

STATE OF MONTANA  
 Developomental Disabilities Program  
 Comprehensive Evaluation  
**Malta Opportunities, Inc.**

Dates of Review: March 16, 17, 2009  
 Evalutator(s): S. Carpenter

	Appendix or QAOS
<b>DESK REVIEW:</b> <b>Accreditation:</b> Accreditation is no longer required by the state contract.	
<b>Significant Events from the Agency:</b> -- MOI has had an fairly uneventful year, which is enjoyed as a good thing. -- MOI has updated the Group Home to include new living room furniture, dining room chairs and re-decorating with some pictures on the walls...it looks nice and comfortable and the folks living there seem content and are able to relax in their living environment. -- Individuals at the Group Home each have their own rooms decorated to their preferences. -- The Work Activity Center continues to provide various work activities for individuals in janitorial, recycling, paper delivery and laundry. Another lovely product is the hand loom-woven rugs the individuals make from rags. It's a process that many can help on and the end product is something to be proud of. Rugs and other craft items are sold in their thrift store that is soley staffed by individuals. This has proved to be a win-win for MOI, individuals and the community. -- The Board of Directors are dedicated to being actively involved as evidenced by a quorum present at all meetings and participating in drop-in visits at the Group Home.	
<b>Agency Internal Communications Systems:</b> -- Malta Opportunities, Inc. is a very small provider. The administrative staff include the Executive Director, a part-time receptionist/payroll clerk and a part-time behavior specialist. They have the one group home with a manager, provide supported lviing services and work activity day services as well a 3 folks in Community Supports. Internal communications are through direct contact or with memos. The group home employs a pass on communication book that day staff and residential staff will use to record incidental information. MOI also uses daily health-care checklists for folks in the Group Home. These lists and other necessary information also get discussed at weekly managers meetings to help provide seamless service delivery.	
<b>Policies and Administrative (DDP) Directives</b> Currently, the Board of Directors is in the process of going through and updating the policy manual to better reflect the changes wrought in the last few years by DDP.	

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DESK REVIEW:	Appendix or QAOS
<p><b>Fiscal (audits, cost plans, invoices):</b></p> <ul style="list-style-type: none"> <li>-- MOI is able to submit invoices in a timely manner. This is much appreciated by DDP.</li> <li>-- Clients in the Group Home have individual inventories.</li> <li>-- Client fund accounting has improved and individuals are not over-resourced.</li> </ul>	
<p><b>Licensing:</b></p> <p>-- Malta Opportunities, Inc. received their annual licensure for Group Home. The deficiency noted was a concern that certain areas of the group home were not in good repair, free of hazards, clean and free from offensive odors as follows: the handicap bathroom had a portable commode that was dirty (the response was to remove it as it wasn't used); the bathroom with tub had a soiled floor in front of the toilet, the inside of the cupboards were not clean, and the outside of the bathtub was cracked and repaired with electrical tape, which was also cited in the sanitarians report 2 weeks prior to the licencing visit (response was to clean the front of the toilet and recaulk, cabinets were scrubbed and cleaned by staff, and the cracked part of the tub was removed and replaced with a repair of plywood covered by glassboard); the kitchen had built up food and crumb debris on the ledges of the drawer openings (response was to clean the ledge and checked daily so buildup does not occur); a residential bedroom had a portable commode that had remnants of urine remaining and smelled as well as a smear of BM around the perimeter of the seat. There were also dustballs and small debris around furniture and in the corners of the room (response was the commode was cleaned immediately and daily cleaning will occur as well as a weekly checklist to ensure dust/debris is cleaned); and another residents bedroom also had dust balls and small debris around furnitue and corners of room (again, the response was to institute a weekly cleaning list that outlined tasks to be done.). Responses were submitted and accepted by Quality Assurance Division.</p>	

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<b>DESK REVIEW:</b>	<b>Appendix or QAOS</b>
<p><b>Quality Assurance Observation Sheets: (trends from past year)</b></p> <p>-- The previous year saw Malta Opportunities, Inc. under a corrective action plan to address several systemic deficiencies and were instructed to:</p> <ol style="list-style-type: none"> <li>1. Design a plan detailing how they provide adequate supervision of direct care staff to ensure the health and safety of the individuals served;</li> <li>2. Document who is responsible for implementing plans of care in; the group home, day program, and supported living;</li> <li>3. Describe how accountability will be established for those assigned responsibility for implementing plans of care;</li> <li>4. Define how they will assure individual plans of care are followed and documented on a daily basis and</li> <li>5. Describe how they will assure medical needs are addressed initially and on an ongoing basis.</li> </ol> <p>-- MOI was able to submit a plan that was accepted by DDP. This plan required some immediate steps as well as on-going actions. A copy of the deficiencies, MOI's response and DDP's follow-up is attached as Appendix A. MOI has made several big strides in improving the quality of their program and continue to work towards building structures to address on-going quality improvement measures.</p>	Apx A
<p><b>Medication Errors: (trending from past year)</b></p> <p>-- Medication Errors for the 2008 calendar year saw a total of 20 med errors. Of those errors, 1 was made at home with family, 1 by a consumer in supported living services and 18 in the Group Home. Medication errors are reviewed monthly by the Board of Directors as well as they occur by the Incident Mangament Team. Medication errors are mostly missed medication and are follow-up by contacting medical direction, usually a nurse or pharmacist. No adverse actions or reaction occurred from these errors and no one was injured or suffered ill health from these errors.</p>	
<p><b>Incident Management: (summary trends, steps to address trends, investigation summaries)</b></p> <p>-- MOI has an excellent Incident Management Committee that reviews each Incident Report and also reviews trends. These meetings have been an excellent platform to address many issues and MOI has been more successful because of their dedication to this committee.</p> <p>-- The trends noted are mostly concerned with falls. Falls are mostly occuring in inclement weather when thick ice is everywhere. Another trend is consumer to consumer aggression, while relatively minor in severity, is still pause for concern. The Committee continues to be proactive in setting up strategies to address these trends.</p> <p>-- Investigations are done according to DDP policy, reviewed by committee and signed off by administration.</p>	



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Staff Related:								Appendix or QAOS
Evidence Found of Staff Training: ("✓" if present; '⊙' if not present)								
Staff Initials:	JR	KB	TM					
1st aid/CPR	✓	✓	✓					
Abuse Prevention	✓	✓	✓					
Client Rights	✓	✓	✓					
Incident Reporting	✓	✓	✓					
Confidentiality	✓	✓	✓					
IP/PSP Process	✓	⊙	✓					
CDS complete w/in 6 months of hire date?	n/a	n/a	✓					
Medication Cert	n/a	✓	✓					
<b>Note where evidence found:</b>								
<b>Comments:</b> JR does not do direct care as she was hired as the Habilitation Specialist and started in 12/08; CDS started. KB was hired 2/09; has started CDS.								

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IP Checklist: ("✓" if evidenced; "⊙" if not)										Appendix or QAOS
Consumer Initials:		GH1	GH2	SL1	SL2					
<b>O n s i t e</b>	Consumer/Family Survey	n/a	n/a	n/a	n/a					QAOS #18
	PSP/IP Doc Avail to all Staff	✓	✓	✓	✓					
	IPP/Actions Implemented	✓	✓	⊙	✓					QAOS #1
	Data for IPP/Actions	✓	✓	✓	✓					QAOS #13
	Data Internally Monitored	✓	✓	✓	✓					
	Self Medication Objective	na/	na/	n/a	n/a					
	Consumer informed of grievance procedure	⊙	⊙	⊙	⊙					QAOS #7
	SL consumer choice of SL staff	n/a	n/a	✓	n/a					
	Rights Restrictions	n/a	n/a	n/a	n/a					
<b>M o n i t o r i n g</b>	PSP/IP Checklist	✓	✓	✓	✓					
	PSP/IP Annually?	✓	✓	✓	✓					
	Individual Needs Addressed?	✓	✓	✓	✓					
	Assessment Based?	✓	✓	✓	✓					
	Quarterly Reports?	✓	✓	✓	✓					
	Incident Reports Addressed?	✓	✓	✓	✓					
	Behavioral Supports Addressed?	n/a	n/a	n/a	n/a					
	Free from Aversive Procedures?	✓	✓	✓	✓					
<b>Comments: (regarding service planning and delivery)</b>										
<p>-- QAOS #1: PSP actions not implemented -- this was found to be the case at the Work Activity Center as well as with Supported Living. MOI's response was that staff did not have clear directions on what to do. Improvement is to include what is expected of staff, to monitor internally and to be sure that not only the PSP is available but that the Implementation Strategies are easily available to staff.</p> <p>-- QAOS#7: Individuals were not informed of grievance procedure for MOI. The agency response was to immediately inform consumers of their rights to grievance and will continue to do so annually during the pre-PSP process.</p> <p>-- MOI is in the process of updating a new survey for all stakeholders and plan on doing a survey every other year.</p> <p>-- QAOS #18 (commendation): PSP's are available for staff to review.</p> <p>-- QAOS # 13: With a specific goal in mind, WAC staff are very diligent in seeing through to completion. Projects are completed by individuals in wood working, rug making, janitorial, etc and individuals are proud of the accomplishments.</p>										

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Consumer Initials:		CS1	CS2	CS3					
<b>O n s i t e</b>	Consumer/Family Survey								QAOS #18
	PSP/IP Doc Avail to all Staff	✓	✓	✓					
	IPP/Actions Implemented	⊙	⊙	✓					QAOS #1
	Data for IPP/Actions	⊙	⊙	⊙					QAOS #8
	Data Internally Monitored	⊙	⊙	⊙					QAOS #13
	Self Medication Objective	n/a	n/a	n/a					
	Consumer informed of grievance procedure	⊙	⊙	⊙					QAOS #7
	SL consumer choice of SL staff	✓	✓	✓					
	Rights Restrictions	n/a	n/a	n/a					
<b>C M I N I P T U R E</b>	PSP/IP Checklist	✓	✓	✓					
	PSP/IP Annually?	✓	✓	✓					
	Individual Needs Addressed?	✓	✓	✓					
	Assessment Based?	✓	✓	✓					
	Quarterly Reports?	✓	✓	✓					
	Incident Reports Addressed?	✓	✓	✓					
	Behavioral Supports Addressed?	n/a	n/a	n/a					
	Functional Analysis Needed?	n/a	n/a	n/a					
Free from Aversive Procedures?	✓	✓	✓						
<b>Comments: (regarding service planning and delivery)</b>									
<p>-- QAOS #1: PSP actions not implemented -- this was found to be the case at the Work Activity Center as well as with Supported Living. MOI's response was that staff did not have clear directions on what to do. Improvement is to include what is expected of staff, to monitor internally and to be sure that not only the PSP is available but that the Implementation Strategies are easily available to staff.</p> <p>-- QAOS#7: Individuals were not informed of grievance procedure for MOI. The agency response was to immediately inform consumers of their rights to grievance and will continue to do so annually during the pre-PSP process.</p> <p>-- QAOS #18 (commendation): PSP's are available for staff to review.</p> <p>--QAOS #8 and #13: With a specific goal in mind, WAC staff are diligent and determined to see it through completion. Additionally, a CS consumer is enjoying great success in achieving her outcomes.</p>									

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For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer: GH1	Date of PSP: 5/20/08	Hours per ICP:
Actions per PSP:		Evidence support provided consistently?
research vacation		yes
*learn 5 new signs		yes
assistance with break/lunch at MOI		
financial		
*hygiene		yes
*laundry		
*medications		
meals		
medical		
clothing needs/alterations		
new inventory		
*chore chart		yes
*soap machines (WAC)		count of money taken from soap machines
*daily WAC chart		data is sparsely recorded and tapers off since mid December

Protocols:	Evidence staff clearly understood and were able to implement protocol?
signs	
hygiene	
laundry	
medications	
chore chart	
soap machines	no protocol available
daily WAC chart	no protocol evidenced/no chart available

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For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer: GH2	Date of PSP: 7/30/08	Hours per ICP:
Actions per PSP:		Evidence support provided consistently?
*work in MOI laundry		
*shred papers		
*band papers		
participate in leisure/sporting events		
write friends in Glasgow		
visit Glasgow		
participate in arranged local activities/transportation		
*chore chart		yes
*hygiene chart		yes

Protocols:	Evidence staff clearly understood and were able to implement protocol?
MOI Laundry	
shred papers	
band papers	
chore chart	IS not developed: chart is done but does not include a strategy
hygiene chart	IS not developed; hygiene is done and tracked but not per PSP action



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For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer: SL2	Date of PSP: 6/25/08	Hours per ICP:
<b>Actions per PSP:</b>		<b>Evidence support provided consistently?</b>
*will complete a new cd box		yes; completed 10/21/08
*will wash out food containers at lunch		yes but not daily?
will have assistance completing outside jobs		yes
1x monthly go shopping		yes (looks like continuation of previous objective--not aware of change in language?)
MOI will accompany to Special Olympics		no opportunity yet
go to "Guys Nite Out"		
go scheduled social activities with MOI providing transportation		

Protocols:	Evidence staff clearly understood and were able to implement protocol?
*will complete a new cd box	no protocol for strategy available
*will wash out food containers	to be implemented 7/11 -- no data until 7/20/08



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For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer: CS2	Date of PSP: April 25, 2008	Hours per ICP:
Actions per PSP:		Evidence support provided consistently?
safety checks 1x monthly		yes
transportation		
1 on 1 with April 1x monthly		no (QAOS) only 4 out of 12 were 1 on 1; the rest were part of group activities
money skills in Thrift Shop		yes; has shown tremendous progress in this area this year!!

Protocols:	Evidence staff clearly understood and were able to implement protocol?
safety checks	yes
money skills	yes



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Residential Site Checklist: ("✓" if evidenced; "⊙" if not)								Appendix or QAOS
Site Name:		GH1	GH2	SL1	SL2			
<b>H e a l t h  S a f e t y</b>	Bathing procedures posted	✓	✓	n/a	n/a			
	Clean/Sanitary Environment	✓	✓	✓	n/a			QAOS #9
	Egress	✓	✓	✓	n/a			
	Hot Water Temps	117.4	121.7	121.5	n/a			QAOS #2
	Emergency Assistance	✓	✓	✓	n/a			
	Fire Extinguishers/smoke Detectors	✓	✓	✓	n/a			
	1st Aid/CPR Supplies Accessible/Available	✓	✓	✓	n/a			
	PRN Medications	✓	✓	n/a	n/a			
	Medication Procedures	✓	✓	n/a	n/a			QAOS #16
	Medication Locked Storage	✓	✓	⊙	n/a			
	Medication Administration Records	✓	✓	n/a	n/a			
	Staff Ratios or ICP staffing	✓	✓	✓	n/a			
	Awake Overnight Staff	✓	✓	n/a	n/a			
	Adequate Supplies	✓	✓	✓	n/a			
Storage of Supplies	✓	✓	✓	n/a				
Free from aversive procedures?	✓	✓	✓	n/a				
<b>D a i l y</b>	Weekly integrated activities	✓	✓	n/a	n/a			
	House or Site Rules	✓	✓	n/a	n/a			
	Opp for choice, self determination	✓	✓	✓	n/a			QAOS #12
	Meal Prep, Mealtime	✓	✓	✓	n/a			QAOS #17
	Engagement in Daily Life	✓	✓	✓	n/a			QAOS #19
	Participation in Daily Living Skills	✓	✓	✓	n/a			QAOS # 10
	Daily Leisure Opportunities	✓	✓	n/a	n/a			
	Staff Trained in Individual Specifics	✓	✓	✓	n/a			

**Comments:**

- GH 1 & GH2 are both located in the Malta Group Home but were surveyed seperately.
- SL1 lives in his own apartment and SL2 lives with family and only receives days services.
- SL1 says he keeps his door locked all the time and doesn't keep his medications locked (after this review SL1 proudly stated that he has a nice locked box he keeps his medications in now!)
- QAOS #2: Water temperature at the Group Home exceeded 120°F. MOI immediately checked it out and adjusted the regulator appropriately; monthly checks are done to ensure the water temperature never exceeds 120.
- QAOS #9: Group home was clean and looked nice!
- QAOS #10: Group home individuals were happy and engaged in their daily life. Individuals were happy and relaxed with no client/staff power struggles.
- QAOS #19: An individual received a pedicure which positively impacted her life in many different ways: she was happy and proud of her pretty toes, a foot condition was treated, opportunity for incidental training was used and the individual was able to actively be engaged in her community!
- QAOS #12: Folks in Supported Living are involved in their communities.
- QAOS #16: An individual has diabetes and receives complete support from staff in diet, exercise and blood monitoring.
- QAOS #17: At the WAC, individual have more staff involvement during lunch time with staff engaging in incidental training.

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Residential Site Checklist: ("✓" if evidenced; "⊗" if not)								Appendix or QAOS
Site Name:		CS1	CS2	CS3				
<b>H e a l t h  S a f e t y</b>	Bathing procedures posted	n/a	n/a	n/a				QAOS #9
	Clean/Sanitary Environment	✓	✓	✓				
	Egress	✓	✓	✓				
	Hot Water Temps	✓	✓	✓				
	Emergency Assistance	✓	✓	✓				
	Fire Extinguishers/smoke Detectors	✓	✓	✓				
	1st Aid/CPR Supplies Accessible/Available	✓	✓	✓				
	PRN Medications	n/a	n/a	n/a				
	Medication Procedures	n/a	n/a	na/				
	Medication Locked Storage	n/a	n/an	n/a				
	Medication Administration Records	n/a	n/a	n/a				
	Staff Ratios or ICP staffing	✓	✓	✓				
	Awake Overnight Staff	n/a	n/a	n/a				
	Adequate Supplies	✓	✓	✓				
Storage of Supplies	✓	✓	✓					
Free from aversive procedures?	✓	✓	✓					
<b>D a i l y</b>	Weekly integrated activities	n/a	n/a	n/a				QAOS #11
	House or Site Rules	n/a	n/a	n/a				QAOS #14
	Opp for choice, self determination	✓	✓	✓				
	Meal Prep, Mealtime	✓	✓	✓				QAOS #12
	Engagement in Daily Life	✓	✓	✓				
	Participation in Daily Living Skills	✓	✓	✓				
	Daily Leisure Opportunities	n/a	n/a	n/a				
	Staff Trained in Individual Specifics	✓	✓	✓				
<b>Comments:</b> -- QAOS #11 :Individuals in the Group Home enjoy many recreational and leisure activities opportunities. -- QAOS #12: Folks in Supported Living are involved in their communities. They are engaged in many activiites from going to the library to attending the stock car races to enjoying a special "girl or guy nite out". -- QAOS #14: Individuals are supported in attending area and state Special Olympics events and are proud of it!								

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Site Name:								
<b>T r a n s p o r t a t i o n</b>	Driver Orientation Program							QAOS #6
	Wheelchair tie downs							
	Wheelchair Lift							
	Driver's Licenses							
	Emergency Supplies							
	Fire Extinguisher							
	Transportation Log							
	Scheduled Maintenance Program							
	Training--Staff Doing Maintenance Checks							
	Procedures for Timely Repairs							
MDT inspection on file (MDT vehicles only)								
<b>Comments:</b> MOI has a contract agreement with Phillips Transit Authority (PTA) to provide transportation. PTA is operated under a 5310 grant and has to follow the rules and regulations set forth by it's over-sight agency. This includes maitainence, insurance, taxes, repairs. MOI does provide drivers and those drivers must complete the PTA training requirements and follow the policies of PTA. However, drivers do not receive training specific to the needs of consumers.								
<b>Comments:</b> -- QAOS #6: Drivers are not trained in the special needs of individuals needing transportation. MOI's response is to work with PTA to get more training from them as well as have drivers attend the Montana Department of Transpotation 16 hour PASS training.								

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Staff Survey: ("✓" if evidenced; "⊙" if not)								Appendix or QAOS
Staff Initials:		BB	MS	TP				
How long worked:		12 years	6 1/2 yrs	11 mo				
<b>A b u s e</b>	Allegations are reported to? (APS)	✓	⊙	✓				QAOS #3
	Do you notify Supervisor first? (NO)	⊙	⊙	✓				
	Steps to take if abuse is discovered?		⊙					
	Comments: BB said he would have to notify his supervisor and the executive director first.							
<b>R i s k f a c t o r s</b>	Suspect theft of gloves, steps to take?	⊙	⊙	✓				QAOS #4
	IP/PSP requests Doctors appt			✓				
	No jacket, -25 consumer wants to leave	✓						
	Review Rts Restriction		⊙	✓				
Comments: BB felt that it was necessary to confront the individual and if he said he took them, to then return them. MS felt that asking if they took the gloves then searching their lockers for missing item.								
<b>b m p</b>	describe consumer behaviors	⊙	⊙	✓				QAOS #5
	staff response to behaviors by plan	⊙	⊙					
	list proactive or environmental strategies	✓	⊙	✓				
	Comments: WAC stuff unsure of behaviors in a consumers plan. Did say it was in his book.							
<b>O p o r t u n i t y</b>	former employee wants info	✓	✓					
	what is consumer information?		⊙					
	training to meet health and safety needs?		✓	✓				
	emergency evacuation procedures?	✓		✓				
	Comments:							

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Staff Initials:		BB	MS	TP				
<b>m e d i c a t i o n s</b>	describe procedure to assist with meds	✓		✓				
	if med is unavailable?		✓					
	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?	✓						
Comments:								
<b>E R C</b>	steps to avoid power struggles		✓	✓				
	how to respond to someone who is upset	✓		✓				
	what is you start to lose control?	✓	✓					
	Comments:							
<b>H O P E C O N T R O L</b>	when do you fill out an incident report?	✓		✓				
	notifications for ER?		✓					
<b>H O P E C O N T R O L</b>	consumer to consumer incidents	✓						
	who writes the IR?		✓	✓				
	Comments:							

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Staff Initials:		BB	MS	TP				
<b>B E H A V I O R</b>	consumer destroying things	✓		✓				
	staff pinches consumer back	✓	✓	✓				
	how do you know a support plan is needed?	✓	✓					
	Comments:							
<b>I P / P S P</b>	what is IP/PSP based on?	✓	✓					
	you have an idea for an objective.....		✓					
	why do assessments?			✓				
	How do you find out what someone would like to do?	✓		✓				
	Comments: Staff aren't sure when to bring forth ideas for individual planning.							
Comments: QAOS #3 -- In MOI's response, they did not know why staff were unable to give correct answers as training had previously been provided. They have retrained staff in that mandatory reporting does not include notifying your director first and will quiz staff throughout the year on the appropriate procedures to follow if Abuse/Neglect/Exploitation are suspected. QAOS #4 -- MOI's response was that staff may have misunderstood what was being asked of them in the clients rights portion of the survey. All staff have been re-trained and given a copy of the policy. QAOS #5 -- In surveying staff, it became apparent that an individual's behavior modification plan was not clearly understood or implemented by staff having the effect that the intent of the plan may not be met. MOI's response was they did not know why staff could not provide the information when asked. Staff were retrained in the plan and sign off they know the plan and can implement the plan. Any changes to the plan will be similarly treated.								

STATE OF MONTANA  
 Developmental Disabilities Program  
 Comprehensive Evaluation  
**Malta Opportunities, Inc.**

Dates of Review: March 16, 17, 2009  
 Evaluator(s): S. Carpenter

Consumer Questionnaire (used by QIS). ("✓" if evidenced; "⊗" if not) <b>Bolded questions are mandatory.</b>						Appendix or QAOS
Consumer initials:		GH1	GH2	SL1	SL2	
<b>Consumer has/shows ID card?</b> (if PSP documents this is not applicable, mark NA)		✓	✓	✓	✓	QAOS #15
<b>C o n s u m e r</b>	Do you have nice staff at home/work?	please see support staff answers		always do	yep	
	Is anyone mean to you at home/work?			nope	no	
	Do you like where you live/work?			yes	yes	
	Are you ever afraid of anyone?			no	sebrina	
	<b>Someone hits/hurts you, who can you tell?</b>			staff		
	<b>Does anyone talk to you about this?</b>			yes	yes	
	Can you get help when you need it?			yes	yes	
	from staff?			yes	yes	
	from Case Manager?			yes	yes	
	Can you get your own food/drink?			yes	yes	
	Do people come into your house/room w/o knocking/permission?			no	no	
	Do staff ever take things from you?			no	yes	
	Can you get rides to places you need to go?			yes	yes	
	Rides to the places you want to go?			yes	yes	
	<b>Who is your Case Manager?</b>			keenie	keenie	
<b>Does s/he talk to you about waiver services?</b>	yes	yes				
<b>Does s/he help you get what you need?</b>	yes	yes				
<b>Comments:</b>						
<p>-- SL2 would like staff to help him to buy flowers for . SL2 says staff took his earphones and put them in a drawer or something but says if he wanted them, he could get them. SL2 would like to go see again sometime and that he thinks about it. SL2 would like to get a job working at the food bank with his mom.</p> <p>-- QAOS #15: All individuals have ID cards and SL folks will show them when appropriate.</p>						

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Consumer Questionnaire (used by QIS). Bolded questions are mandatory.						Appendix or QAOS
		Consumer initials:	CS1	CS2	CS3	
<b>Consumer has/shows ID card?</b> (if PSP documents this is not applicable, mark NA)		<b>yes</b>	<b>yes</b>	<b>yes</b>		QAOS #15
<b>C o n s u m e r</b>	Do you have nice staff at home/work?	yes	yes	yes		
	Is anyone mean to you at home/work?	no	no	no		
	Do you like where you live/work?	yes	yes	yes		
	Are you ever afraid of anyone?	no	no	yes		
	<b>Someone hits/hurts you, who can you tell?</b>	<b>police</b>	<b>sister</b>	<b>keenie</b>		
	<b>Does anyone talk to you about this?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>		
	Can you get help when you need it?	<b>yes</b>	<b>yes</b>	<b>yes</b>		
	from staff?	"	"	"		
	from Case Manager?	"	"	"		
	Can you get your own food/drink?	yes	yes	yes		
	Do people come into your house/room w/o knocking/permission?	no	yes	yes		
	Do staff ever take things from you?	no	no	no		
	Can you get rides to places you need to go?	yes	yes	yes		
	Rides to the places you want to go?	yes	yes	yes		
	<b>Who is your Case Manager?</b>	<b>Keenie</b>	<b>Keenie</b>	<b>Keenie</b>		
<b>Does s/he talk to you about waiver services?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>			
<b>Does s/he help you get what you need?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>			
<b>Comments:</b>						
<p>-- CS2 and CS3 are sisters sharing living arrangements. They have an older sister who assists them along with PCA services. They complain that sometimes the sister/other care-givers will not ask permission to do things for or with them...both women are great advocates for themselves.</p> <p>-- QAOS #15: All individuals have ID cards and SL folks will show them when appropriate.</p>						

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**Appendix  
or QAOS**

<b>Consumer Questionnaire (used by QIS). Bolded questions are mandatory.</b>							
Consumer initials:		GH1	GH2	SL1	SL2		
<b>S u p p o r t</b>	Who helps this person and how?						
	Are there some staff/peers they like better?						
	Staff/peers they don't like? Why?						
	Current needs not being met?						
	Health and Safety related?						
	Who do you talk to about these concerns?						
	Does the person have input to his/her life?						
	If you have concerns, who do you talk to?						
	are they resolved?						
	What are this persons wishes/dreams?						
	is the plan moving that direction?						
	what would make things better?						
	does this person ever seem afraid?						
	are you afraid for them?						
	Does this person know how or where to report abuse?	no	no	yes	NO		
	who provided that training?	keenie	keenie	keenie	MOM		
	Who will the individual call or report to?						
	who provided that info?						
	Does the person have transportation to all services and places s/he would like to go?						
	who is the person's case manager?	Keenie	keenie	keenie	keenie		
Does CM help the person access services?	yes	yes	yes	yes			
Does the CM explain waiver services?	yes	yes	yes	she tries			
Does the person understand this info?	no	no	yes	sometimes			

**Comments:**  
 GH1 and GH2 are unable to answer questions accurately; caregivers are relied upon to help answer.

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Consumer Questionnaire (used by QIS). ("✓" if evidenced; "⊗" if not) <b>Bolded questions are mandatory.</b>							Appendix or QAOS
Consumer intials:		CS1	CS2	CS3			
<b>S u p p o r t</b>	Who helps this person and how?						
	Are there some staff/peers they like better?						
	Staff/peers they don't like? Why?						
	Current needs not being met?						
	Health and Safety related?						
	Who do you talk to about these concerns?						
	Does the person have input to his/her life?						
	If you have concerns, who do you talk to?						
	are they resolved?						
	What are this persons wishes/dreams?						
	is the plan moving that direction?						
	what would make things better?						
	does this person ever seem afraid?						
	are you afraid for them?						
	<b>Does this person know how or where to report abuse?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>			
	<b>who provided that training?</b>	<b>keenie</b>	<b>keenie</b>	<b>keenie</b>			
	Who will the individual call or report to?						
	who provided that info?						
	Does the person have transportation to all services and places s/he would like to go?						
	<b>who is the person's case manager?</b>	<b>keenie</b>	<b>keenie</b>	<b>keenie</b>			
<b>Does CM help the person access services?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>				
<b>Does the CM explain waiver services?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>				
<b>Does the person understand this info?</b>	<b>yes</b>	<b>yes</b>	<b>yes</b>				
<b>Comments:</b>							