

**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

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

<b>Agency Name:</b>	<b>Residential Support Services</b>
<b>Evaluator(s):</b>	<b>Don Ellingson</b>
<b>Dates Covered by Review:</b>	<b>March 2008 - July 2009</b>

DESK REVIEW	* QAOS = Quality Assurance Observation Sheet	insert * QAOS #
<b>Accreditation:</b>		
Accreditation is no longer required by the state.		
<b>Significant Events from the Agency:</b>		
<p>RSS has experienced many changes and numerous adjustments through the course of the review period. one administrative position has never been filled, and others have been adjusted or expanded. RSS has added skilled Nursing to it's menu of services provided by the agency. As a result RSS now employs 6 nurses... 4 LPN and 2 RN. RSS also added 1 bed to it's capacity by becoming licensed at constellation for 7, increasing that home's capacity from 6 to 7. MD has made a successful transition into Constellation, and continues to be happy there.</p> <p>Following is a breif list of accomplishments:</p> <ul style="list-style-type: none"> <li>Restructure of RSS admin.</li> <li>Improved communication, both, between RSS and DDP and Case Management, and RSS and other local providers.</li> <li>Restructure of IMC</li> <li>Computers in all 11 GH's</li> <li>Assistance with temporary/crisis placements</li> <li>Addition of tough to serve... EM and HF</li> <li>Bring MO home after possible TBI</li> <li>Begin process of rewriting RSS policy Manual.</li> <li>RSS became a Qualified provider of Respite.</li> <li>RSS introduced "Options" as an alternative to the existing community day programs.</li> <li>Ramp at Fair park</li> <li>New kitchen at Const.</li> <li>Redone bath and bed at Const.</li> <li>Redone bath at granger</li> </ul>		
<b>Agency Internal Communications Systems:</b>		
<p>Communication within the agency has improved greatly in the past couple of years. This year, with the addition of updated computers at every site, information moves very fast among direct care staff and administration. Policy changes or updates are made available to Group Home managers electronically or at Management meetings every other week, and they discuss with staff at weekly staff meetings. Agency decisions are communicated to the Board of Directors, by the Executive Director, at monthly board meetings. The results are moved back through the agency via Management meetings or e-mail.</p>		

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**Policies and Administrative (DDP) Directives**

Early in the review period RSS had a committee that was reading and updating agency policy. Some of those redone portions included protocols for PRN medications, Incident management, on-site files, and job descriptions and duties within the agency.

DDP has generated a great deal of new and updated policies that will need to be looked at and either updated within current RSS policy or newly included in RSS policy.

In addition RSS now employs Nurses and delivers Skilled Nursing services that are likely going to need to be addressed in agency policy.


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DESK REVIEW	insert QAOS #
<p><b>Fiscal (audits, cost plans, invoices):</b></p> <p>DPHHS audit reviews RSS's internal audit. For the fiscal year ending June 30, 2008 they found that the opinions in the audit were unqualified. They noted that the net assets had increased by \$121,744 which was an increase from the past 3 years. The defensive interval ratio also increased from 1.69 in 2006 to 2.34 in 2008. And the working cash reserve increased by \$1,523 for a total balance of \$63,049. It is good to see the increase in these financial bench marks which show an increase in the financial health of RSS.</p> <p>RSS submits required financial information in a timely fashion to the regional office.</p> <p>Last FY an individual who RSS was the payee lost their Medicaid eligibility due to excessive resources. This individual's services at RSS as well as the corporation that provides the day program services are funded with Medicaid dollars. The Regional Manager is recommending that RSS have a policy on maintaining individual's Medicaid eligibility. The policy should include how to handle payment for services when a person is over resources without requesting state general funds for this purpose.</p>	
<p><b>Licensing ( for Group Homes, Adult Foster sites and Assisted Living sites):</b></p> <p>All homes have current and up to date licenses. Constellation received a new license making it a 7 person home. A few issues had been reported to Licensing this last year, including allegations of abuse by staff that were followed up by APS and RSS administration. APS found physical neglect was not indicated. Licensing was also contacted when it was found that a staff was wanted for arrest in another state. RSS had conducted all required checks previous to hire. Licensing and DDP took no action.</p>	



After reviewing IM minutes and looking at reports from the past some of the trends seen and addressed this review are as follows: increased behaviors from two clients resulting in many meetings, creation of BMP, and consult from Connie Orr. Therap will be available and online in October and this should streamline the process of collecting and aggregating data. In the 16 months from April 1st, 2008 - July 31, 2009 RSS reported a total of 1143 incidents. this equates to roughly 6-7 per home per month, wich seems like a realistic amount. RSS has been in the past and continues to report everything that needs to be reported.

There has been a noteable overall increase in Incident Reporting since Oct. of 2008. Some of data was skewed by the several individuals in a few homes that have gone through some tough transitions including returning from a convelescence after a significant Neurological event, and a couple of others struggling with cycles of depression and/or potential over-medication. After some Critical incident reviews at DDP, that were followed up with suggestions RSS has increased the amount of scrutiny regarding medication, and Behavior management by writing and re-writing Protocols, and having nurses periodically monitor MAR sheets as well as offering traing of protocols. Staff have been required to go through training repeatedly if the Incident Management Committee sees trends in Med related errors, or issues of suspected abuse or neglect, and staff are told repeatedly that these exercises are not punitive, but rather empowering. As a result of these efforts RSS has simply seen more reporting accross the agency as a whole.

An increase in reports of alleged neglect, abuse, or exploitation with APS involvement. APS has not found indications of maltreatment in most all of the isolated events. APS involvement on three occasions, involving the same staff, ended with that staff being terminated, after having been to several homes. RSS has been working hard at empowring it's staff to contact APS whenever there are concerns, which is likely directly related to increased APS involvement without findings of maltreatment. RSS is being commended for their diligent efforts in this area, as it is likely better to have many reports that turn out to be little or nothing than risking limited reporting when it could be substantiated. = QAOS #12 see attached

#12

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

Staff Related:										insert QAOS #
<b>Evidence Found of Orientation Training</b>										Use three to five staff ~ new hires
staff initials	HT	MH	AS	CH	SD					
+ or X / - or no	X	X	X	X	X					100%
Note where evidence found: personnel files, staff training records, agency employment application										
<b>Evidence Found DDCPT or equivalent:</b>										For intensive staffing only - LOC for Waiver indicates Intensive determination
staff initials	HT	MH	AS	CH	SD					
+ or X / - or no	no	no	no	no	no					not required
Note where evidence found: personnel files, staff training records, agency employment application. This is no longer required by the State, but RSS continues to have staff, of Lead staff and above, complete the curriculum										
<b>Evidence of Criminal Background Checks:</b>										Use three to five staff ~ new hires
staff initials	HT	MH	AS	CH	SD					
yes/no	X	X	X	X	X					100%
Note where evidence found: personnel files, staff training records, agency employment application										
<b>Evidence of Staff Survey:</b>										Interview at least one staff per site visited, no less than 5 staff
staff initials	HT	MH	AS	CH	SD					
+ or X / - or no	no	no	no	no	no					
Note where evidence found: personnel files, staff training records, agency employment application. At this time RSS does not perform staff surveys, and it is not currently required by the state										

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Staff Related:							insert QAOS #
<b>Evidence Found of Staff Training:</b>							
<b>staff initials</b>	<b>HT</b>	<b>MH</b>	<b>AS</b>	<b>CH</b>	<b>SD</b>		
1st aid/CPR	X	X	X	X	X		100%
Abuse Prevention	X	X	X	X	X		100%
Client Rights	X	X	X	X	X		100%
Incident Reporting	X	X	X	X	X		100%
Confidentiality	X	X	X	X	X		100%
IP/PSP Process	X	X	X	X	X		100%
CDS* complete w/in 6 months of hire date?	X	X	X	X	X		100%
Medication Cert	X	X	X	X	X		100%
<b>Note where evidence found:</b>							
HT= Personel File    AS = Personel File    SD = Personel File							
MH=Personel File    CH = Personel File							
* CDS = College of Direct Supports							
<b>Comments: Training and screening records looked good, and easy to find. All requirements met for all sections</b>							
<b>RSS should continue being diligent in their training efforts with both new staff and veterans</b>							

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IP Checklist:		Note Site Reviewed: RESIDENTIAL						Add sites as needed:		insert
Consumer Initials		Granger	Granger	No. 18th	No. 18th	Ant. 1	Ant. 1	Constillati	Fairpark	QAOS #
<b>O n s i t e</b>	Consumer/Family Survey	X	X	X	X	X	X	X	X	
	PSP/IP Available to all Staff	X	X	X	X	X	X	X	X	
	IPP/Actions Implemented	X	X	X	X	X	X	X	X	
	Data for IPP/Actions	X	X	X	X	X	X	X	X	
	Data Internally Monitored	X	X	X	X	X	X	X	X	
	Self Medication Objective	X	X	X	X	X	X	X	X	
	Consumer informed of grievance procedure	X	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	N/A	
	Rights Restrictions	X	X	X	X	N/A	N/A	N/A	X	
**	PSP/IP Checklist									
<b>C M I N I P T</b>	PSP/IP completed Annually?	X	X	X	X	X	X	X	X	
	Individual Needs Addressed?	X	X	X	X	X	X	X	X	
	Assessment Based?	X	X	X	X	X	X	X	X	
	Quarterly Reports?	X	X	X	X	X	X	X	X	
	Incident Reports Addressed?	X	X	X	X	X	X	X	X	
	Behavioral Supports Addressed?	no	X	X	X	X	X	X	X	
	Functional Analysis Needed?	X	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
	Free from Aversive Procedures?	X	X	X	X	X	X	X	X	
<b>Comments: (regarding service planning and delivery)</b>										
<p>at Granger is scheduled to receive an ABA assesment followed by a behavior plan to address needs. Currently Granger, North 18th, Antelope 1, Constellation and Fairpark are meeting or exceeding all required participation in the PSP process.</p>										
** = Case manager										

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KEY

(mark "+" or "X" if present, "-"

IP Checklist:		Note Site Reviewed:							Add sites		insert QAOS #
		Panners	20th st	Westches	Westches	Stillwater	Lewis	Respite	Foster		
<b>Consumer Initials</b>											
<b>O n s i t e</b>	Consumer/Family Survey	X	X	X	X	X	X	X	X		
	PSP/IP Available to all Staff	X	X	X	X	X	X	X	X		
	IPP/Actions Implemented	X	X	X	X	X	X	X	X		
	Data for IPP/Actions	X	X	no	no	X	X	no	no	#14	
	Data Internally Monitored	X	X	X	X	X	X	no	no		
	Self Medication Objective	X	X	X	X	X	X	X	X		
	Consumer informed of grievance procedure	X	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	X	X		
Rights Restrictions	X	no			no		no	no			
<b>** C M P U T E R</b>	PSP/IP Checklist										
	PSP/IP completed Annually?	X	X	X	X	X	X	X	X		
	Individual Needs Addressed?	X	X	X	X	X	X	X	X		
	Assessment Based?	X	X	X	X	X	X	X	X		
	Quarterly Reports?	X	X	X	X	X	X	X	X		
	Incident Reports Addressed?	X	X	X	X	X	X	X	X		
	Behavioral Supports Addressed?	X	X	X	X	X	X	X	X		
	Functional Analysis Needed?	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
	Free from Aversive Procedures?	X	X	X	X	X	X	X	X		
<b>Comments: (regarding service planning and delivery)</b>											
<p>"Consumer informed of grievance procedure" the consumers are able to understand at varying degrees. When guardians are available they are informed and understand the procedure.</p> <p>RSS submits quarterlies based on the calendar year. the last submitted and filed Quarterlies are for the Quarter ending June30, 2009.</p> <p>Westchester had books with Data, but at the time of this review had missing or scattered data. after discussion with Group Home Management efforts will be made to keep accurate and timely data. see QAOS # 14</p> <p>Currently Panners, 20th, Lewis, and Stillwater are meeting or exceeding all required participation in the PSP process, Westchester will monitored closely.</p>											
** = Case manager											

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Make note of site reviewed

residential Site Checklist:		Make note of site reviewed						insert QAOS #
Site Name		Panners	Constillation	Westchester	Stillwater	Granger	Fairpark	
<b>H</b> <b>e</b> <b>a</b> <b>i</b> <b>t</b> <b>h</b>	Bathing procedures posted	X	X	X	no	X	X	
	Clean/Sanitary Environment	X	X	X	X	X	X	
	Egress	X	X	X	X	X	X	
	Hot Water Temps	X	X	X	X	X	X	
	Emergency Assistance	X	X	X	X	X	X	
	Fire Extinguishers/smoke Detectors	X	X	X	X	X	X	
	1st Aid/CPR Supplies Accessible/Available	X	X	X	X	X	X	
	PRN Medications	X	X	X	X	X	X	
<b>S</b> <b>a</b> <b>f</b> <b>e</b> <b>t</b> <b>y</b>	Medication Procedures	X	X	X	X	X	X	
	Medication Locked Storage	X	X	X	X	X	X	
	Medication Administration Records	X	X	X	X	X	X	
	Staff Ratios or ICP staffing	X	X	X	X	X	X	
	Awake Overnight Staff	X	X	X	X	X	X	
	Adequate Supplies	X	X	X	X	X	X	
	Storage of Supplies	X	X	X	X	X	X	
	Free from aversive procedures?	X	X	X	X	X	X	
<b>D</b> <b>a</b> <b>i</b> <b>l</b> <b>y</b>	Weekly integrated activities	X	X	X	X	X	X	
	House or Site Rules	X	X	X	X	X	X	
	Meal Prep, Mealtime	X	X	X	X	X	X	
	Engagement in Daily Life	X	X	X	X	X	X	
	Participation in Daily Living Skills	X	X	X	X	X	X	
	Daily Leisure Opportunities	X	X	X	X	X	X	
	Staff Trained in Individual Specifics	X	X	X	X	X	X	
<b>Comments:</b>								
<p>Bathing procedures could not be posted in the bath rooms at Stillwater due to behaviors of one resident, but were in individual books and in office. As of todays date that individual is no longer in the home.</p> <p>All RSS sites had no obvious or implied site rules that would be considered aversive, or in any violation of client rights.</p>								

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Make note of site reviewed

DP/Retirement Site Checklist:		Make note of site reviewed						insert QAOS #
Site Name		Lewis	No 18th	Ant 1	Ant 2	20th		
<b>H</b> <b>e</b> <b>a</b> <b>i</b> <b>t</b> <b>h</b>	Bathing procedures posted	X	X	X	X	X		
	Clean/Sanitary Environment	X	X	X	X	X		
	Egress	X	X	X	X	X		
	Hot Water Temps	X	X	X	X	X		
	Emergency Assistance	X	X	X	X	X		
	Fire Extinguishers/smoke Detectors	X	X	X	X	X		
	1st Aid/CPR Supplies Accessible/Available	X	X	X	X	X		
	PRN Medications	X	X	X	X	X		
<b>S</b> <b>a</b> <b>f</b> <b>e</b> <b>t</b> <b>y</b>	Medication Procedures	X	X	X	X	X		
	Medication Locked Storage	X	X	X	X	X		
	Medication Administration Records	X	X	X	X	X		
	Staff Ratios or ICP staffing	X	X	X	X	X		
	Awake Overnight Staff	X	X	X	X	X		
	Adequate Supplies	X	X	X	X	X		
	Storage of Supplies	X	X	X	X	X		
	Free from aversive procedures?	X	X	X	X	X		
<b>D</b> <b>a</b> <b>i</b> <b>l</b> <b>y</b>	Weekly integrated activities	X	X	X	X	X		
	House or Site Rules	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		
<b>Comments:</b>								
Visits for this review and quarterly site visit reviews show consistant staff to client ratios, well maintained homes and environments that allow clients engagement in daily life. In addition RSS has had NO incidents involving restraints over the course of this review,								

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DP/Retirement Site Checklist:		Make note of site reviewed						insert	
Site Name		DP site	Retirement	Retirement	Retirement	Retirement	Retirement	QAOS #	
		Options	Constillation	Lewis	Fairpark	Panners			
<b>H</b> <b>e</b> <b>a</b> <b>l</b> <b>t</b> <b>h</b>	Bathing procedures posted	NA	X	X	X	X			
	Clean/Sanitary Environment	X	X	X	X	X			
	Egress	NA	X	X	X	X			
	Hot Water Temps	X	X	X	X	X			
	Emergency Assistance	X	X	X	X	X			
	Fire Extinguishers/smoke Detectors	X	X	X	X	X			
	1st Aid/CPR Supplies Accessible/Available	X	X	X	X	X			
	PRN Medications	X	X	X	X	X			
	<b>S</b> <b>a</b> <b>f</b> <b>e</b> <b>t</b> <b>y</b>	Medication Procedures	X	X	X	X	X		
		Medication Locked Storage	X	X	X	X	X		
		Medication Administration Records	X	X	X	X	X		
		Staff Ratios or ICP staffing	X	X	X	X	X		
		Awake Overnight Staff	n/a	n/a	n/a	n/a	n/a		
Adequate Supplies		X	X	X	X	X			
Storage of Supplies		X	X	X	X	X			
Free from aversive procedures?	X	X	X	X	X				
<b>D</b> <b>a</b> <b>i</b> <b>l</b> <b>y</b>	Weekly integrated activities	X	X	X	X	X			
	House or Site Rules	no	no	no	no	no			
	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:**

RSS has been operating retirement programs in homes for a number of years, and these continue to be successful. Option was created and opened to provide an alternative facility for folks that were not successful in traditional day programs, but did not wish to remain home or "retire". Options operates on the idea that not everyone can or wishes to work, and not everyone does well being expected to adhere to strict times of coming in and going home. Not everyone enjoys structured group activities at predetermined times. This facility allows individuals to come in and go home at flexible times, it allows them to engage in activities of their choice, as often as they wish or can tolerate. It allows some who might choose retirement to attend a workshop part time and spend the remaining time at Options watching TV, playing games, doing crafts, or going for walks. For the few who have been attending it has been successful. The environment is low pressure, and it allows one more option between traditional Day services and Retirement services. there have been some concerns early on that "not much goes on there". RSS did not want to open another place that looked and felt like the others, but saw a need to provide a facility for people to go outside the home, if their age, disability, personality, or health did not mesh with the programs currently available.



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Transportation Site Checklist:									insert QAOS #
	Site Name	Granger/4	Fairpark/2	No.18th/15	20th/3	Ant1/21	Ant2/5	Lewis/6	
<b>T r a n s p o r t a t i o n</b>	Driver Orientation Program	X	X	X	X	X	X	X	
	Wheelchair tie downs	X	n/a	X	n/a	n/a	X	X	
	Wheelchair Lift	X	n/a	X	n/a	n/a	X	X	
	Driver's Licenses	X	X	X	X	X	X	X	
	Emergency Supplies	X	X	X	X	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	
	Procedures for Timely Repairs	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	
Comments:									
* MDT = Montana Department of Transportation									
<b>Comments:</b>									
During this review and quarterly site visits Group home transportation was observed to be in operating condition. Occasional trash was found, but nothing that would pose any risk to health or safety. Vehicles contained OSHA Van kits containing CPR masks, gloves, gowns, disinfectant bio-hazrd stickers and collection bags. Maintenance records showed timely scheduled service as well as any unforeseen repairs. weekly inspections are performed by GH staff. When vehicles need repaired staff simply contact administrative office and repairs are completed, usually in days. RSS does now and has been using a mechanical repair shop which allows for quick turn around times and easy to access records. RSS is looking forward to an additional vehicle									

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Transportation Site Checklist:							-> transportation only, no affiliation with DP or GH		insert QAOS #
	Vehicle Name/ #	Lewis/13	Office/22	Office/23	Office/unk	Office/?			
<b>T r a n s p o r t a t i o n</b>	Driver Orientation Program	X	X	X	X	X			
	Wheelchair tie downs	X	X	X	X	X			
	Wheelchair Lift	X	X	X	X	X			
	Driver's Licenses	X	X	X	X	X			
	Emergency Supplies	X	X	X	X	X			
	Fire Extinguisher	X	X	X	X	X			
	Transportation Log	X	X	X	X	X			
	Scheduled Maintenance Program	X	X	X	X	X			
	Training--Staff Doing Maintenance Checks	X	X	X	X	X			
	Procedures for Timely Repairs	X	X	X	X	X			
MDT* inspection on file (MDT vehicles only)	n/a	X	n/a	n/a	n/a				
Comments:									
#'s 22 and 23 are used for transportation to and from work and day programs for clients both in and out of RSS services.									
* MDT = Montana Department of Transportation									
Comments:									

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 Evaluator(s): Don Ellingson  
 Dates Covered by Review: March 2008 - July 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, "-" or "no" if not)

Staff Survey:		LM	CK	BW	AH	Angela	LK	IZ	KW	MO	% correct	QAOS #
<b>A b u s e</b>	Staff Initials											
	Allegations are reported to? (APS)	X	X	X	X	X	X	X	X	X	100%	
	Do you notify Supervisor first? (NO)	X	X	X	X	X	X	X	X	X	100%	
	Steps to take if abuse is discovered?											
	Comments: Excellent											
<b>R i g h t s</b>	Suspect theft of gloves, steps to take?	X	X	X	X	X	X	X	X	X	100%	
	IP/PSP requests Doctors appt	X	X	X	X	X	X	X	X	X	100%	
	No jacket, -25 consumer wants to leave											
	Review Right's Restriction											
	Comments: Excellent											

<b>** b m p **</b>	describe consumer behaviors	X	X	X	X	N/A	X	X	X	X	100%
	staff response to behaviors by plan	X	X	X	X	N/A	X	X	X	X	100%
	list proactive or environmental strategies					N/A					
	Comments LM (Ant 1) No BP's written outside of one person using a tool provided by counselor Angela at Panners works retirement only and was not familiar at all with Behavior plans. Excellent										
<b>o r i e h e n o r i e h e n</b>	former employee wants info	X	X	X	X	X	X	X	X	X	100%
	what is consumer information?	X	X	X	X	X	X	X	X	X	100%
	training to meet health and safety needs?										
	emergency evacuation procedures?										
	Excellent										
Comments:											
** = Behavior Management Plans											

Review

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

Staff Survey:		insert									QAOS #
	Staff Initials	LM	CK	BW	AH	Angela	LK	IZ	KW	MO	
<b>m e d i c a t i o n s</b>	describe procedure to assist with meds	X	X	X	X	X	X	X	X	X	100%
	if med is unavailable?	X	X	X	no	X	X	X	X	X	89%
	if gave wrong med?	X	X	X	X	X	X	X	X	X	100%
	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:											
Only 1 staff, AH, did not know to call Pharmacy or medical professional if medication was missing or unavailable. Great											
* OTC = over-the-counter											
<b>** E R C</b>	steps to avoid power struggles	X	X	X	X	X	X	X	X	X	100%
	how to respond to someone who is upset	X	X	X	X	X	X	X	X	X	100%
	what if you start to lose control?	X	X	X	X	X	X	X	X	X	100%
	Comments:										
Excellent											

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*	when do you fill out an incident report?	X	X	X	X	X	X	X	X	X	100%
	notifications for Emergency Room visit?	no	X	no	no	no	no	X	X	X	44%
	consumer to consumer incidents	X	X	X	X	X	X	X	X	X	100%
	who writes the Incident Report?	X	X	X	X	X	X	X	X	X	100%
	Comments:										
	Still a problem with staff knowing to contact DDP office when a consumer is hospitalized. When survey was completed I asked them if they knew the DDP office needed to be notified and the answer from more than 75% was "GH manager makes that call." It is also noted that ER trips are performed by Management so support staff have not often been expected to make this call.										
*	* = Incident Reporting and Management										

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

Staff Survey:		KEY (mark "+" or "X" if correct answer, "-" or "no" if n										insert QAOS #
	Staff Initials	LM	CK	BW	AH	Angela	LK	IZ	KW	MO		
<b>B</b>	consumer destroying things	X	X	X	X	X	X	X	X	X	100%	
	staff pinches consumer back	X	X	X	X	X	X	X	X	X	100%	
	how do you know a support plan is needed?	X										
	Comments: Excellent											
<b>I P / P S P</b>	what is IP/PSP based on?	X	X	X	no	no	X	no	X	X	67%	
	you have an idea for an objective.....	X	X	X	X	X	X	X	X	X	100%	
	why do assessments?	X	X	no	no	no	X	no	X	X	56%	
	How do you find out what someone would like to do?	X	X	X	no	no	X	X	X	X	78%	
	Comments: Four staff did not know what assessments were used for. Two of those did not know how to find out what someone want s to be doing. RSS staff could use greater understanding of the PSP process, and purpose as a means of better understanding what they do and why. 100% knew how to get an idea into the PSP, but all other questions in this section fell a little shorter.											
* = IP = Individual Plan PSP = Personal Support Plan												

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**Comments:**

This is a great improvement over last review. Review beolw. The first column of #'s is last review,

Abuse/neglect repor	50%	100%
Client rights	100.00%	100%
Behavior Support PI	62.50%	100%
Orient./training	100.00%	100%
Assistance and sup	100.00%	96%
Behavior interaction	50%	100%
Emotionally respons	87.50%	86%
Incident reporting	100.00%	86%

the second column is now.

The improvement is across the survey except slight drops in several areas.. Nice job in your training RSS.

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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)								
<b>c o n s u m e r</b>	Do you have nice staff at home/work?	X	X	X	X	X	X	
	Is anyone mean to you at home/work?	X	X	X	X	X	X	
	Do you like where you live/work?	X	X	X	X	X	X	
	Are you ever afraid of anyone?	X	X	X	X	X	X	
	<b>Someone hits/hurts you, who can you tell?</b>	X	X	X	X	X	X	
	<b>Does anyone talk to you about this?</b>	X	X	X	X	X	X	
	Can you get help when you need it?	X	X	X	X	X	X	
	from staff?	X	X	X	X	X	X	
	from Case Manager?	X	X	X	X	X	X	
	Can you get your own food/drink?	X	X	X	X	X	X	
	Do people come into your house/room without knocking or getting permission?	no	X	X	X	X	X	
	Do staff ever take things from you?	X	X	X	X	X	X	
	Can you get rides to places you need to go?	X	X	X	X	X	X	
	Rides to the places you want to go?	X	X	X	X	X	X	
<b>Who is your Case Manager?</b>	X	X	X	X	X	X		
<b>Does s/he talk to you about waiver services?</b>	na	X	na	na	X	X		
<b>Does s/he help you get what you need?</b>	X	X	X	X	X	X		

**Comments:**

stated that individuals come into apartment without knocking. When asked if people enter her room without knocking she stated no. I do not think there is an issue needing follow-up, as staff come in and out of this apartment to assist with meals, meds and other things. Otherwise all answers were appropriate.

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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)								
<b>c o n s u m e r</b>	Do you have nice staff at home/work?	X	N/A	N/A	X	N/A	X	
	Is anyone mean to you at home/work?	X	N/A	N/A	X	N/A	X	
	Do you like where you live/work?	X	N/A	N/A	X	N/A	X	
	Are you ever afraid of anyone?	X	N/A	N/A	X	N/A	X	
	<b>Someone hits/hurts you, who can you tell?</b>	X	N/A	N/A	X	N/A	X	
	<b>Does anyone talk to you about this?</b>	X	N/A	N/A	X	N/A	X	
	Can you get help when you need it?	X	N/A	N/A	X	N/A	X	
	from staff?	X	N/A	N/A	X	N/A	X	
	from Case Manager?	X	N/A	N/A	X	N/A	X	
	Can you get your own food/drink?	X	N/A	N/A	X	N/A	X	
	Do people come into your house/room without knocking or getting permission?	X	N/A	N/A	X	N/A	X	
	Do staff ever take things from you?	X	N/A	N/A	X	N/A	X	
	Can you get rides to places you need to go?	X	N/A	N/A	X	N/A	X	
	Rides to the places you want to go?	X	N/A	N/A	X	N/A	X	
<b>Who is your Case Manager?</b>	X	N/A	N/A	X	N/A	X		
<b>Does s/he talk to you about waiver services?</b>	X	N/A	N/A	X	N/A	X		
<b>Does s/he help you get what you need?</b>	X	N/A	N/A	X	N/A	X		
<b>Comments:</b> The three columns with N/A's overall were individuals that, when asked, could understand nor respond to the survey.								

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 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					
Support	Who helps this person and how?	X	X	X		
	Are there some staff/peers they like better?	X	X	X		
	Staff/peers they don't like? Why?	X	X	X		
	Current needs not being met?	X	X	X		
	Health and Safety related?	X	X	X		
	Who do you talk to about these concerns?	X	X	X		
	Does the person have input to his/her life?	NO	X	X		
	Do you have an opportunity for input?	X	X	X		
	If you have concerns, who do you talk to?	X	X	X		
	are they resolved?	X	X	X		
	What are this persons wishes/dreams?	X	X	X		
	is the plan moving that direction?	X	X	X		
	what would make things better?	X	X	X		
	does this person ever seem afraid?	X	X	X		
	are you afraid for them?	X	X	X		
	<b>Does this person know how or where to report abuse?</b>	NO	NO	NO		
	<b>who provided that training?</b>	N/A	N/A	N/A		
	Who will the individual call or report to?	N/A	N/A	N/A		
	Does the person have transportation to all services and places s/he would like to go?	X	X	X		
	<b>who is the person's case manager?</b>	X	X	X		
<b>Does CM help the person access services</b>	X	X	X			
<b>Does the CM explain waiver services?</b>	X	X	X			
<b>Does the person understand this info?</b>	NO	NO	NO			

insert  
QAOS #

**Comments:**  
 mother responded "no" to one questions. This is due to the nature of recent neurological episodes leaving him unable to offer much input. Therefore the only honest answer was "no". Regarding questions of abuse reporting; again, the individuals do not understand how to report or whom to report to. support staff do know to whom and when to report. (questions answered by caregivers)