

Marshall County Group Homes, Inc.

SERVICE PLAN REVIEW MEETING AND ATTENDANCE NOTES

Name: *Gary Bergh*

Service plan review meeting date: *10/06/2025*

Time: *1:00p*

Type of service plan review meeting (i.e. annual): *Annual*

Location of meeting: *Warren ODC*

The purpose of this meeting is to provide an opportunity for support team or expanded support team members to participate in the ongoing review and development of the service plan and the methods used to support the person and accomplish outcomes. This meeting is also intended to determine whether changes are needed to the service plan based on the assessment information, the license holder's evaluation of progress towards accomplishing outcomes, or other information provided by the team.

A Review of Technology needs for the individual served: *Gary wears prescription eyeglasses. He has his own wheelchair and walker.*

A review of the person's service and support outcomes occurred and the following determinations regarding those outcomes were made: *1. Gary will correspond with family and friends through phone calls or mail.
2. Gary will choose a restaurant to eat at.*

It was decided by Gary and his team that both of Gary's outcomes will continue. No additional outcomes were identified.

Changes needed to the Support Plan Addendum, Self-Management Assessment, or other document in the service plan, include, if any: *SP Addendum – Following Gary's annual meeting the following updates were made to his Support Plan: list of attendees and date of the meeting. Services and Supports: Gary's vision is poor. Staff are to explain to Gary where his food is placed on his plate and assist him with eating all food by turning his plate so he can see everything on it. The list of service providers was updated. ISMA – Health & Medical Needs – Gary performs PROM exercises almost daily; he does refuse to do upper and lower extremity exercises some days. Gary has a Healthcare Directive dated 5/30/25 stating, "I do not want CPR attempted if my heart or breathing stops. I want to allow a natural death. I understand if I choose this option I should see my health care provider about writing a Do Not Resuscitate (DNR) order." Jeremy Houser, PA has been contacted re: writing a DNR Order for Gary. Personal Safety - IAPP – List of attendees and date of the annual meeting were updated. No other changes and/or additions. Personal Safety- Gary needs support and assistance with all ADL's due to his cerebral palsy, poor vision, and muscle spasms. Gary needs verbal prompting, at times, to complete his cares and is refusing to walk using his walker. Told his brother that he is afraid of falling.*

Discussion regarding person-centered program planning:

What are the opportunities to develop and maintain **essential and life-enriching skills, abilities, strengths, interests, and preferences?** *Gary is offered activities and may choose which ones he would like to participate in, according to his interest. Staff offer activities he enjoys, such as: playing UNO, coloring, watching his favorite game shows and guessing answers. Group outings and events are offered to Gary to participate in. Gary sends birthday and holiday cards to family and friends throughout the year.*

What are the opportunities **for community access, participation, and inclusion** in preferred community activities? *MCGH facilitates monthly outings for Gary of his choice; Gary's family visits and takes him out to eat or to visit his mother; he participates in community events such as concerts, picnics, holiday parties.*

What are the opportunities to **develop and strengthen personal relationships** with other persons of the person's choice in the community? *Gary engages in activities daily with his housemates and staff. He attends the Warren ODC Monday-Thursday and is able to interact with peers outside of his residential home. Gary's family involves him in family events such as birthdays.*

What are the opportunities to seek **competitive employment** and work at competitively paying jobs in the community?

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Gary denies any interest in any employment services.

The person currently receives services in (check as applicable):

- Residential services in a community setting controlled by a provider
- Day services
- Neither

Provide a **summary of the discussion of options for transitioning the person out of a community setting controlled by a provider** and into a setting not controlled by a provider (residential services). Include a **statement about any decision made regarding transitioning out of a provider-controlled setting:** *The team feels Gary is lives in the least restrictive environment for him at this time.*

Provide a **summary of the discussion of options for transitioning from day services to an employment service.** Include a **statement about any decision made regarding transitioning to an employment service:**
Describe any further research or education that must be completed before a decision regarding this transition can be made: *Gary denies any interest in transitioning into employment services.*

Other meeting discussion notes:

Admission Form and Data Sheet: *Reviewed by the IDT and signed by Tracy Bergh, Brother/Co-Guardian.*

Health: *See attached Individual Care Plan, Appt Review, RN Report and Seizure Protocol for Gary prepared by Henrietta Linder, Residential RN. Gary's Seizure Protocol is to be reviewed and dated by his Neurologist, Dr. Roller, at his next neurology appt on 11/18/25. If there are any incidents with Gary (falls, seizures, bruising, etc) the residential home is to call his sister, Diane and text his brother, Tracy. Gary wears a brief at all times now and does have incidents of being incontinent of urine. It is difficult to determine if the incidents of incontinence are behavioral or a physical symptom. He was tested last Friday for a UTI due to several episodes of being incontinent recently – results were negative.*

Day Program: *Gary attends the Warren ODC Monday-Thursday. He states he enjoys going there. Staff reported that he has been doing more activities recently and even went for a walk outside with the group! Plan to continue with current outcomes/goals.*

Residential: *Gary's ISP outcomes were reviewed and will continue as written. Gary agreed that is what he would like to do. Gary is wanting only one staff person to give him a shower and shave him. The importance of allowing other staff to do his cares was discussed. Gary has been refusing to walk recently and did tell his brother that he is afraid of falling.*

MN Choices Meeting: *Cassi Hermanson, MCSS will be meeting with Gary, Tracy Brother/Co-Guardian and Rachel DCC on 10/7/25 at 2p on CS.*

Other: *Gary's brother stated that he has purchased a different vehicle that he thinks Gary will be able to get in and out of. Tracy said he plans to take Gary to visit their mother in the Hallock Nursing Home,*

Next Meeting: *October 5, 2026, 1p at the Warren ODC.*

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TO DO LIST FOLLOWING MEETING:

- 1. Take Gary's current Seizure Protocol to his next neurology appt for Dr. Roller to review and make any updates/changes, sign and date. Send an updated copy to the ODC*
- 2. MCGH to send a copy of Gary's last annual physical to the ODC*
- 3. MCGH to send a copy of Gary's Healthcare Directive to the ODC*
- 4. MCGH to purchase large print UNO cards to assist Gary in seeing the cards better*