

Marshall County Group Homes, Inc.

SERVICE PLAN REVIEW MEETING AND ATTENDANCE NOTES

Name: *Corrie Penn*

Service plan review meeting date: **February 25, 2026**

Time: *10:00am*

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

Location of meeting: *Cedar South Group Home*

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:

Corrie has a standard manual wheelchair and wears AFO's on both legs. Corrie has a high-lo hospital bed with full rails for his safety. Corrie has a swash brace he wears for ambulation when walking with staff assistance.

A review of the person's service and support outcomes occurred and the following determinations regarding those outcomes were made:

Corrie went on a few outings with staff and while he was still attending the DAC which he no longer attends during the day. Outcome Corrie will go on minimum of 1 outing per month with staff.

Changes needed to the *Support Plan Addendum, Self-Management Assessment*, or other document in the service plan, include, if any: *Changes to his Support Plan Addendum and SMA: no changes made at this time, Date of meeting and attendees was updated. Health & Medical Needs – Special Dietary Needs: Corrie had recommendations of a pureed diet; however, guardian does not want Corrie to be on puree as she would like him to eat food cut into small bite size pieces, she is aware of a choking hazard. Guardian has given an ok to having his meat and other tougher foods to chew minced (finely cut up) as Corrie seems to eat his food better with this. Corrie's weight has been fluctuating, guardian would like to see him at 100 pounds, currently he is at 99.9 pounds. Corrie gets his ensure supplement with ice cream to add calories and nutrition. Corrie has a dental appointment coming up in March to which staff will take him to. Corrie was seen in the ER due to not gaining weight or eating and not having proper bowel movements to which it was discovered he was backed up with stool, so treatments were given and he has been doing well since this incident. Corrie has a swash brace that he utilizes when ambulating with staff that assists in keeping his legs from scissoring. Corrie had been seen at the clinic for a rash that was diagnosed as ringworm and prescribed a cream for it and it has healed nicely. Corrie's last lab work showed his PSA level is elevated, and the housing nurse would like this followed up on to see if Corrie needs a recheck on this level or if its not of concern. Staff will contact PCP to ask about a follow up for Corrie's PSA level.*

Discussion regarding person-centered program planning:

What are the opportunities to develop and maintain **essential and life-enriching skills, abilities, strengths, interests, and preferences**? *MCGH staff provide him with activities and interact with him throughout the day. Corrie is encouraged to complete tasks on his own, as able to maintain his abilities/skills. He is offered various activities such as going to visit Cedar North Residents, going with staff on a drive or taking him in the community such as shopping or out to eat.*

What are the opportunities **for community access, participation, and inclusion** in preferred community activities? *He participates in planned MCGH, Inc. events such as the Christmas Party and the Annual Picnic. His home plans outings in the community such as van rides, short shopping trips, etc.*

What are the opportunities to **develop and strengthen personal relationships** with other people of the person's choice in the community? *Corrie is encouraged to participate in outings that promote socialization such as MCGH planned events, community activities such as the Argyle Meet Your Neighbor Day Parade or attending Bible Study and visiting with staff and*

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peers next door at cedar South,

What are the opportunities to seek **competitive employment** and work at competitively paying jobs in the community?
Corrie has no interest in competitive employment.

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**: *Corrie currently resides in the least restrictive environment that is appropriate for him.*

Provide a **summary of the discussion of options for transitioning from day services to an employment service**. Including a **statement about any decision made regarding transitioning to an employment service**:

Describe any further research or training that must be completed before a decision regarding this transition can be made:

Corrie does not have any interest in community employment. Discussion of him attending the DAC in East Grand Forks again was discussed and case worker will check into this to see if there is a opening or a waitlist for him to return.

Other meeting discussion notes:

Health: *Henrietta provided a written health summary on Corrie at the meeting which included concerns regarding his PSA level to which staff will contact PCP to see if this needs to be followed up on.*

Other: *Guardian (aunt) does not want biological mother to visit without her present at the same time. Guardian and biological mom did meet with Corrie a few days ago and it did not go so well with bio mom there and her interactions with him and others in the home.*

Annual meeting scheduled for August 2026 at 10:30 AM

CORRIE PENN SEMI-ANNUAL MEETING 2/18/2026

Corrie's annual meeting was held on 8/20/2025. His weight at that time was 98.6lbs with present weight at 98.5lbs. Corrie continues to refuse meals at times by spitting or pushing food away. There are times when Corrie will refuse to eat and after his food is finely minced, he will complete the entire meal. He does receive a supplemental drink with ice cream mixed into it 3 x daily. He is weighed weekly and seems to fluctuate by 3-4 lbs up or down. On 9/26/25 he was noted to have a runny nose, watery eyes and sneezing. He was given Tylenol and Allergy Relief PRN with symptoms resolved. On 9/30 his w/c was checked by NuMotion with many moving parts in need for replacement. Once they were able to get the parts, they returned and repaired the w/c. Corrie received his annual flu vaccine on 10/10/25. Corrie had a fall from his bed on 10/11/25 with redness noted to sides of eyebrows and back of his head. He did have some swelling and bruising to his left brow which resolved. He had a return appointment with Dr. Murphy, physiatry, on 10/29/25. Dr. Murphy stated Corrie had no need for continued Botox injections but requested staff continue with the home exercise program he had ordered. He did recommend Corrie wear a swash brace only while ambulating to keep his legs from scissoring. Corrie ambulates 2 x daily a distance of at least 30 feet with gait belt and 2 staff. He did state that Corrie going to DAC was very beneficial for Corrie regarding therapy and socialization. He is to F/U in 1 year. Corrie had a face-to-face visit with his PCP on 11/7/25 for long bed rails and for the swash brace. On 12/5/25 staff noted a scratch below left groin with source unknown but felt it may have been self-inflicted. This healed without incident. He was seen at Altru Orthotics on 12/8/25 for fitting for the swash brace. On 1/8/26 he returned to orthotics for fitting. The sidebar measurements were incorrect so he will return for another fitting. He was given Lorazepam PRN prior to appointment, and he remained calm throughout the appointment. After the appointment he was taken for a meal at McDonald's which he normally enjoys. He did not want the McDonald's meal. Due to Corrie's increase in meal refusal as well as poor bowel movements it was decided he be taken to ER at NVHC the following day. He was tested for Influenza A and Covid which were negative. He had labs drawn and an abdominal x-ray. He was found to be full of stool and was diagnosed with a UTI. He started a 5 day course of antibiotic and ordered staff to give 1 bottle of Mag Citrate today and repeat in 3 days if no BM. Corrie absolutely refused the Mag Citrate after one sip so he was given MOM mixed in prune juice and the following day he had an ex-large bowel movement. Corrie had a F/U appointment with his PCP on 1/28/26. He requested Corrie be limited to 1 to 2 glasses of milk per day, continue to give adequate fluids, to add fiber to his daily MiraLax (he is using Benefiber) and to add a glass of pear juice daily. Corrie did go to Altru Orthotics on 2/16/26 with swash brace fitting completed – sent home with him. On

2/2/26 Corrie was noted to have a large circular rash area on his abdomen as well as his left thigh. He was taken to NVHC and diagnosed with ringworm. He started Terbinafine cream to rash areas 2 x daily for 10 days and placed on precautions. The rash areas were completely resolved by 2/7/26. Corrie's blood pressure has remained WNL over the past 6 months and generally he sleeps very well. Staff no longer wake him during the night to check for incontinence and check on him only if awake. Staff have begun to leave Corrie sleeping until the other clients leave for ODC/DAC as he was appearing to get very upset that he was not going as well.

Corrie had an exam and dental cleaning on 8/26/25 and due to need of dental work they are to reach out when able to schedule. Corrie's next dental appointment is on 3/4/26. The appointment scheduled for 12/4/25 was rescheduled due to weather.

Corrie does have an order that he may be given PRN Lorazepam for anxiety prior to appointments or outings. Over the past 6 months, he has only been given Lorazepam x 2, each time prior to an appointment.

Report by H Linder RN