

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

Agency Name: Little Bitterroot Services INC
Evaluator(s): Kara Gehring
Dates Covered by Review: 9/11/08 - 9/18/09

Report Submitted on 11/6/09

DESK REVIEW	* QAOS = Quality Assurance Observation Sheet	insert * QAOS #
Accreditation: Accreditation is no longer required by the state contract.		
Significant Events from the Agency: LBSI is an agency that adheres to person centered principles in regard to consumer services. The management team strives to follow best practices; assure the health, safety and well being of the consumers; and provide creative opportunities for integration and engagement in daily life. Recently, the agency experienced an overhaul in terms of operations, staff assignments, new buildings for the Plains thrift store, administration and the work activity center and has begun a new business venture. A new QA individual has been appointed and other staff roles have been clearly defined which will allow for growth in a plethora of areas including, but not limited to staff supervision, documentation, training and consumer care.		
Agency Internal Communications Systems: Therap is one component of the agencies internal communication system; however, more staff need to utilize the program such as reading entries (GERs) and documenting in the system. Therap is not only used for documentation, it is also used for communication of consumer needs. The Agency also utilizes Memos, staff meetings and trainings as a method to facilitate communication. **** several documents such as med sheets, program data sheets, etc. had white out on them, these are legal documents white out should never be used.****		
Policies and Administrative (DDP) Directives Policies were in place in regard to both consumer and staff grievances with a signed receipt and acknowledgement form. Also, policies on staff supervision such as employee handbook with evaluation procedure in place exits. A policy on choice of supported living staff was not available for review, however documentation exists to support choice exits, I suggest including an actual policy with a receipt and acknowledgement form. Safety policy dated ... 1/10/94... needs to be updated including new policies and procedures drafted by the DDP. The safety policy is comprehensive includes IMC, weapons policy, staff and consumer safety, fire, evacuation ... etc.. Employee handbook is all inclusive!! Highly commendable are the three different consumer handbooks available written to accommodate varying levels of understanding.		QAOS Commend #8

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

Report Submitted on 11/6/09

DESK REVIEW	insert QAOS #
<p>Fiscal (audits, cost plans, invoices):</p> <p>June 2007 and 2008 A-133 audit was reviewed. Financial statements, such as, statements of activity, functional expenses and cash flows present fairly. The change in net assets and cash flows are in conformity with accounting principles generally accepted in the U.S. and are fairly stated in all material respects in relation to statements taken as a whole. @008 and 2009 is in the process of being drafted.</p> <p>I also reviewed transportation logs, work/ day activity attendance, community supports invoices and ICP utilization. No concerns exist in this area.</p>	
<p>Licensing (for Group Homes, Adult Foster sites and Assisted Living sites):</p> <p>license current, due 10/09</p>	

Agency: Little Bitterroot Services INC
 Evaluator(s): Kara Gehring
 Dates Covered by Review: 9/11/08 - 9/18/09

Report Submitted on 11/6/09

DESK REVIEW	insert QAOS #
<p>Quality Assurance Observation Sheets: (trends from past year)</p> <p>NONE</p>	
<p>Medication Errors: (trends from past year)</p> <p>Each quarter, on average, at least what I could ascertain from documentation, 8 med errors occur (see below regarding trend documentation). Med errors could be due to the medication system in place, as it is confusing and does not give caregivers an opportunity to accurately cross reference consumer medication. SL, med sheets do not list med order on med sheet it is listed on a separate sheet, pill bottles are used in SL, but lead and assist lead fill weekly containers, it would be a safer practice to allow staff a point of cross reference by looking at the pill bottle and matching it to a medication administration record that has the order spelled out. Also, PRN protocols for both behavioral and medical PRNs should be easily accessible and the MAR not only lists the entire PRN order, but also references where to locate the protocol (a suggestion includes listing the entire protocol on the MAR). Also, protocols need defined parameters to not only include steps to take prior to administering, but what to do following administration.</p>	QAOS #1
<p>Incident Management: (Incident Management Committees - IMCs & trend reports, summary trends, steps to address trends, and investigation summaries)</p> <p>LBSI's IMC meets weekly and discusses all critical, reportable and internal incidents. Further, this time is used to discuss global issues and potential concerns. Commendable is the diligence and creativity of the team when addressing situations/ incidents with consumers. LBSI consistently takes extra measures to ensure the health, safety and well being of the consumers whom the agency serves.</p> <p>Documentation of meetings as well as trends analysis are currently being revamped to include monthly reports, quarterly and annual reports are also suggested. It was very difficult to ascertain trends from the previous year b/c trend analyses were not available for half of the year. Additionally, the trend reports submitted for the other half of the year did not have an accompanying analysis or steps to address identified trends. A couple of trends noted which are consumer specific vs. agency included DCP biting behavior toward both consumers (specifically one) and staff, as well as, hitting staff (see QAOS 3).</p>	QAOS #2

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

	insert QAOS #																														
Staff Related:																															
Evidence Found of Orientation Training Use three to five staff ~ new hires																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">staff initials</td> <td style="width: 10%;">JT</td> <td style="width: 10%;">DR</td> <td style="width: 10%;">CJ</td> <td style="width: 10%;"></td> </tr> <tr> <td>+ or X / - or no</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	staff initials	JT	DR	CJ							+ or X / - or no	X	X	X																	
staff initials	JT	DR	CJ																												
+ or X / - or no	X	X	X																												
Note where evidence found: Training File Training files not complete did not include all training																															
Evidence Found DDCPT or equivalent: For intensive staffing only - LOC for Waiver indicates Intensive determination																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">staff initials</td> <td style="width: 10%;">JT</td> <td style="width: 10%;">DR</td> <td style="width: 10%;">CJ</td> <td style="width: 10%;"></td> </tr> <tr> <td>consumer initials</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>+ or X / - or no</td> <td>X</td> <td>n/a</td> <td>n/a</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	staff initials	JT	DR	CJ							consumer initials										+ or X / - or no	X	n/a	n/a							
staff initials	JT	DR	CJ																												
consumer initials																															
+ or X / - or no	X	n/a	n/a																												
Note where evidence found: Training File																															
Evidence of Criminal Background Checks: Use three to five staff ~ new hires																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">staff initials</td> <td style="width: 10%;">JT</td> <td style="width: 10%;">DR</td> <td style="width: 10%;">CJ</td> <td style="width: 10%;"></td> </tr> <tr> <td>yes/no</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	staff initials	JT	DR	CJ							yes/no	X	X	X																	
staff initials	JT	DR	CJ																												
yes/no	X	X	X																												
Note where evidence found: 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																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">staff initials</td> <td style="width: 10%;">JT</td> <td style="width: 10%;">DR</td> <td style="width: 10%;">CJ</td> <td style="width: 10%;"></td> </tr> <tr> <td>+ or X / - or no</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	staff initials	JT	DR	CJ							+ or X / - or no	X	X	X																	
staff initials	JT	DR	CJ																												
+ or X / - or no	X	X	X																												
<p>Survey Most are very happy with job, enjoy working with consumers and for the agency, better communication and training were themes, all staff that participated in PSP training, expressed that training was thorough and helpful!! Found in training records, but difficult to locate, and missing some info in general. Staff survey conducted by QIS is documented under staff survey section of review.</p>																															

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

Staff Related:								insert QAOS #
Evidence Found of Staff Training:								
staff initials	JT	DR	CJ					
1st aid/CPR	9/9/2009	9/9/2009	9/9/2009					
Abuse Prevention	X	X	X					
Client Rights	X	X	X					
Incident Reporting	X	X	X					
Confidentiality	X	X	X					
IP/PSP Process	X	X	X					
CDS* complete w/in 6 months of hire date?	hire5/09	hire 6/09	hire5/09					
Medication Cert	x	did not pass	X/-					
Note where evidence found:								QAOS Commend #7
CDS ... 3 staff have not worked for 6 months yet However, I checked established staff and all have completed Tier 1 within 6 months of hire or when CDS began and several have completed tier 2....many staff have completed Tier 3 and one staff has completed all modules.								
Comments:								QAOS Commend #7
CJ: spreadsheet says med cert, but documentation could not be located (organization issue) Policies on orientation need to be updated to match provisions set by the DDP, and the date of update should be included. Abuse prevention Policy is outdated .. 1994 & 2003. IMC info needs to be current with the 2008 policy. Training records are kept at SL office and are unorganized with components of documentation missing. During the review LBSI determined that all staff training records will be kept at the main office and the individual in charge of QA will assure pertinent documentation is present and organized. The orientation/ training program is all inclusive and comprehensive. Additionally, LBSI recently ordered Abuse and Neglect tapes from YAI along with several other beneficial training videos. PSP training has started and staff are being trained.								

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

IP Checklist:		Note Site Reviewed:				Add sites as needed:			insert QAOS #
		WAC	WAC	GH	GH	P Thrift	P Thrift	P thrift	
Consumer Initials									
O n s i t e	Consumer/Family Survey	X	X	X	X	X	X	X	
	PSP/IP Available to all Staff	X	X	X	X	X	X	X	
	IPP/Actions Implemented	X	X	X	x/-	x/-	X	X	
	Data for IPP/Actions	X	X	X	x/-	x/-	X	X	
	Data Internally Monitored	X	X	X	X	X	X	X	
	Self Medication Objective	max pot	max pot	max pot	X	X	X	X	
	Consumer informed of grievance procedure	X	X	X	X	X	X	X	
	SL consumer choice of SL staff	n/a	n/a	n/a	n/a	n/a	n/a	n/a	
	Rights Restrictions	X	no	X	X/-	x/-	none	none	QAOS #3
**	PSP/IP Checklist	no	no	no	no	no	no	no	QAOS #3
M H P F	PSP/IP completed Annually?	X	no	X	no	no	X	no	
	Individual Needs Addressed?	X	X	X	X	X	X	X	QAOS #9
	Assessment Based?	X	X	X	X	X	X	X	commend
	Quarterly Reports?	X	X	X	X	X	no	X	
	Incident Reports Addressed?	X/-	X	x/-	X	X	X	X	
	Behavioral Supports Addressed?	X/-	X	x/-	X	X	X	X	
	Functional Analysis Needed?	X	X	X	X	X	X	X	
	Free from Aversive Procedures?	X	X	X	X	X	X	X	
<p>: see IP check list 2 ...biting behaviors toward others is an issue, SIB protocol in place, but I did not see a protocol regarding biting others. Small gaps in walking program, not concerning! very individualized plan -- hot springs trips during WAC take place along with other sensory activities. PSP, visions start with "We would like", visions are written as outcomes; PRN Ativan mentioned, protocol not part of PSP, some actions are written more for staff vs. . Apparently Tylenol is used prior to Ativan for behaviors, this needs to be incorporated into a protocol, also Ativan is used for seizures I did not see a protocol for this. : holes in documentation in regard to practicing coping skills, exercising and daily affirmations, cannot ride bike in community alone and can only walk up to a certain amount of time alone, rights restrictions were not submitted with PSP. On self medication program(commend #10); intro to PSP includes services and deficits, not completed within 365 days, visions #3&4 should be outcomes, vision #5 begins with "we'd like to see", start and end dates have ongoing vs. dates, protocol for PRN Ativan is not part of PSP, document does reference a protocol for Albuterol, but this is not part of the PSP, also several other protocols are in place that either are not part of the PSP or are not referenced in the PSP, diagnoses are not provided for behavior meds, the last action listed for an outcome should be the outcome for that year ... if wants to ride bike independently, the last outcome for this action is will ride bike independently.</p>									

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

IP Checklist:		Note Site Reviewed:			Add sites as needed:				insert	
Consumer Initials		SL apt	SL cong	SL cong	CS/ t falls	CS/ day	CS/ sl	CS/sl	CS/trans	QAOS #
O n s i t e	Consumer/Family Survey	X	X	X	X	X	X	see below	see below	QAOS #3
	PSP/IP Available to all Staff	X	X	X	X	X	X			
	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	X	max pot	X	n/a	X	X			
	Consumer informed of grievance procedure	x	X	X	X	X	X			
	SL consumer choice of SL staff	X	X	X	n/a	n/a	X			
	Rights Restrictions	none	no	none	none	X	X			QAOS #3
**	PSP/IP Checklist	no	no	no	no	no	no			
M I N I P T	PSP/IP completed Annually?	X	no	no	no	no	no			
	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?	X/-	X	X	X	X	X			
	Functional Analysis Needed?	X	X	X	X	X	X			
Free from Aversive Procedures?	X	X	X	X	X	X				
<p>: PSP not done annually, services listed in intro, some visions are more like outcomes, dates are listed as ongoing, implementation strategies are not indicated may benefit from behavioral supports surrounding relationships</p> <p>: protocols in place that need corresponding rights restrictions and subsequent programming to lift restrictions (e.g. several areas of apartment not accessible/ locked due to safety reasons; cannot walk alone, cannot eat alone, etc.). Uses PRN Ativan, not in PSP, visions begin with the statement "We Want", Actions seem the same year to year (start date ongoing), IS missing, some actions appear to relate more to staff responsibilities VS. what will do.</p> <p>: PSP intro discusses services, outcomes not listed, Visions seem more like outcomes, not completed annually; PSP references that SL will assist with PRN when requests, however a PRN is not listed under medications, dx not provided for behavioral meds.</p> <p>: PSP not completed annually, data: communication program a component of PSP, documentation stops on 7/17/09, thrift store staff claim they have been running the program b/c of the benefit, was not aware the program is still a component of PSP. Intro to PSP lists services, implementation strategies are not a part of PSP, start dates are listed as on-going indicating same programming year to year.</p> <p>: PSP not completed annually, services listed in intro, Visions are more like outcomes, things I am afraid of is not filled out, implementation strategies are not indicated, dates are on-going, seizure d/o listed PSP does not indicate need for supervision while bathing?</p> <p>: purchases SL with CS, no plan in place, meets when needed with opps manager to complete bills and receive money. Money management is done for health and safety reasons and to maintain current community residence possibly purchasing health and health maintenance may be more beneficial.</p> <p>: uses CS primarily for transportation reimbursement, will purchase educational services this FY, no plan in place</p>										

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

Residential Site Checklist:		Make note of site reviewed							insert
	Site Name	WAC	GH	SL/ KM	SL/CB	P thrift	T thrift	ind. Apt/ JF	
H e a l t h S a f e t y	Bathing procedures posted	n/a	X	n/a	n/a	n/a	n/a	n/a	commend QAOS #5
	Clean/Sanitary Environment	X	X	X	X	X	X	X	
	Egress	X	X	X	X	X	X	X	
	Hot Water Temps	X	X	X	X	X	X	X	
	Emergency Assistance	X	X	X	X	X	X	X	
	Fire Extinguishers/smoke Detectors	X	X	X	X	X	X	X	
	1st Aid/CPR Supplies Accessible/Available	X	X	X	X	X	X	X	
	PRN Medications	X/-	X	X	X	x/-	X/-	X	
	Medication Procedures	X/-	X	X/-	X/-	x/-	X/-	X	
	Medication Locked Storage	x/-	X	X	X	no	NO	n/a	
	Medication Administration Records	X	X	X/-	X/-	NO	NO	n/a	
	Staff Ratios or ICP staffing	X	X	X	X	X	X	X	
	Awake Overnight Staff	n/a	X	X	X	N/A	N/A	n/a	
	Adequate Supplies	X	X	X	X	X	X	X	
Storage of Supplies	X	X	X	X	X	X	X		
Free from aversive procedures?	X	X	X	X	X	X	X		
D a i l y	Weekly integrated activities	X	X	X	X	X	X	X	QAOS #4
	House or Site Rules	X	none	none	none	NONE	approp.	none	
	Opportunities for choice, self determination	X	X	X	X	X	X	X	
	Meal Prep, Mealtime	X	X	X	X	N/A	n/a	X	
	Engagement in Daily Life	X	X	X	X	X	X	X	
	Participation in Daily Living Skills	X	X	X	X	X	X	X	
	Daily Leisure Opportunities	n/a	no doc	no doc	no doc	n/a	n/a	n/a	
	Staff Trained in Individual Specifics	X	X	X	X	X	X	X	
<p>Quarterly safety meetings are held and cover all aspects of consumer safety, documentation is very organized, and easy to follow. Monthly consumer safety meetings are also held. Fire drill evac/ smoke alarms/ detectors check is all one sheet.... awesome!!! Need a place to document follow up regarding issues encountered during drills with consumers. Group home drills are conducted every month on various shifts. had issues two times... 1) could not find her, subsequently the drill lasted over 4 minutes; 2) she was angry and hard to direct outside... drill lasted 8min (should be part of her PSP). NOC was available for review one conducted at midnight, and one conducted at 11:15pm... need to complete an AM drill prior to leaving for work. Plains thrift, documentation of drills are missing for 4/09 & 5/09; WAC 1/09--- 7-24-09; Thompson Falls and Supported Living all documentation present with no issues. Please see QAOS #2 for medication issues. The group home was clean, organized and consumer rooms are person centered. The menu system appears balanced, fire evac is posted and weekly integrated activities are part of the routine. Daily leisure is still not being documented. Daily documentation should be completed using only one form. Currently caregivers have to use several different forms to document daily routines and programming, one form would allow for consistency and ease. Also, at Plains thrift both a first aid log and a med book are utilized, for consistency and ease I recommend one area to document all medication including OTC PRN medication. The attendance book at Plains thrift did not have a record for 2009. Program documentation was fabulous in all service areas. ** Narcotic count is part of the LBSI daily schedule put into place on 8/25/09**</p>									Commend QAOS #6
									QAOS #3

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

KEY

Report Submitted on 11/6/09
 (mark "+" or "X" if present, "-" or "no" if not)

Residential Site Checklist:									insert QAOS #
	Site Name	red Taurus	Red Van	kia van	silver van	07 taurus	04 taurus	MDT	
T r a n s p o r t a t i o n	Driver Orientation Program	X	X	X	X	X	X	x	
	Wheelchair tie downs	n/a	n/a	n/a	n/a	n/a	n/a	X	
	Wheelchair Lift	n/a	n/a	n/a	n/a	n/a	n/a	X	
	Driver's Licenses	X	X	X	X	X	X	X	
	Emergency Supplies	X	X	X	no	X	X	X	
	Fire Extinguisher	X	X	X	X	X	X	X	
	Transportation Log	X	X	X	X	X	X	X	
	Scheduled Maintenance Program	X	X	X	X	X	X	X	
	Training--Staff Doing Maintenance Checks	X	x	x	x	x	x	x	X
	Procedures for Timely Repairs	X	X	X	X	X	X	X	X
MDT* inspection on file (MDT vehicles only)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	X	
Comments:									
* MDT = Montana Department of Transportation									
Comments:									
<p>7 vehicles are used, 1 vehicle is an MDT vehicle ... quarterly reports to MDT were available for review. Weekly vehicle inspections are completed, which includes checking seatbelts, temp controls, tires, door latches, fire extinguishers, emergency kits, etc. Also, the odometer is checked at this time and the next oil change is documented. Either SL coordinator or Opps manager checks vehicles. Section 7 of the policy and procedure manual outlines the driver orientation program including but not limited to W/C tie downs, W/C lifts, emergency supplies, and preventative maintenance. Also found, is evidence that a road test is conducted with employees prior to driving.</p>									

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

FOR EACH STAFF:
Ask one question per topic area, if incorrect as a second if still incorrect move on the next topic area.
 (mark "+" or "X" if correct, "-" or "no" if not)

KEY

Staff Survey:									insert QAOS #
		Staff Initials	MA	HM	JT				
A b u s e	Allegations are reported to? (APS)	X	X	X					
	Do you notify Supervisor first? (NO)	N/A	N/A	N/A					
	Steps to take if abuse is discovered?	N/A	N/A	N/A					
	Comments:								
R i g h t s	Suspect theft of gloves, steps to take?	X	X	X					
	IP/PSP requests Doctors appt	N/A	N/A	N/A					
	No jacket, -25 consumer wants to leave	N/A	N/A	N/A					
	Review Right's Restriction	N/A	N/A	N/A					
Comments:									
** b m p **	describe consumer behaviors	X	X	X					
	staff response to behaviors by plan	N/A	N/A	N/A					
	list proactive or environmental strategies	N/A	N/A	N/A					
	Comments:								
H o m e h e l p h o m e	former employee wants info	X	N/A	X					
	what is consumer information?	N/A	X	N/A					
	training to meet health and safety needs?	N/A	N/A	N/A					
	emergency evacuation procedures?	N/A	N/A	N/A					
Comments:									
Comments:									

** = Behavior Management Plans

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

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

Report Submitted on 11/6/09 **KEY**

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

Staff Survey:									insert QAOS #
	Staff Initials	MA	HM	JT					
m e d i c a t i o n s	describe procedure to assist with meds if med is unavailable?	not	n/a	X					
	if gave wrong med?	med	n/a	n/a					
	if moving to a new place or gets new med?	cert	n/a	n/a					
	requirement to assist with meds?		n/a	n/a					
	describe PRN or OTC* is to be given		n/a	n/a					
	what constitutes a med error?		X	n/a					
				n/a	n/a				
Comments:									
* OTC = over-the-counter									
E R C	steps to avoid power struggles	X	X	X					
	how to respond to someone who is upset	n/a	n/a	n/a					
	what if you start to lose control?	n/a	n/a	n/a					
	Comments:								
** = Emotionally Responsible Caregiving									
I N C I D E N T R E P O R T I N G A N D M A N A G E M E N T	when do you fill out an incident report?	X	X	X					
	notifications for Emergency Room visit?	n/a	n/a	n/a					
	consumer to consumer incidents	n/a	n/a	n/a					
	who writes the Incident Report?	n/a	n/a	n/a					
Comments:									
* = Incident Reporting and Management									

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

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

Report Submitted on 11/6/09 **KEY** (mark "+" or "X" if correct answer, "-" or "no" if not)

Staff Survey:									insert QAOS #
	Staff Initials	MA	HM	JT					
B O D Y	consumer destroying things	X	X	X					
	staff pinches consumer back	n/a	n/a	n/a					
	how do you know a support plan is needed?	n/a	n/a	n/a					
	Comments:								
* I P / P S P	what is IP/PSP based on?	X	X	X					
	you have an idea for an objective.....	n/a	n/a	n/a					
	why do assessments?	n/a	n/a	n/a					
	How do you find out what someone would like to do?	n/a	n/a	n/a					
	Comments:								
	* = IP = Individual Plan PSP = Personal Support Plan								
Comments: All staff interviewed were able to answer survey questions without issue.									commend QAOS #7

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

Report Submitted on **11/6/09**
 KEY (mark "+" or "X" if positive/correct, "-" or "no" if not)
 "-" or "no" indicates need for follow up
 and comments in lilac area below

Consumer Questionnaire by QIS.		ALL questions are MANDATORY					insert QAOS #
USE THIS FOLKS WHO CAN ANSWER QUESTIONS		Consumer initials					
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)		X	X	X	X	X	
c o n s u m e r	Do you have nice staff at home/work?	X	X	X	X	X	
	Is anyone mean to you at home/work?	X	X	X	X	see below	
	Do you like where you live/work?	X	X	X	X	see below	
	Are you ever afraid of anyone?	X	X	X	X	see below	
	Someone hits/hurts you, who can you tell?	X	X	X	X	X	
	Does anyone talk to you about this?	X	X	X	X	X	
	Can you get help when you need it?	X	X	X	X	X	
	from staff?	X	X	X	X	X	
	from Case Manager?	X	X	X	X	X	
	Can you get your own food/drink?	no	X	X	X	X	
	Do people come into your house/room without knocking or getting permission?	X	X	X	X	X	
	Do staff ever take things from you?	X	X	X	X	X	
	Can you get rides to places you need to go?	X	X	X	X	X	
Rides to the places you want to go?	X	X	X	X	X		
Who is your Case Manager?	X	X	X	X	X		
Does s/he talk to you about waiver services?	X	X	X	X	X		
Does s/he help you get what you need?	X	X	X	X	X		
Comments:							
<p>: is not allowed to have access to her own food and drink due to severe choking risk, needs to be in place, or documentation reflecting adequate opportunities to access food.</p> <p>: another consumer at home is mean to her, expresses that is hard to deal with this individual when she is hitting, she does not like working at the thrift store she wants to work with pets (programming is in place), she used to be afraid of a certain staff member; however, this is no longer an issue.</p>							

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

Agency: **Little Bitterroot Services INC**
 Evaluator(s): **Kara Gehring**
 Dates Covered by Review: **9/11/08 - 9/18/09**

Report Submitted on **11/6/09**
 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

Consumer Questionnaire (used by QIS).		ALL questions are MANDATORY					
ASK CAREGIVERS IF THE CONSUMER IS UNABLE TO ANSWER QUESTIONS		Consumer initials					
S u p p o r t	Who helps this person and how?	X	X				
	Are there some staff/peers they like better?	X	X				
	Staff/peers they don't like? Why?	see below	see below				
	Current needs not being met?	met	met				
	Health and Safety related?	met	met				
	Who do you talk to about these concerns?	X	X				
	Does the person have input to his/her life?	X	X				
	If you have concerns, who do you talk to?	X	X				
	are they resolved?	X	X				
	What are this persons wishes/dreams?	X	X				
	is the plan moving that direction?	X	X				
	what would make things better?	X	X				
	does this person ever seem afraid?	X	X				
	are you afraid for them?	X	X				
	Does this person know how or where to report abuse?	X	X				
	who provided that training?	X	X				
	Who will the individual call or report to?	staff	mom				
	who provided that info?	staff	staff				
	Does the person have transportation to all services and places s/he would like to go?	X	X				
	who is the person's case manager?	X	X				
Does CM help the person access services?	X	X					
Does the CM explain waiver services?	x	X					
Does the person understand this info?	no	no					

insert QAOS #

Comments:

: obvious that there are certain staff considered favorites, he indicates this by choosing to sit/ migrate toward the staff member, staff believe living in a quieter environment would be preferential.

: exhibits staff preferences, his favorite individual is his Mom