QUALITY ASSURANCE REVIEW FOR BLACKFEET OPPORTUNITIES

Scope of Review

Blackfeet Opportunities has been in a state of transition between regions II and V for a couple years now and they have now landed back in Region II. With the moves back and forth between the two regions and reassignments of Quality Improvement Specialist caseloads, there have been four Quality Improvement Specialists involved with Blackfeet Opportunities in the past year and a half. It appears that the last review was done for the period of May 2002-August 2003. This review covers the period of June 2004-June 2005.

General Areas

A. ADMINISTRATIVE

Significant Events from the agency

Blackfeet Opportunities currently serves 13 individuals in group home, Day, and Supported Living services. They are contracted for total of16 consumers. 7 individuals reside in the group home, there are 11 folks served at the day center, and there are currently 3 folks receiving services in Supported Living and 3 vacancies that have been open for some time. There has been discussion with the Developmental Disabilities Program about the possibility of amending the contract and converting those vacancies in Supported Living into 1-2 day program openings once conversion to Title XIX has taken place. At this point it is not confirmed whether this will happen or not. One consumer will remain in the State's General Fund services category and the other 12 will be served in the big waiver through Title XIX funding starting July 1, 2005.

Policies & administrative (DDP) directives

Blackfeet Opportunities policies and procedures were reviewed during this review. It appears they are still in a draft form. There was no mention about Supported Living consumers having a choice of staff and the Director will add that in and send a copy to the Developmental Disabilities Program once the policy is finalized. (QAOS #9)

Blackfeet Opportunities staff have participated in incident investigation training and requested a computer, monitor, and software in order to meet the requirements for the new Incident Management policy.

Licensing

Jan Schindele completes licensing with the DPHHS office in Great Falls and a copy of her licensing letter dated 11/08/04 is on file. No violations were

noted on the fire marshal's report dated 10/27/04 for Blackfeet Opportunities. The Health Sanitarian's report dated 10/14/04 states they are in compliance.

Accreditation
Blackfeet Opportunities does not currently participate in accreditation.

Agency internal communication systems
The agency is compromised of a board of directors, a director, a program manager, group home manager, and direct care staff. Most communication goes through the director.

Fiscal (results of A133 audit, referrals to Medicaid Fraud or QAD review, client funds & record keeping).
The Quality Assurance Division was conducting an on-site audit at the same time as the Developmental Disabilities Program on-site review for Blackfeet Opportunities. This Quality Improvement Specialist spoke with the auditors about their concerns. A draft of their report includes findings regarding discrepancies in travel reimbursement for staff, a difference in client fund bank balances, late year end fiscal reports, actual costs exceeding contract amount, and policies and procedures need to be finalized and approved by the board of directors. Client records need to be stored in a secure cabinet with limited access and the executive director stated to this Quality Improvement Specialist that he was going to purchase them in order to be in compliance.

Appendix I
Staff to client ratios were reviewed and adequately meet the needs of the consumers in Browning. In fact the ratios were actually higher than necessary.

Specific Services Reviewed

A. Residential

Accomplishments
Tekakwitha group home:
The group home is located in the Low Rent sub-division of Browning. Although it is not a new home, the staff and consumers take pride in the home and it is a clean, cheerful home. Some maintenance is required and Blackfeet Opportunities is working on making improvements as able. A laundry room was added in the past year. Prior to that laundry was done at the day

services center. A new toilet and new molding around the tub are going to be installed in one of the bathrooms. The director is currently looking into a grant to build a new group home that will be one level and have an exercise area for the folks. This would be a great opportunity for the Blackfeet Opportunities folks if this could happen.

Supported Living:
One consumer did exit Supported Living services this year and another contemplated also doing so. Blackfeet Opportunities was willing to work with this individual to accommodate her need for a different staff person and she decided to stay in services.

Programmatic Deficiencies and Corrections to Deficiencies

None were noted during this review period.

i. HEALTH AND SAFETY

Vehicles

Vehicles are maintained by a garage in Cut Bank in order to have a certified mechanic working on them. The garage calls Blackfeet Opportunities when maintenance is due.

Consumers

Group home:
7 individuals reside at the Tekakwitha group home; 2 of these individuals were included in the consumer sample.

Supported Living:
One individual from Supported Living was included in the consumer sample for this review. There are currently 3 individuals receiving Supported Living services in Browning. Vacancies have been open for extended periods of time. It has been difficult to fill them. Housing is difficult to find in Browning for folks on the statewide waiting list. Unfortunately no day services are attached to these openings and there are few individuals who want only Supported Living.

Medication Safety (psychotropics, training, programs, prns, certification,errors)

There were no quarterly reviews of medication errors done this past year. (QAOS # 1)
Medication certification for staff is required by Blackfeet Opportunities and staff members need to

pass the test within 3 attempts. A list of medication certified staff is posted including the dates of certification. Additional training is also provided for staff by the Mental Health counselor on specific consumers and medications they take.
Obtaining refills in a timely manner has been an issue in the past and occasionally consumers had to be taken to the ER to get meds on time, but there is now a system in place to ensure consumers do not run out of medications. A form was developed to track when refills are due, where they are located if they have been picked up, and number of refills remaining. The program coordinator is responsible for this duty and it seems to be working well. It took some coordination with health care professionals to make this work. I commend Blackfeet Opportunities for their perseverance solving this problem. (QAOS # 2)
Medication administration records were reviewed for and at the group home. No problems were noted. No PRN protocols are in place. Use of a protocol for PRN medications was recommended and a sample form will be sent to Blackfeet Opportunities. (QAOS # 3)

Sites (appearance, evacuation drills, SL apartments, emergency back-up, etc.)
Consumers living at Blackfeet Opportunities Tekakwitha group home liked living there. They have pride in their home. It is very clean and although seems small for 7 individuals, they appear to be satisfied with it and have enough room for their belongings and they rotate who gets their own room. The 2 consumers with the highest need are in the 2 upstairs bedrooms. A laundry room was added off of one bedroom in the basement and Blackfeet Opportunities went through the proper channels to ensure doing so did not interfere with the consumer's rights. She actually is proud to have the laundry off of her room. The folks like not having to go to the Day Center to do laundry now. (QAOS #7)
Hot water temperatures were below 120 degrees in bathing areas. The kitchen temperature was 120 degrees and the group home manager was made aware of this. EDITH (Exit Drills in the Home) is practiced and the disaster plan is found in the log. Smoke detectors are present and working and fire extinguishers were checked September 2004. Fire drills include checking smoke alarms and

fire extinguishers and are completed at least once per month if not twice. tends to be a problem evacuating. No paper towels were found at any sink in the home (QAOS # 4) and a locking closet door needs to be installed to properly store cleaning supplies in the group home. (QAOS # 5)
Blackfeet Opportunities utilizes an on-call system for back up and the group home manager has filled in on shifts at the group home if necessary. Other staff members live near by and have come in to work in emergencies. The group home is staffed with awake night staff.
Blackfeet Opportunities does not own the homes of the Supported Living consumers. No apartments were toured.

ii. SERVICE PLANNING AND DELIVERY

Individual Planning (Assessment, implementation, monitoring)

Group home: IP plans were reviewed for and Assessments were completed and utilized in the plan. Individual preferences were considered and needs addressed in the plans. Incident Reports were addressed when necessary in the plans as well. Objectives were found to be measurable and matched long-range goals. One consumer has an objective to increase independence with medications but no IPP could be found. It appears plans were implemented on time and quarterly reviews were completed. Quarterlies were not found in consumer files but are kept in another area. The Quality Improvement Specialist and Case Manager receive a copy of the quarterly reviews as they are completed. One consumer had some behavioral issues flare up after her IP and an IABA assessment was started but not completed as of yet. This was discussed because the executive director requested a time out program. We felt an IABA would be a better choice since the behavior is not frequent and may be preventable with the use of reactive strategies and positive programming rather than aversive techniques.
Supported Living: IP plan was reviewed for in Supported Living. Although he was screened into services before this Quality Improvement Specialist was assigned to Blackfeet Opportunities (file indicates a start date of 3/2/04), an IP was not held until April 28,2005 and no documentation as to why the IP was tardy was noted in the IP. No data was found in his

file regarding his objectives. Some progress notes were discovered in the Supported Living log: for an unspecified period of time this consumer was in jail in March 2004 and in November 2004 contacted Blackfeet Opportunities to see if he was still in the program. The director addressed this with the Supported Living staff member. (QAOS #6)

Leisure / Recreation

All consumers participate in a variety of leisure and recreation activities on a regular basis. Activities are recorded on the shift logs. Exercise is recognized as a need and encouraged by staff. It is noted in the log when it occurs.

Client Rights (restrictions/promotion of rights, grievance procedure)

No rights restrictions were found in the consumer sample. However, s coffee/caffeine intake is monitored and fluids due to health concerns from overindulgence. right to carry inappropriate amounts of money is an example of promotion of rights. Although he is at risk for exploitation, he has greater risk from his behaviors if his money is restricted; therefore, his choice to carry large sums of money on his person is respected.

Medical / health care

Consumers were found to get appropriate medical and health care in a timely manner. Although all medical appointments were not recorded on the IP form 3, they were on the form 5 and detailed descriptions were found in files. As noted previously in this report, Blackfeet Opportunities has done a great job ensuring medication refills are received before the medication runs out. Since several of the folks are taking psychotropic medications, regular appointments are kept with a psychiatrist who comes from Kalispell and he reviews medications. A mental health counselor is also involved with many of the consumers. A nutritionist consults with the consumers and staff on a regular basis. There is a menu log in the group home. The logbook includes not only communication between work and home but recreation and leisure activities, staff duties, dietary concerns, and exercise.

Emotionally Responsible Care Giving

Observations and staff interviews show Emotionally Responsible Care Giving is a part of the philosophy and utilized at Blackfeet Opportunities.

Consumer Surveys
Case Manager completes surveys with consumers prior to their IP meetings. Copies are shared with the Quality Improvement Specialist and placed in the consumer file.

Agency's consumer satisfaction surveys (do you? what info? what do you do to address?) .(accreditation requirement)
Blackfeet Opportunities does not currently utilize satisfaction surveys.

iii. STAFFING
Screening/Hiring
Three employee files were reviewed. One was a new staff, one was a rehire, and the other was a long-term employee. Only the new hire had documentation of a DOJ background check being completed; however, all files had a signed statement that if the staff person is found guilty of a crime that employment would be terminated. (QAOS #8)

Orientation/training
Blackfeet Opportunities has an orientation checklist which includes but is not limited to job description, policies and procedures, client rights and confidentiality, chain of command, emergency procedures, driving, fire drills, IP rule, meal procedures, and more.
Blackfeet Opportunities has received DDCPT training in the past from the State of Montana Developmental Disabilities Program. We discussed the possibility of using an alternate method of training in April and a discretionary grant was obtained in May from the state to purchase the CBT curriculum from IABA. The director, Regional Manager, and Quality Improvement Specialist felt since the curriculum was self-paced, it was better suited to the program's needs for training. This Quality Improvement Specialist completed Mandt Basic Level with both group home and Day staff during the month of June 2005. Other training offered at Blackfeet Opportunities includes Adult Protective Services, Abuse

Prevention, individual medication concerns, First Aid, CPR, and Incident Report training.
Up to date documentation for training was not present in all the files reviewed.

Ratios
Blackfeet Opportunities has been found in compliance during on site and phone checks. The ratio at the time of the on site visit to the group home was 2:7.

Staff Surveys
Staff surveys were completed with 2 residential staff members—one from the group home and one from Supported Living. Minimal prompting was necessary from this Quality Improvement Specialist in order to have each section "met". Areas of difficulty included when and to whom reports should be made.

iv. INCIDENT MANAGEMENT

Adult Protective Services
Adult Protective Services is only involved in issues of neglect, exploitation, or abuse concerning the consumers who reside in the group home. The Developmental Disabilities Program office in Great Falls has only had contact with the Adult Protective Services worker concerning one incident of suspected exploitation that Blackfeet Opportunities investigated internally and it was found to be unsubstantiated.

Incident Reporting
Incident reports appear to be written when required but are not always received in the Developmental Disabilities Program Office or by the Case Manager in a timely manner. Blackfeet Opportunities will call and get clarification from the Quality Improvement Specialist at times on specific incidents. When there is a question from the Quality Improvement Specialist, Blackfeet Opportunities will address it once it is mentioned. Blackfeet Opportunities does not track trends.

B. Work/Day/Community Employment
The Dusty Bull Training Center is the site for day services and there is also a recycling center utilized

by Blackfeet Opportunities. Blackfeet Opportunities is contracted for 11 individuals in Day Services.

Accomplishments
Blackfeet Opportunities is contracted with Glacier Park to do their recycling. The Dusty Bull Training Center has seen some improvements in the past year. The laundry was relocated to the group home and the restrooms were redecorated. They are currently in the process of partially enclosing the kitchen in order to make it safer for all the consumers. The time motion studies for wages were recently completed.

Programmatic Deficiencies
Only one Quality Assurance Observation Sheet was written for Blackfeet Opportunities during this review period. It was in March of 2005 for contract billing issues. Blackfeet Opportunities was billing for day services for a consumer who was not in that service. Invoices do not seem to always match the attendance records. There have been instances where consumers are put on the invoice when they were not yet screened into an opening. The issue was corrected once it was noted.

Corrections to Deficiencies
The consumer was dropped from the day services billing.

i. HEALTH AND SAFETY

Vehicles
As noted in the residential section, vehicles are maintained by a garage in Cut Bank in order to have a certified mechanic working on them. The garage calls Blackfeet Opportunities when maintenance is due.

Consumers
2 consumers in addition to the 2 from the group home were included in the consumer sample. The contract is for 11 consumers. This is a decrease from the last review.

Medication Safety (psychotropics, training, programs, prns, certification, errors)
Medications are stored in the staff office in a filing cabinet with a lock. The program manager keeps track of the medications for both group home and Day services. Staff who assist with medications are certified by the state Developmental Disabilities Program. Written

reminders are present at the day center to assist staff with remembering to pass medications in a timely manner. Day staff members are included in training related to individual medication needs.

Sites (appearance, evacuation drills, SL apartments, emergency back-up, etc.)
From the outside, the training center appears to be an older, run down building, but inside it is better maintained and cheerfully decorated. There are large steps to get to the director's office and conference room, but handrails are present to assist with ascending the stairs. Fire and evacuation drills are done monthly and attendance is documented on the form along with problems encountered. The smoke alarms and fire extinguishers are checked at the time of the drills. The extinguishers were last serviced in 9/04.

ii. SERVICE PLANNING AND DELIVERY

Individual Planning (Assessment, implementation, monitoring)

has no file and no IP has been completed yet. She was screened into services on 8/23/04. It appears there was an attempt to combine an IEP with an IP but it was not successful. She attends half days. (QAOS # 6)
For the other consumers in the sample, goals and objectives were measurable and objectives were matched to long-range goals. Quarterly reviews were completed and the Quality Improvement Specialist and Case Manager receive copies for their files.

Leisure / Recreation
All consumers participate in a variety of leisure and recreation activities on a regular basis. Activities for each consumer are recorded. A log is transferred back and forth between day services and the group home.

Client Rights (restrictions/promotion of rights, grievance procedure)
No right restrictions are currently in place in the day services area. Other comments were previously noted under residential.

Medical / health care
The program manager assists with medical appointments and for the folks who live with family, the families take care of those duties. Health information is reviewed at the annual IP.

Emotionally Responsible Care Giving
During observations and staff interviews, Emotionally Responsible Care Giving was noted to be used.

Consumer Surveys
The Case Manager conducts consumer satisfaction surveys prior to each annual IP meeting. Copies are sent to the Quality Improvement Specialist for review and to place in Developmental Disabilities Program file. It appears concerns are addressed through the IP process if there are any.

Agency's consumer satisfaction surveys (do you? what info? what do you do to address?) (accreditation requirement)
Blackfeet Opportunities does not utilize satisfaction surveys at this time.

iii. STAFFING
Screening/Hiring and Orientation/training
See comments in the residential section.

Ratios
Blackfeet Opportunities has been found in compliance during on site facility and phone checks. The ratio at the time of the on site review was 2:9.

Staff Surveys
Staff surveys were completed with 1 day staff person. Minimal prompting was necessary from this Quality Improvement Specialist in order to have each section "met". Reporting was an area of difficulty.

iv. INCIDENT MANAGEMENT
Adult Protective Services
Adult Protective Services can only get involved in cases where the consumer is living in the group home. For others, Indian Services are contacted.

Incident Reporting
Incident reports appear to be written when required but are not always received in the Developmental Disabilities Program Office or by the Case Manager in a timely manner. Blackfeet Opportunities will call and get clarification at times on incidents. Concerns are addressed once Blackfeet Opportunities is made aware of them. Blackfeet Opportunities does not track trends.

C. Community Supports
Blackfeet Opportunities does not currently serve any consumers who receive Community Supports.

D. Transportation
Accomplishments
13 consumers are contracted for transportation with Blackfeet Opportunities. Transportation logs were reviewed. Billing for transportation has been difficult to understand. The regional manager has spoken to the director about billing. Hopefully the rates project will make it an easier process.

Programmatic Deficiencies
No deficiencies have been noted for transportation.

Conclusion
Findings Closed
Findings Open / Plan of Correction