Outsources. Data sheets were generic and difficult to follow how data was being recorded for different objectives. At Community Access when reviewing program files, the reviewer found one consumer that appeared to have an old IP but the new one had not been filed yet. It was filed before the reviewer left the building once it was brought to the attention of the staff. At the Center no data was found for 's paid work objective.

Day staff members appear to be trained in specific protocols for consumers. Some objectives require review and sign off on a quarterly basis. Wages and attendance were tracked for all folks at the various sites.

Leisure / Recreation
All the day program sites offered leisure and recreational activities to the consumers both on site and in the community. Participation was documented in each individual's chart. The book for outings in the Garden Room at the Center was missing.

Community activities included parks, the mall, and 1:1 outings. Staff reported most outings occur when the weather is warmer. There was no guarantee

outings are done on a weekly basis due to weather, staffing ratios, and van availability.

Client Rights (restrictions/promotion of rights, grievance procedure)
Documentation that rights are reviewed with consumers each year prior to his/her IP meeting was found in files. Rights appeared to be promoted by staff. It appeared at the Center had a rights restriction for fluids but no documentation of a Rights Restriction was found. Fluid intake was being monitored.

Medical / health care
Medical and health care was usually handled by residential staff. Files had emergency contacts available. Med certified staff administered medications prescribed for administration during the workday. Communication takes place with residential service providers concerning health issues but this could continue to be improved. Issues still crop up with Easter Seals waiting for residential provider to come and get folks to get medical attention during the day or family responding rather than Easter Seals staff if someone on one of the crews goes to the hospital. Easter Seals is responsible for the heath and safety of the individuals they serve while they are participating in their day programs.

Emotionally Responsible Care Giving
Personal observations of their interaction with the consumers by Quality Improvement Specialist showed that the staff in Day services and Supported Employment practiced emotionally responsible care giving. This was also evidenced by and the answers given in staff surveys.

Consumer Surveys
The Supported Employment and Day services consumers were asked questions about their satisfaction with job placements and work services in general. All appeared happy with the services they received and the staff providing it. One was concerned when he would get his new Case Manager.

Agency's consumer satisfaction surveys (do you? what info? what do you do to address?) (accreditation requirement)
Easter Seals had a file of all surveys they completed this past year with the consumers in a file at the main office.

iii. **STAFFING**

Screening/Hiring
Policies were reviewed and seemed appropriate. As mentioned previously, a copy of the employee handbook was supplied to the surveyor during the on-site visit.

Orientation/training
Staff interviewed felt they were trained and oriented adequately. Several said they were not placed with consumers until they felt comfortable. They follow parts of the DDCPT curriculum. Training and attendance are documented at the main office. Other comments can be found in pervious sections on orientation/training. Some staff voiced a concern that their training was incomplete due to the staff training person leaving her position unexpectedly and no one hired to replace her. This was addressed in administrative section as a Quality Assurance Observation Sheet.

Ratios
At the time of the survey, the staff ratios seemed adequate.

Staff Surveys
Surveys were successfully completed with staff from each area. Results are noted previously in this document.

iv. INCIDENT MANAGEMENT
APS
Incident Reporting
Incident Reports were in files. Incident Reports are written when appropriate and routed according to policy. Trends are tracked by Easter Seals and documentation is shared with the Developmental Disabilities Program. APS referrals were made when appropriate and staff persons were aware of Easter Seals' and the Developmental Disabilities Program's policies. See more comments in administrative section.

C. Community Supports
Accomplishments
Community Supports with Easter continues to be a well-received, consumer driven program. The program has grown to 11 consumers this year with some ports from another provider as well as other exchanges to better meet existing consumer needs. The Community Supports program offers a variety of services from recreational and leisure types of activities, to individual educational programs, to habilitation programs such as cooking, to traditional day program services. Consumers and their families are very pleased with the program and have cited specifically that the overall stability of staff is one of its greatest benefits. This reviewer is unaware of any concerns or complaints expressed on or behalf of any of the consumers served this past year, despite some of the very difficult family and interpersonal dynamics of the individuals served.

Review was completed on all 11 consumers (one general fund, ten waiver) in this program. File review of the CSS agreement, the IP document and information gathered over the course of the last year were considered. Consumer surveys were available for all consumers. It was noted for Case Management review that two different types of consumer surveys were being used. While the surveys were similar, they were not inclusive and a recommendation was made to make these consistent. It was also noted that one consumer did not have a 30 day IP on file when she exchanged services This was apparently an oversight due to Case Management turnover.

This young lady receives Supported Living services in the form of budgeting, meal preparation and housekeeping. This past year has been a very difficult one for her and her staff and it is noted that the ES staff spend in access of the 300 hours allotted to her under the CS plan. Family, staff and the IP team have all provided a significant amount of emotional support to Tina in addition to the more practical aspects of ensuring her environmental and safety needs were met. She and her significant other (also receiving CSS through Easter Seal) have had a tumultuous year with allegations of domestic abuse and reconciliations. Additionally, she accused another consumer in the city of rape—an allegation that was determined false and had no charges filed. Although she moved away from her domestic partner, the two remained in contact and recently, she notified her IP of their intentions to move back in together despite the concerns clearly noted by her support systems. The Team has clearly documented available counseling and other options that were made available to this young lady as well. The consumer survey clearly indicates that

she is afraid when her partner drinks and gets mean and yet it is clearly understood that she has consistently refused to participate in any counseling services (even when he does participate). It is suggested that the Team explore options that could include a mental health trainer (this could be paid under state plan Medicaid) who could spend time in the apartment with this couple to teach better ways of interaction and maybe even some self-esteem or self advocacy kinds of training. Maybe an onsite visitor would be easier for her to accept. In any event, the concern is that we have identified issues in this relationship that may result in health and safety needs being unmet due to the choices these two folks are making. It would seem that any additional support to remediate those concerns or to exhaust any options that might assist this young lady in keeping herself safe should be explored. Please note, the frustration felt by this Team in trying to balance this couples choices against the health and safety concerns is dually felt and understood by this reviewer. It is also understood that in the absence of waiver services, the risk for this individual is even greater.

lives with her father and exchanged her traditional day program service in order to access community supports. As a result of this change, the agency has had much more flexibility in meeting her needs which include assistance with medication/medical appointments and necessities such as being able to get her hair cut. These services are provided in addition to her attendance in the work activity program two days per week. Her consumer survey indicates that she is very pleased with the services she is getting, and that they are meeting her very specific needs. Additionally, it is easy to tell the effect the. services are having—she indicated in her last IP that she would like to go to school to become a dispatcher. With the confidence she is gaining, maybe there is some supported work in her future!

ı lives in an apartment with his significant other and receives 300 hours per year of support in the form of budgeting, meal preparation and housekeeping. As noted with his partner, the agency spends much more unpaid time with him due to concerns regarding his relationship and allegations of domestic abuse. He is actively participating in counseling. Additionally, some of the decisions he makes regarding gadget purchases (electronics, cell phones, etc...) have put him at risk financially in the past, but it is noted that he has made great progress this past year on his debts with specific notation in his IP that he has worked hard to pay these down. As noted above with his partner, the Team has documented concerns about how this couple interacts and the choices they make with regard to each other.

receives day services and transportation in the form of attending the "Bridges" program through Easter Seals. The program is beneficial to this gentleman and his family by providing social opportunities for him while providing his family respite during the day. His consumer survey also indicates that he and his family are very pleased with the services provided.

has an open cost plan to attend the Bridges program at Easter Seal. Unfortunately, he suffered a stroke in June and since his hospitalization for that, his family is seeking nursing facility placement. He is currently on extended convalescence as it is not clear that he requires nursing home level of care based on his PASARR. His skills and abilities have shown good recovery and the doctor has not yet stated he requires anything more than general supervision and assistance. The agency is to be commended for holding his waiver slot until it is determined that he is either has skilled nursing needs that

require his placement in an NF, or that his support needs in his home might change as a result of his illness.

,: , S receives supported work for his job at St Vincent's, as well as social/leisure, educational and health maintenance services under Community Supports, general fund. He has a supportive family as well an advocate who assist him in meeting his needs. He attends sporting events, has a housekeeper, gets computer education services and attends cooking classes. He gets valuable assistance with his menus, shopping and in working out in a local spa to help achieve optimum health. He also purchases on call services through his CS plan so that someone can respond to him 24/7 in the event of an emergency. He lives on his own and is an able advocate for himself. He uses public transportation independently but likes the company of his staff as well. His survey indicates a strong support system, both paid and non-paid. He is very satisfied with the services he receives from Easter Seals.

had two categories of service in her CS agreement--one for supported work and one for Education. At her IP on 9/15, the categories were merged, dropping supported work and allowing her to put more effort into her reading programs. It is noted that she has increased her reading skills this last year from a pre-kindergarten level to nearly grade 2! This is obviously a very important goal for her and her satisfaction survey equally indicates that she is happy with the services that have helped her get there.

' receives social/leisure as well as day hab services under CS. There are clear objectives related to her needs in those funding categories, and as she simply stated in her survey "Its fine to me!"

lives at home with her family and buys an intensive day program with transportation through CS. Since she has extreme deficits in communication and self-help, her mom is her guardian and advocate. She indicates that she is very happy with the services provided, and it is also noted that she would benefit from full services (residential and day) in the future.

also exchanged a full day service with community supports this last year due to deteriorating health issues. As a result, she has a mixed plan which includes some day program attendance (as she is able and in order for her to maintain contact with her friends) as well as 300 hours of recreational and leisure activities. Her file is missing the 30 day IP from her transition to CS services and her consumer survey was based on her last IP while she was receiving traditional day program services. By all accounts, the CS program is meeting her needs much better than the traditional services. Staff note that she makes choices about her participation (got off the van to look at ducks but was cold and returned to the van) and that she tires easily in the afternoons.

Over the past several years, had been provided services by a different agency. They noted many complaints about services such as staff not showing up as scheduled, conflicts with specific staff persons, and a general inability to access services. Since the switch to this provider, those concerns have evaporated and ; can access 300 hours of cooking, art and other classes that are of interest and enjoyment to her. She and her family are very pleased with services provided by Easter Seal.

As previously mentioned, Easter Seal staff have worked very hard to create a consumer driven community supports program. Throughout the year, they have identified people who would be better served in this model and have actively

pursued those transitions to the betterment of those involved. Additionally, it need to be noted that the agency has maintained a 9-10% administrative fee—which ensures the most dollars are going to direct services. Keep up the good work! See Quality Assurance Observation Sheet A-1.

D. Transportation

Maintenance logs, insurance cards, and other transportation issues are available upon request. The only transportation contract provided by Easter Seals is for the janitorial and enclave folks and Supported Living folks.

Easter Seals ensures insurance is current and maintenance of company vehicles is done regularly. They contract out the maintenance of the vehicles. Records are kept at the Center. Policies and training are in place for the safe transportation of the individuals served. Training includes safe operation of the lift, accident prevention and safe driving tips. Videos and checklists are used. A copy of Easter Seals driver orientation checklist was provided to Quality Improvement Specialist.

Easter Seals contracts with Hall Transit for most of their transportation needs. They have 2 fourteen-passenger busses and 6 other vehicles in their fleet. Fire extinguishers were present in the vehicles the surveyor looked at. No inspection sticker was present on the new bus.

Accomplishments

Easter Seals obtained a 14-passenger bus with a grant and are using it to give the individuals served more opportunity for community integration.

Programmatic Deficiencies

None noted.

Conclusion

Findings Closed

Findings Open / Plan of Correction