INSTRUCTIONS FOR THE QIS

These data sheets are appropriate for an Annual Quality Assurance Review of any and all adult service providers and Children's Group Homes.

There is no attached narrative, so in the comments sections it is imperative that bulleted information be included.

On each particular data worksheet, be sure to include narrative/bullets which explain deficiencies or commendations

Use appropriate scoring key listed at the top of each page ~ be consistent with the CODE you use.
for example - if using "+" for yes, use "+" on all sheets -or- if using "X" for yes, use "X" on all sheets…

SPECIFICS for WORKSHEETS

Please indicate in COLUMN M if there is a corresponding QAOS for narrative information included in each section

Refer to Appendix G in the Quality Assurance Process for more specifics of what to include

Adult Services Outline p1 - 3

Staff Training 1 & 2

IP Checklist

PSP Review

Add extra sheets as necessary, review the PSP, Actions, Protocols, Staff support provided, etc.

Residential Sites

Transportation

Staff Survey Pages 1 - 3
Ask one staff from each area one questions from each topic area. If they answer incorrectly, as a second question from that topic. If they still answer incorrectly, move on to the next topic area.

Refer to Appendix I in the Quality Assurance Process for specific questionnaire

Consumer survey 1
THIS SURVEY IS FOR CONSUMERS

USE this survey for consumers who can answer for themselves
Refer to Appendix J in the Quality Assurance Process for specific questionnaire

Consumer Support Survey 2
THIS SURVEY IS FOR CAREGIVERS

USE this survey to talk with caregivers when the consumer cannot answer for him/herself
Refer to Appendix J in the Quality Assurance Process for specific questionnaire

Agency Name:	**Living Life**
Evaluator(s):	**Chris Kleinsasser**
Dates Covered by Review:	**July 2008 through August 2009**

DESK REVIEW *** QAOS = Quality Assurance Observation Sheet**

	insert * QAOS #
Accreditation: Accreditation is no longer required by the state contract.	
Significant Events from the Agency: This review includes information gathered throughout the time period of July 2008 through August 2009. Through this evaluation Quality Observation Sheets (QAOS) will be used to identify areas of service commendation, or service areas that require improvement and need prompt attention. Throughout the review there will also be suggestions and recommendations made to the provider. Living Life (LL), is a for profit Limited Liability Partnership, LLP that has been in operation for about 3 years. Living Life started serving several Supported Living (SL) base rate consumers and one Community Supports (CS) individual. LL currently serves 13 consumers, 6 who have moved into the community from MDC. Living Life currently employs 23 staff. They provide Supported Living, Transportation and Community Supports Services. This corporation is funded with Medicaid Title XIX dollars with the exception of three consumers served with General Fund monies. LL has hired JCCS to manage their business finances starting 9/1/09. DPHHS auditors have performed agreed upon procedures for the calendar year ending 12/2008. This is LL first experience with the auditors since the inception of their business. It was reported to LL owner, KD recently (8/09) that staff may be inappropriately using company credit cards. LL's response was immediate and follow up revealed no basis to the accusation. In 11/08 it was discovered that a staff person was stealing money from six consumers. LL's response was immediate and consumers were reimbursed. See GQOAS. LL is very good at assisting consumers in applying for LIEAP, food stamps, HUDD, etc. As a result, consumers who live on tight budgets have been able to purchase things they could use and or enjoy without financial burden. See GQAOS. Consumers indicate that they are happy in their homes, like the services they receive, and feel their needs are being met. One consumer who moved from MDC volunteers in a nursing home. Consumers participate in Special Olympics, camp, bowl, go to the gym, library, shopping, out to eat, fishing, star gazing, a trip to Glacier, etc. A consumer who never wanted to leave her home is now going on short jaunts into the community is proud of herself and enjoys it. Consumers stated through the year, and at the time of the review, that they like their staff and they help them get what they need. The homes are neat and clean and the consumers rooms are nicely decorated to their liking. Consumers visited were proud of their homes and were eager to show their rooms and	comflup1 comaccs2

their belongings. They showed me their collections of cars, movies, computer (and what it does), pictures on their walls, their special bedding, etc. Interactions witnessed between staff and consumers throughout the year and on the on-site visit were positive. However, there is concern regarding some of the consumers hanging needlessly on staff and kissing them on the cheek with no redirection from staff (noted during two visits). The individual who receives CS has also indicated that he is happy with services through LL. Staff helped him get his drivers license and are currently helping him prepare to attend VoTech starting in January. GG wants to live on his own someday (currently lives with family) and LL assists him with tasks to be more independent. It is evident through Living Life's practices and feedback from service recipients that LL is dedicated and committed to providing quality services to consumers served. When a issue is identified LL will take the necessary steps to rectify/improve the situation. See appendix A email attachment- LL comments over the past years events. Appendix A 809qa.	AppA
Agency Internal Communications Systems: Weekly staff meetings at both the men's and women's home, and for base rate consumers served. Cell phones to communicate with staff and consumers. Management staff in each location have laptops with email access. LL On- call (ERS) 24/7 has one phone 590-5075 that is rotated among management staff.	
Policies and Administrative (DDP) Directives LL is working with the DPHHS auditors to put financial policies and procedures in place.	

Agency:	**Living Life**
Evaluator(s):	**Chris Kleinsasser**
Dates Covered by Review:	**July 2008 through August 2009**

DESK REVIEW	**insert QAOS #**
Fiscal (audits, cost plans, invoices): LL is a for profit corporation who is required to follow fiscal contracting requirements set forth by the Developmental Disabilities Program. LL is payee to several consumers and report expenses and income to Social Security for these individuals as required. DPHHS auditors are currently working with LL on follow-up of performance of Agreed Upon Procedures. This is the first financial audit LL has had since they've been in business and they are working to put systems in place to ensure sound financial practices and accountability. See DPHHS auditors Executive Summary Report issued May 28, 2009 for more detailed information. Follow-up between LL and auditors continues, to date. Living Life has hired JCCS accounting firm to do their bookkeeping and to make recommendation and suggestions as appropriate. JCCS will start 9/1/09. Six consumers had money stolen from them by a staff person in 11/08. LL was quick to revisit and secure their policies and procedures on consumer funds. LL reimbursed the consumers and the employee no longer works there.	
Licensing (for Group Homes, Adult Foster sites and Assisted Living sites): Not applicable. Living Life provides Supported Living and Community Supports services only.	

Agency:	**Living Life**
Evaluator(s):	**Chris Kleinsasser**
Dates Covered by Review:	**July 2008 through August 2009**

DESK REVIEW	**insert QAOS #**
Quality Assurance Observation Sheets: (trends from past year) QAOS 11/21/2008 - A former employee took money from six consumers. GQAOS 12/31/2008 - Consumers are encouraged and given assistance with hygiene. Consumers are clean and neatly dressed.	
Medication Errors: (trends from past year) Trends noted: 23 medication refusal- 22 for one consumer- addressed in interaction/intervention protocol. 60 prn's given- 3 people have prn scripts and IR's are written each time one is given 15 missed meds staff error- 13 were with one consumer- LL counts this particular medication daily in an effort to eliminate these med errors from happening again. 2 pharmacy errors	
Incident Management: (Incident Management Committees - IMCs & trend reports, summary trends, steps to address trends, and investigation summaries) The incident management (IM) team meets weekly. Although there is improvement, LL staff continue to have difficulties when writing IR's by not providing adequate detailed information. **Recommendation:** Living Life needs to assign one staff person (if not owner) to be the IM Coordinator to follow-up with IM policy/procedure and concerns as they arise. LL has already started using Therap, DDP's web based Incident Management System. QIS has had to bring a lot of these concerns repeatedly to the provider. LL needs to make every attempt to have their own internal monitoring system operational. DDP and LL were unable to print the past years compilation of IM data trends. The system failed and omitted information here and there. Month to month information is available with IM notes describing incidents, noting trends and follow-up. This was not fault of LL.	

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Dates Covered by Review:	**July 2008 through August 2009**

KEY **(mark "+" or "X" if present, "-" or "no" if not)**

Staff Related:

insert QAOS #

Evidence Found of Orientation Training Use three to five staff ~ new hires

staff initials	MH	KB	SB	DM	MS
+ or X / - or no	X	X	no	X	X

Note where evidence found:
Employee files

Evidence Found DDCPT or equivalent: For intensive staffing only - LOC for Waiver indicates Intensive determination

staff initials	MH	KB	SB	DM	MS				
consumer initials									
+ or X / - or no	MANDT	MANDT	MANDT	MANDT	MANDT				

Note where evidence found:
Employee files- College fo Direct Support services training.

Evidence of Criminal Background Checks: Use three to five staff ~ new hires

staff initials	MH	KB	SB	DM	MS
yes/no	yes	yes	yes	yes	yes

Note where evidence found: **Employee files**
personnel files, staff training records, agency employment application

Evidence of Staff Survey: **Interview at least one staff per site visited, no less than 5 staff**

staff initials	MH	KB	SB	DM	MS				
+ or X / - or no	X	X	X	X	X				

Note where evidence found: **Employee files**

Agency: **Living Life** **9/3/2009**
Evaluator(s): **Chris Kleinsasser**
Dates Covered by Review: **July 2008 through August 2009** **KEY** **(mark "+" or "X" if present, "-" or "no" if not)**

insert QAOS #

Staff Related:

Evidence Found of Staff Training:

staff initials	MH	KB	SB	DM	MS		
1st aid/CPR	X	X	X	X	X		
Abuse Prevention	X	X	X	X	X		
Client Rights	X	X	X	X	X		
Incident Reporting	X	X	no	X	X		
Confidentiality	X	X	X	X	X		
IP/PSP Process	X	X	X	X	X		
CDS* complete w/in 6 months of hire date?	X	X	no	X	X		
Medication Cert	no	X	X	X	X		

Note where evidence found:

Personnel files. CDS shows SB only completed 14/15 lessons in the first 6 months.

* CDS = College of Direct Supports

Comments:

There is no documentation in SB's file to indicate that he has had incident report training. SB does write IR's.

Suggestion: Review all personell files to ensure orienta ation training has been completed and signed off on.

Agency: Living Life
Evaluator(s): Chris Kleinsasser
Dates Covered by Review: July 2008 through August 2009

KEY (mark "+" or "X" if present, "-" or "no" if not)

IP Checklist:		Note Site Reviewed: SL	SL	SL	SL	Add sites as needed: SL	CS			insert QAOS #
	Consumer Initials	DH	CL	LC	SD	GM	GG			
Onsite	Consumer/Family Survey	no	X	X	X	X	X			
	PSP/IP Available to all Staff	**no**	**X**	**X**	**X**	**X**	**incomplete**			
	IPP/Actions Implemented	X	X	X	X	X	X			
	Data for IPP/Actions	X	X	X	X	X	X			
	Data Internally Monitored	X	X	X	X	X	X			
	Self Medication Objective	na	na	no	X	X	na			
	Consumer informed of grievance procedure	X	X	X	X	X	X			
	SL consumer choice of SL staff	X	X	X	X	X	X			
	Rights Restrictions	**no**	**no**	X	**no**	**no**	**no**			
** CM Input	PSP/IP Checklist									
	PSP/IP completed Annually?	X	X	X	X	X	X			
	Individual Needs Addressed?	X	X	X	X	X	X			
	Assessment Based?	X	X	X	X	X	X			
	Quarterly Reports?	X	X	X	X	X	X			
	Incident Reports Addressed?	X	X	X	X	X	X			
	Behavioral Supports Addressed?	if needed	if needed	X	X	X	na			
	Functional Analysis Needed?	na	na	if needed	if needed	if needed	na			
	Free from Aversive Procedures?	X	X	X	X	X	X			

Comments: (regarding service planning and delivery)

Consumer inventories were completed, but some were missing dates. GM and CL's inventories did not have their names on them. CL's assessments (vulnerability & PLS) had no dates. GM sodium and boundary protocol not dated. See qaos. **dtsnms3**

DH did not have his current PSP in his working file and GG had missing components (actions missing) from his PSP. However there were data sheets available. See qaos. **mispsp4**

GM is volunteering at a nursing home in town and really likes it. He is a consumer who moved here from MDC in the past year.

Recommendation: LL should strive towards professional standards in written correspondence and service documents. Addresses, wrong consumer names on documents written for others.

Agency: Living Life
Evaluator(s): Chris Kleinsasser
Dates Covered by Review: July 2008 through August 2009

KEY (mark "+" or "X" if present, "-" or "no" if not)

Residential Site Checklist:		Make note of site reviewed SL	SL	CS	SL	SL			insert QAOS #
	Site Name	Men	Women	GG	DH	CL			
Health Safety	Bathing procedures posted	na	na	na	na	na			
	Clean/Sanitary Environment	**X**	**X**	**X**	**okay**	**X**			
	Egress	X	X	X	X	X			
	Hot Water Temps	X	X	na	na	na			
	Emergency Assistance	X	X	X	X	X			
	Fire Extinguishers/smoke Detectors	above bdrm doors		X					
	1st Aid/CPR Supplies Accessible/Available	**X**	**X**	**family**	**X**	**X**			
	PRN Medications	X	X	na	na	na			
	Medication Procedures	no below	no below	na	na	na			
	Medication Locked Storage	X	X	na	na	na			
	Medication Administration Records	no below	no below	na	na	na			
	Staff Ratios or ICP staffing	no below	X	X	X	X			
	Awake Overnight Staff	X	X	na	na	na			
	Adequate Supplies	X	X	X	X	X			
	Storage of Supplies	X	X	X	X	X			
	Free from aversive procedures?	X	X	X	X	X			
Daily	Weekly integrated activities	X	X	X	X	X			
	House or Site Rules	X	X	X	X	X			
	Opportunities for choice, self determination	X	X	X	X	X			
	Meal Prep, Mealtime	X	X	X	X	X			
	Engagement in Daily Life	X	X	X	X	X			
	Participation in Daily Living Skills	X	X	X	X	X			
	Daily Leisure Opportunities	X	X	X	X	X			
	Staff Trained in Individual Specifics	X	X	X	X	X			

Comments:

Staffing- In the men's home at the time of my first visit (8/11 7:50 AM) there was only one staff working. Supposedly, there were two scheduled, but the second staff was let go the night before leaving one staff until 10:00 AM. There are enough hours between the 3 men to staff 2 for 14 hours a day. GM was grabbing for office and vehicle keys, in a kitchen drawer while I was there and fumbling through his medication box full of medications to show me all the medications he had. There was little or no redirection from staff. GM continued to go through his meds.

On 8/17, I stopped at the house to check the vehicle and SD & GM insisted on showing me the vehicles and they proceeded to do this by taking the car keys from the drawer to show me. They were locking and unlocking the vehicle doors with the remote. Immediately after my 8/11 home visit I called KD to inform her of my concerns with medications and the keys and asked her to take care of it right away. I recommended she personally review everyone's meds and med sheets to ensure all the info is there and also recommended that the office and car keys be locked so that consumers cannot access them. Kim said she would take care of the key issue and planned to switch the consumers to doc-u-dose as they have premade med sheets. She said this would take a bit of time. See QAOS for vehicle safety.	
Medications- Staff opened GM's meds for me to review and GM was in his med box going through his medications. There were lots of distractions between SD and GM. In the men's home medication sheets had dosages on med sheets, but # of tabs to give were missing on med sheets and names of consumers on 2nd and 3rd page med sheets were also missing. Some PRN protocols were not dated and BH had a protocol for Ativan that was not signed by the doctor. For 8/11 6PM meds were signed off by staff and it was 8 AM. In the women's home (discovered with med sheets given to Q) there were 2nd and 3rd page medication data sheets that did not have consumer's names on them.	carkys5
On 8/28, in the morning CO and I revisited the home and the similar issues were noted. There were two staff on duty this time, but GM was in his med box going through his medications, grabbing for office and car keys as well. GM pointed out to the med certified staff that one of his pills was missing from his pill box. BH also asked staff if it was the day that he gets his diarrhea medication? It was. There were 2 medication errors noted while we were there. Pill boxes should not be used with consumers who need supervision and assistance with medications. How do they know what meds have been put in the pill box? We also witnessed that staff did not check to make sure the medications in the preset pill boxes matched up with the medication sheets. See QAOS for medication errors and lack of appropriate medication procedures.	mederrs6
Recommendation: Review DDP Medication Manual with all staff regularly, monitor med passing and do spot check until management staff are comfortable with medication procedure safeguards in place. Training and refresher training should be ongoing. We all know there can be lots of distractions in the home at one time or another. Use a buddy system with medications whenever possible.	
Meds should be given in an area where there are no distractions and the only meds available are the ones that currently need to be dispensed.	
GM and SD were also witnessed inappropriately hanging on and kissed staff on the cheek with no redirection. CO was here 8/27 & 8/28 to work with LL staff on appropriate ways to interact with consumers in services. LL has also attended other trainings by CO and is open to trainings and always participate when they can.	
Recommendation: CO, Transition/behavior intervention specialist is available for consult whenever needed. Management staff do spot checks and model appropriate interaction between staff and consumers as needed.	
Recommendation: *ARM 37.34.713 4a states smoke detectors must be present in each sleeping room and at a point centrally located in the area giving access to each separate sleeping area.* There were smoke alarms in kitchens, hallways and over bedroom doors, but	

Agency: Living Life
Evaluator(s): July 2008 through August 2009
Dates Covered by Review: KEY (mark "+" or "X" if present, "-" or "no" if not)

Residential Site Checklist:

Transportation	Site Name	Tracker	Pathfinder						insert QAOS #
	Driver Orientation Program	X	X						
	Wheelchair tie downs	**na**	**na**						
	Wheelchair Lift	**na**	**na**						
	Driver's Licenses	X	X						
	Emergency Supplies	X	X						
	Fire Extinguisher	X	X						
	Transportation Log	X	X						
	Scheduled Maintenance Program	X	X						
	Training--Staff Doing Maintenance Checks	X	X						
	Procedures for Timely Repairs	X	X						
	MDT* inspection on file (MDT vehicles only)	**na**	na						
	Comments: Vehicles appeared to be in good shape and maintenance records indicate appropriate maintenance follow-up. * MDT = Montana Department of Transportation								

Comments:

Developmental Disabilities Program Adult Service and Children's Group Home Annual Quality Assurance Review

Agency:	**Living Life**		**FOR EACH STAFF:**
Evaluator(s):	**Chris Kleinsasser**		**Ask one question per topic area, if incorrect as a second**
Dates Covered by Review:	**July 2008 through August 2009**		**if still incorrect move on the next topic area.**
		KEY	**(mark "+" or "X" if correct, "-" or "no" if not)**

Staff Survey:

		Staff Initials	MS	KT	JB	CW	RA			insert QAOS #
Abuse	Allegations are reported to? (APS)			X			X			
	Do you notify Supervisor first? (NO)		**X**		**X**					
	Steps to take if abuse is discovered?		no			X				
	Comments:									
rights	Suspect theft of gloves, steps to take?		**X**	**X**			**X**			
	IP/PSP requests Doctors appt				X	X				
	No jacket, -25 consumer wants to leave									
	Review Right's Restriction									
	Comments:									
** bmp **	describe consumer behaviors		X	X			X			
	staff response to behaviors by plan				X					
	list proactive or environmental strategies					X				
	Comments:									
orientation	former employee wants info			X			X			
	what is consumer information?				X					
	training to meet health and safety needs?		X			X				
	emergency evacuation procedures?									
	Comments:									

Comments:

** = Behavior Management Plans

Agency:	**Living Life**		**FOR EACH STAFF:**
Evaluator(s):	**Chris Kleinsasser**		**Ask one question per topic area, if incorrect as a second**
Dates Covered by Review:	**July 2008 through August 2009**		**if still incorrect move on the next topic area.**
		KEY	**(mark "+" or "X" if correct, "-" or "no" if not)**

Staff Survey:

		Staff Initials	MS	KT	JB	CW	RA			insert QAOS #
medications	describe procedure to assist with meds				X		X			
	if med is unavailable?					**X**				
	if gave wrong med?									
	if moving to a new place or gets new med?									
	requirement to assist with meds?									
	describe PRN or OTC* is to be given									
	what constitutes a med error?		X							
	Comments: KT was not med certified at the time of the interview. In the process of taking the test. * OTC = over-the-counter									
** ERC **	steps to avoid power struggles			**X**						
	how to respond to someone who is upset				X					
	what if you start to lose control?		X			X	X			
	Comments: ** = Emotionally Responsible Caregiving									
* incident report *	when do you fill out an incident report?			X						
	notifications for Emergency Room visit?				X					
	consumer to consumer incidents					X				
	who writes the Incident Report?		X				X			
	Comments: * = Incident Reporting and Management									

Agency: **Living Life**
Evaluator(s): **Chris Kleinsasser**
Dates Covered by Review: **July 2008 through August 2009**

FOR EACH STAFF:
Ask one question per topic area, if incorrect as a second if still incorrect move on the next topic area.

KEY **(mark "+" or "X" if correct answer, "-" or "no" if not)**

Staff Survey:

		Staff Initials	MS	KT	JB	CW	RA			insert QAOS #
behaviors	consumer destroying things		X	X						
	staff pinches consumer back				**X**		**X**			
	how do you know a support plan is needed?					X				
	Comments:									
* IP/PSP *	what is IP/PSP based on?			X						
	you have an idea for an objective…..				X					
	why do assessments?					X				
	How do you find out what someone would like to do?		X				X			
	Comments: *** = IP = Individual Plan PSP = Personal Support Plan**									

Comments:

Agency:	**Living Life**
Evaluator(s):	**Chris Kleinsasser**
Dates Covered by Review:	**July 2008 through August 2009**

KEY **(mark "+" or "X" if positive/correct, "-" or "no" if not)**
"-" or "no" indicates need for follow up
and comments in lilac area below

ALL questions are MANDATORY

Consumer Questionnaire by QIS.								**insert QAOS #**
USE THIS FOLKS WHO CAN ANSWER QUESTIONS	Consumer initials	[redacted]						
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)								
consumer	Do you have nice staff at home/work?	yes	yep	yes	LL			
	Is anyone mean to you at home/work?	**no**	**no**	**no**	**no**			
	Do you like where you live/work?	yeah	yep	yeah	yeah			
	Are you ever afraid of anyone?	no	no	no	no-snakes			
	Someone hits/hurts you, who can you tell?	parents	yeah	cop	yes			
	Does anyone talk to you about this?	parents	yeah	you/staff	yes			
	Can you get help when you need it?	**yes**		**yes**	**Jill**			
	from staff?	school		yes	Jill			
	from Case Manager?							
	Can you get your own food/drink?		yeah	yeah				
	Do people come into your house/room without							
	knocking or getting permission?							
	Do staff ever take things from you?			no	no			
	Can you get rides to places you need to go?	own car		yeah	yeah			
	Rides to the places you want to go?	own car		bike	yeah			
	Who is your Case Manager?	Cindy	don't know	don't know	Desiree			
	Does s/he talk to you about waiver services?	yes	yeah	yeah	yeah			
	Does s/he help you get what you need?	yes	yep	think does	yeah			

Comments:

had what looked like a seizure while we were there. He takes seizure meds, but LL staff had never seen him have a seizure. As a result, LL staff took to the ER to get checked out. He has had a history of heart problems. Staff were prompt to follow-up with medical. See gqaos.

is a very trusting person and has given others money. LL staff are always working with to try to help her understand that she needs her money to support her and her child.

QIS failed to ask all the survey questions as instructed above.

GQOAS

Agency: Living Life
Evaluator(s): Chris Kleinsasser
Dates Covered by Review: July 2008 through August 2009

KEY (mark "+" or "X" if positive or correct, "-" or "no" if not)
"-" or "no" indicates need for follow up
and comments in the lilac area below

insert QAOS #

Consumer Questionnaire (used by QIS).
ASK CAREGIVERS IF THE CONSUMER IS UNABLE TO ANSWER QUESTIONS

ALL questions are MANDATORY

Support	Consumer initials							
	Who helps this person and how?	staff	mom/staff					
	Are there some staff/peers they like better?	all	yes					
	Staff/peers they don't like? Why?	all	new					
	Current needs not being met?	no						
	Health and Safety related?	no						
	Who do you talk to about these concerns?	kim						
	Does the person have input to his/her life?	yes	yes					
	If you have concerns, who do you talk to?	kim/cm						
	are they resolved?	yes						
	What are this persons wishes/dreams?		live indep					
	is the plan moving that direction?		yes					
	what would make things better?	out more						
	does this person ever seem afraid?	thunder						
	are you afraid for them?							
	Does this person know how or where to report abuse?	says 911	yes					
	who provided that training?	staff	staff					
	Who will the individual call or report to?	meghan	aps					
	who provided that info?	safety train	on call					
	Does the person have transportation to all							
	services and places s/he would like to go?							
	who is the person's case manager?	Edith	no					
	Does CM help the person access services	yes	yes					
	Does the CM explain waiver services?	yes	yes					
	Does the person understand this info?	no	no					

Comments:

QIS failed to ask all the survey questions as instructed above.
Staff assisted with the answers to these questions as the consumers did not want to answer them themselves.