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DATE: September 11, 2006

TO: Jeannie Severson  
Candy Marsh  
Co-Directors, Glen-Wood, Inc.

FROM: Sandra L. Carpenter, Region 1 QIS

RE: Quality Assurance Review, March 2004 through December 2005

Please find attached report for the Quality Assurance Review for Glen-Wood, Inc. I wish to express my appreciation to you and your staff for all the assistance provided to me during the course of this review and when I was on-site January 18 & 19, 2006.

This report contains findings, comments and suggestions noted during my review of day services, group home services, supported living services and community supports from checking agency and client records and client and staff interviews. It also includes a review of observations from the above time frame as well as a desk review of incident trends, medication errors, Adult Protective Services issues, client rights issues, transportation and Individual Plan issues, etc. Also reviewed were licensing and fiscal reports.

During the review, the use of Quality Assurance Observation Sheets (QAOS) was used to record exemplary practices and indicated deficiencies. The QAOS is a record of what is observed and which Administrative Rule, DDP Policy or contract requirement is surpassed or deficient. There were 8 commendations and 7 deficiencies.

I look forward to continued success with Glen-Wood, Inc. Thanks to you and your staff for the ongoing effort to provide quality services to individuals with developmental disabilities.

cc: Ray Brenteson, President, GWI Board of Directors  
Dain Christianson, Region 1 Regional Manager  
Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance Specialist, DDP  
Perry Jones, Waiver Specialist, DDP  
DDP Contract File

**GLEN-WOOD, INC.**  
**QUALITY ASSURANCE REVIEW**  
March 2004 - December 2005

**SCOPE OF REVIEW**

The purpose of this summary is to evaluate the quality of services provided to individuals with developmental disabilities by Glen-Wood, Inc. The services reviewed are the following: Community Home, Supported Living, Work/Day services and Transportation. GWI also serves 1 individual with funding through Community Supports. Information was garnered through personal observations, interviews and review of documentation on-site as well as a desk review of data collected through the review period including quarterly reports.

**GENERAL AREAS**

**Administrative**

- Glen-Wood, Inc. is a non-profit corporation governed by a Board of Directors. Daily operations are under the direction of two co-directors, Jeannie Severson and Candy Marsh. GWI last received accreditation in 2000 and have chosen to not go through accreditation at this time. Glen-Wood, Inc. serves 21 consumers. The group home, "Our House", is licensed and no deficiencies noted (QAOS #15).
- Financial reports and audit reports were reviewed and a discrepancy in staff ratios was noted. Group home staffing ratios were not met between 8:00 and 9:00 pm (QAOS #11). GWI is sending time sheets indicating staffing patterns into Regional DDP to assure they are meeting their Appendix I contract ratio. No other discrepancies listed.
- Orientation training continues to be well documented with each job area and orientation subject covered. Background checks were documented for new staff in the sample. Evidence shows training conducted by both directors showing cooperation and involvement by administration in the hiring/training of competent staff (QAOS #2).
- Glen-Wood, Inc. has fully implemented the new Developmental Disabilities Program Incident Management Policy and has done an excellent job of following through with Critical Incident investigations (QAOS #3). They are using the Incident Management Committee to take actions and improve services as a result. Trend analysis is documented and sent into the DDP office regularly.
- During staff interviews, staff was unable to identify Adult Protective Services as the first call to make as mandatory reporters if they suspect abuse, neglect or exploitation. Staff knew that APS should be called but were concerned with following their chain of command first before the call is made (QAOS #8). Suspected abuse, neglect, exploitation may not be reported, as the law requires. GWI is addressing this by presenting different scenarios to staff to train what is reportable and when to call. I would like to suggest that APS come into the agency to offer training as well.
- Data is documented in all areas, using a variety of tracking methods. Data shows objective measures of progress or lack of progress by percentages and is used by the directors to improve services (QAOS #1).

**RESIDENTIAL SERVICES REVIEWED**

**GROUP HOME "OUR HOUSE":**

Generally, the group home was tidy and neat. Bedrooms were decorated to individual tastes and preferences. Areas of wheelchair damage on walls/door were efficiently fixed.

## **Health and Safety**

- Medications were secured in a locked cabinet. Evidence shows staff is certified in medication delivery by DDP. Protocols are in place for psychotropic PRN's. Medication Administration Record book did not show OTC orders from doctors and I would suggest making a copy to be readily available for all staff. Also, it was difficult to ascertain whose initials belonged to which staff in the log and I would suggest a sign off sheet to identify each staff.
- Disaster Drills are conducted as per licensing requirements but I am concerned about the lack of true "dead of night" fire drills. Staff indicates that because the night shift is a man, he would not be able to help the females evacuate due to privacy. If a real fire were to break out, what is the contingency plan? I would suggest Glen-Wood develop a way to address this "what if" scenario.

## **Service Planning & Delivery**

- There were several instances of late implementation of Individual Plans as well as missing data on several objectives. The code systems used indicated codes for other reasons but then were not explained. The year/date was often missing. Where objectives stated bank statements were to be reconciled 1x monthly, data indicated this was not always accomplished (QAOS #14). When data keeping is inaccurate, outcomes may not be trustworthy and the goal of the IP not realized. GWI has implemented a series of instructional sheets that outline the different steps involved in implementing objectives and how to document for staff to gain the knowledge necessary.
- Leisure activities were limited. Often activities did not vary much from watching TV or movies, puzzles and coloring. Once again, the coding system did not indicate why an individual might not have had to opportunity to participate in a leisure activity (QAOS #10). Quality of life is compromised. Individuals need additional encouragement & assistance from staff to engage in a variety of activities. The presence of "no opportunity" code used as often as it was indicates staff unwilling to assist. I would suggest each consumer have a list of activities or a calendar of activities to assist with planning. Additionally, if a consumer doesn't want to participate, that is fine. However, please offer other options and document them. GWI has presented evidence showing their commitment to improving their documentation of leisure activities and training staff.
- There were several instances of weeks without integrated community events/outings, even during nice weather (QAOS # 9). This was a concern noted in last years Quality Assurance review. It is understandable that a rural community has few choices in outings, however, it is necessary to develop a plan to address those times when there are few community activities occurring. Outings are an opportunity for "teachable moments" when consumers can learn and be involved in their lives. It is very important, regardless of weather or lack of local opportunities that they have these breaks. GWI is sending monthly logs to Regional DDP to assure they are addressing this concern.
- While on-site, good interaction between staff and consumers was observed. Documentation of 1on 1 outings with were found with activities coordinated with individual interests (QAOS #5).

**Supported Living & Congregate Supported Living:**

Congregate Supported Living areas and apartments were clean with regards to individual's preferences. Consumer, showed off her new computer. (QAOS #4)

**Health and Safety**

- Medication storage is locked and administration is well-documented.
- Fire drills were documented. Previous year's concern in regards to a 2<sup>nd</sup> egress is documented with a letter from fire chief.
- For individuals in Supported Living, off-site, safety checks are conducted monthly.

**Service Planning and Delivery**

- All service objectives reviewed indicated implementation in a timely manner. Data was neat and orderly. (QAOS #7).
- Assessments were available and once again showed commitment on GWI's part to address areas of concern in an objective and measurable manner.

**Work/Day/Community Employment:****Accomplishments:**

Glen-Wood, Inc. has several ways it works with individuals in finding them meaningful and paid employment. They operate a day program that works on several project areas including contracts with Mailbag Inc., for sales advertising; Missouri River Tourism, brochures to advance area tourism; Sheridan County, for cleaning the rest area; and several others. Four individuals are competitively employed in the community. There is also a Thrift Shoppe and "call-in" jobs such as raking leaves. Individuals are kept busy, indeed.

**Health and Safety**

- Vehicles: GWI operates several vehicles throughout its organization, including providing transit opportunities for the community. Documentation was found indicating vehicle inspection and maintenance records. All drivers/staff had current driver's licenses. (QAOS #6)
- Consumers: Medical appointments are coordinated through the main office and records kept of appointments. Pertinent information is communicated to each area as needed. Medicine administration is documented and all staff is certified.
- Fire drills: Fire drills were documented except for 1 month. I would suggest a plan to address this. Data indicated that fire drills were conducted using scenarios and recorded the actions of consumers/staff.

**Service Planning and Delivery**

- GWI works hard at implementing programs and tracking data at the work activity center. Even with all this hard work, one consumer's, behavior plan's reinforcer was not delivered (QAOS # 12). Explanation why this didn't happen is not clear but GWI have modified the program to better reflect reinforcers that can be delivered and have added non-contingent reinforcement. No other concerns noted.

**Community Supports:**

- GWI provides Community Supports to one consumer. This consumer is rarely available on a schedule. Data collection procedures were inconsistent to the written objective (QAOS #13). GWI responded that objectives will be modified to better reflect what is actually intended. No other concerns noted.

**Conclusion:**

All deficiencies were addressed and dispositions accepted with the exception of QAOS #11, Contracted Staffing. Glen-Wood, Inc. did not feel they were jeopardizing the safety and needs of the individuals by being short staffed between 8 and 9 pm as most were in bed by 8:00 pm. Instead of it being the exception, it became the normal schedule. However, Appendix I did not indicate this. It is still an early time for 1 staff only and does not allow for individuals who have preferences to stay awake longer or those times of behavioral emergencies. I have requested that GWI continue sending documentation of staffing via timesheets or other methods and DDP will continue to monitor.

In summary, Glen-Wood, Inc. and all those who work for and on behalf of the consumers should be proud of their accomplishments. Improvements are an ongoing goal that I have witnessed first hand. Thank you for all you do. I look forward to assisting in any way that I can in order to support you and the consumers in your endeavors.

**Attachments:**

Quality Observation Assurance Sheets numbered 1-15

cc: Ray Brenteson, President, GWI Board of Directors  
Dain Christianson, Region 1 Regional Manager  
Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance Specialist, DDP  
Perry Jones, Waiver Specialist, DDP  
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