

COORDINATED SERVICE AND SUPPORT PLAN (CSSP) ADDENDUM – INTENSIVE SERVICES

Name of person served: Hannah Brough

Date of development: April 6, 2021 For the annual period from: April 2021 to April 2022

Name and title of person completing the *CSSP Addendum*: Cortney Kelly, Program Supervisor/DC

Legal representative: Hannah Brough, self-guardian

Case manager: Sarah Buffington, Pinnacle Services

The license holder must provide services in response to the person’s identified needs, interests, preferences, and desired outcomes. Services will be provided according to MN Statutes, chapter 245D and the applicable waiver plan for the person served. The following will be assessed by the person and/or legal representative, case manager, support team or expanded support team members, and other people as identified by the person and/or legal representative.

Dates of development:

- Within 15 days of service initiation, the license holder must complete the preliminary *CSSP Addendum*.
- Before providing 45 days of service or within 60 calendar days of service initiation
- Annually, the support team reviews the *CSSP Addendum*.

Services and Supports

The **scope of the services** to be provided to support the person’s daily needs and activities include:

The scope of services for Hannah is DT&H intensive supports in a community environment. PAI will work with Hannah to develop and implement achievable outcomes based on Hannah’s goals and interests. PAI provides supervision, outcome implementation, transportation to community activities, support with onsite work, data tracking and daily support related to her health, safety, and well-being as needed by Hannah. Hannah is enrolled in employment services exploration to start looking at what jobs are out there and available.

The person’s **desired outcomes** and the methods or actions that will be used to support the person and to accomplish the service outcomes (Service Outcomes and Supports):

Outcome #1: Hannah has the goal of getting a job in the community. To be successful, Hannah needs to refine her social skills and work on appropriate boundaries with strangers. Hannah will be in a scheduled social skills class once per week. Hannah will attend and participate (no phone or other distractions out, no head down.)

“Hannah will attend and participate in a social skills class weekly, 75% of trials until next review.”

Outcome #2: Hannah is in exploration employment services and is working on finding jobs she may like and interview skills. Staff will prepare an interview scenario once a week and invite Hannah to a full mock interview once a month. Hannah will complete a mock interview as scheduled.

“Hannah will complete a full mock interview once per month until next review.”

PAI

A discussion of how **technology** may be used to meet the person's desired outcomes has occurred: Yes No

- Hannah is well versed in technology use and has a cell phone that she uses independently.

Provide a summary that describes decisions made regarding the use of technology and a description of any further research that needs to be completed before a decision regarding the use of technology can be made: N/A- no additional technology needs at this time.

Describe the **general and health-related supports** necessary to support this person based upon each area of the *Self-Management Assessment (SMA)* and the requirements of person-centered planning and service delivery:

- **Allergies:** Hannah is allergic to horses, cows, and hay and will experience hives and swollen eyes and face. Hannah should not come in contact with these allergens at PAI on a regular basis, but should the situation arise, staff will encourage Hannah to avoid contact with the allergen. Staff will notify Hannah's parents if an allergic reaction occurs.
- **Seizures:** Hannah has a seizure disorder and epilepsy. Staff will follow Hannah's seizure protocol in the event of a seizure. Staff will monitor Hannah for signs/symptoms of a seizure, which may present as a mild jerking or twitching in her left extremities, left-sided facial twitching, darting eyes which tend to deviate up and to the left, and the pulling of both lips in and over her teeth. If signs/symptoms are noted, staff should ensure Hannah is seated or lying down. During the seizure it is important to check to be sure she is not biting her lips or pulling her hair. If she is biting her lips, gently pulling from the bottom lip and asking Hannah to stop biting might help her to release it. If Hannah is pulling her hair, holding her hand close to her head can help to prevent her from tearing out any hair. Hannah's protocol notes that a PRN should be administered if Hannah's seizure lasts longer than 5 minutes, however Hannah has not had a seizure this long in over 10 years. Staff should call 911 if this occurs rather than administer the PRN, which will not be kept onsite at PAI. Staff are trained on the location of Hannah's seizure protocol.
- **Special Dietary Needs:** Hannah has a history of packing large portions of food or drink in her lunches and has poor self-control when it comes to portion sizes. Hannah will pack and prepare her lunch from home. If Hannah brings too large of portions of food to work, staff will prompt and encourage Hannah to eat an appropriate portion of the healthiest food packed and encourage Hannah to bring the rest home.
- **Chronic Medical Conditions; Sensory Disabilities:** Hannah is diagnosed with Tinnitus, a physical condition that causes noises or ringing in one or both ears. If Hannah tells staff that she feels off-balance or if staff notice that Hannah is unsteady, staff will offer Hannah physical assistance when walking by offering her a hand or arm to hold on to for balance. This condition does not affect Hannah's hearing.
- **Self-Administration of Medication or treatment Orders:** Hannah does not take any medication at PAI, but if the need did arise, a staff trained in medication administration would administer the medication to Hannah per a signed physician's order.
- **Preventive Screenings; Medical and Dental Appointments:** Hannah's parents help Hannah schedule and attend all medical appointments. Any signs/symptoms or illness/injury will be reported to Hannah's parents who will help Hannah follow up with her physician as needed.
- **Regulating Water Temperature:** Hannah can independently adjust the water temperature, but staff will remind Hannah to make sure the water is not too hot when washing her hands in the community. PAI's water temperature is regulated to a safe degree for hand washing.

PAI

- **Community Survival Skills:** Hannah has walked away from the group when on outings in the community and does not always notify staff of her whereabouts. Hannah cannot use public transportation. Hannah does not always have appropriate boundaries around strangers and is at risk of sharing her personal information with unsafe individuals. Hannah knows her personal identification information but may be unable to share this information accurately in the event of an emergency. Staff will always be with Hannah in the community and will maintain visual supervision at all times. Staff will model appropriate stranger safety and social skills and prompt Hannah to follow these as needed. Staff will carry Hannah's personal identification information with when in the community and will share this information with emergency personnel when warranted.
- **Water Safety Skills:** PAI does not offer swimming as part of programming. If Hannah were ever to participate in an activity on or near a large body of water, staff would provide Hannah with a life jacket and stay with her the duration of the activity. Hannah's seizure activity puts her at risk of drowning, even though she knows how to swim.
- **Person Centered Information:**

The **important to** Hannah items are: her family, being in a relationship, church, her electronics (phone, iPad, games, etc.), working, collection of CD's and movies, being independent, and making decisions for herself.

The **important for** Hannah items are: finding independence in living alone, her family support, independence, socializing with friends and family, and having support managing her health (appointments, seizure support, etc.).

A **good day** for Hannah would be when she can both work and socialize with friends. Hannah is an outgoing and friendly person. Hannah likes helping others and is thoughtful. Hannah desires to be as independent as possible, and clear job responsibilities and expectations help her feel successful and confident in what she is doing.

A **bad day** for Hannah would be a day when expectations are unclear, and Hannah does not understand the reasoning behind being asked to do a certain task or to do a task a certain way. Hannah wants to feel heard and have her questions answered in a way she understands and may become frustrated if things are unclear.

Hannah **likes** wandering in farm fields, seeing cousins and aunt Becky, hanging out in her room, napping, shopping, going out to eat, going to the cabin with family, church, movies, working and making money, and socializing with others.

Hannah **dislikes** people yelling at her, loud voices, arguing, unclear expectations, and when she is not involved in making her own decisions or feels unheard.

PAI

The person's **preferences** for how services and supports are provided including positive support strategies and how the provider will support the person to **have control of their schedule**:

- Hannah has control over her schedule at PAI by choosing how many leisure and skill building classes she would like to take and which ones. When PAI is able to resume activities and volunteering in the community, Hannah will be able to choose what she would like to participate in. Hannah can try out different jobs available onsite at PAI and choose to pursue employment services and finding a job in the community if she chooses.
- Hannah prefers that clear guidelines and expectations are set surrounding work activities.
- Hannah prefers that she is given a clear rationale for rules.
- Hannah takes pride in being independent and wants to be involved in making decisions for herself. Hannah would like it if staff help support her in find new ways that she can increase her independence.
- Hannah prefers to be social and likes checking in with peers and staff. Hannah is outgoing and friendly.
- Hannah wants to expand upon her work skills and try out new jobs.

Is the current service setting the **most integrated setting available and appropriate** for the person?

Yes No

If no, please describe what action will be taken to address this: N/A

What are the opportunities to develop and maintain **essential and life-enriching skills, abilities, strengths, interests, and preferences**?

- PAI offers a large variety of leisure and skill building classes at PAI that Hannah can choose to participate in. Typically, before covid-19, Hannah would be given a list of the classes available quarterly and Hannah's lead would walk Hannah through the different options available and help Hannah pick classes that fit her interests, preferences, or particular skills she would like to work on. At Hannah's semi-annual and annual time of year, Hannah's designated coordinator talks to Hannah and discusses her goals for the next review period and adjusts her outcomes accordingly.

What are the opportunities **for community access, participation, and inclusion** in preferred community activities?

- Community outings are currently on hold at PAI but will resume when covid-19 health and safety concerns have subsided. PAI usually offers community outings on a daily basis to several community locations. Hannah has the opportunity to choose which activities she would like to participate in by choosing about 1-2 locations a month that interest her. PAI also offers volunteer opportunities offsite. Other opportunities are offered onsite at PAI with community members, such as pet or music therapy.

What are the opportunities to **develop and strengthen personal relationships** with other persons of the person's choice in the community?

- Hannah is encouraged to communicate and associate with those of her choosing onsite at PAI and when in the community. Hannah has many good social skills and is a friendly individual. When appropriate, staff will introduce Hannah to important members of the community (a tour guide at a museum, a volunteer coordinator at a volunteer site, etc.). Hannah can sometimes overshare with strangers and may share personal information. Staff will remind Hannah of appropriate social skills and boundaries as needed.

PAI

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

- PAI offers employment services to anyone interesting in finding employment in the community. Hannah is currently enrolled in employment services exploration and is exploring available career paths and jobs in the area. In a few weeks, Hannah will move into development and start searching for a job with a job coach.

How will services be **coordinated across other 245D licensed providers and members of the expanded/support team** serving this person to ensure continuity of care and coordination of services?

- Hannah's parents, PAI staff, and case manager exchange information as it relates to Hannah's services and cares. Meetings and reports are shared with Hannah's team. Hannah's team works together to ensure continuity of care. In-person conversations, phone calls, emails and faxes may be used to discuss current information.
- Hannah Brough is her own guardian but resides with her parents, Rachel and Robert Brough, who provide her a lot of support. Hannah advocates on her own behalf and makes her own legal decisions with the support of her parents.
- Accord services also provides Hannah respite services and is included in all team meeting.
- Case manager, Sarah Buffington from Pinnacle Services, develops Hannah's CSSP and completes Hannah's service agreements and communicates with Hannah's support team to ensure continuity of care.

If there is a **need for service coordination** between providers, include the name of service provider, contact person and telephone numbers, services being provided, and the names of staff responsible for coordination:

Sarah Buffington, Pinnacle Services, Case Manager
Email: sarah.buffington@pinnacleservices.org
P: 612-500-9583

Rachel and Robert Brough, Parents
Email: rambro47@yahoo.com
P: 651-482-9129

Cortney Kelly, PAI
Email: ckelly@paimn.org
P: 651-747-8740

Sally and Rebecca, Accord Services, Respite
P: 612-362-4400

PAI

The person currently receives services in (check as applicable): community setting controlled by a provider (residential) community setting controlled by a provider (day services) NA

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 or for transitioning from day services to an employment service: Hannah would like to find a job in the community and is currently in employment services- exploration and is exploring available career paths and jobs in the area. In a few weeks, Hannah will move into development and start searching for a job with a job coach.

Describe any further research or education that must be completed before a decision regarding this transition can be made: N/A- none needed at this time.

Does the person require the **presence of staff** at the service site while services are being provided?

Yes No

If no, please provide information on when staff do not need to be present with this person (include community, home, or work) and for the length of time. If additional information regarding safety plan is needed, also provide:
N/A

Does the person require a **restriction of their rights as listed in 245D.04, subdivision 3** as determined necessary to ensure the health, safety, and well-being of the person?

Yes No

If yes, please indicate what right(s) will be restricted: N/A

If rights are being restricted the Rights Restrictions form must be completed.

Does this person use **dangerous items or equipment**?

Yes No

If yes, address any concerns or limitations:

N/A

Has it been determined by the person's physician or mental health provider to be **medically or psychologically contraindicated to use an emergency use of manual restraint** when a person's conduct poses an imminent risk of physical harm to self or others and less restrictive strategies would not achieve safety? Yes No

If yes, the company will not allow the use of the behavioral intervention/manual restraint to be used for the person.

PAI

Health Needs

Indicate what **health service responsibilities** are assigned to this license holder and which are consistent with the person's health needs. If health service responsibilities are not assigned to this license holder, please state "NA."

- Providing CPR and First Aid as applicable.
- Monitoring for illness and injury and allergic reactions. PAI will notify Hannah's family if any are noted.
- Applying sunscreen and bug spray per bottle instructions as needed.

If health service responsibilities are assigned to this license holder, the case manager and legal representative will be promptly notified of any changes in the person's physical and mental health needs affecting the health service needs, unless otherwise specified here: N/A

The following information will be reported to the legal representative and case manager as they occur, unless otherwise indicated here.

- Any report made according to 245D.05, subdivision 2, paragraph (c), clause (4)
- The person's refusal or failure to take or receive medication or treatment as prescribed
- Concerns about the person's self-administration of medication or treatments

If the license holder is assigned responsibility for medication set up, assistance or medication administration, the license holder will provide that support according to procedures listed here as applicable:

- Medication set up:
- Medication assistance:
- Medication administration:

Psychotropic Medication Monitoring and Use

Does the license holder administer the person's psychotropic medication? Yes No

If yes, document the following information:

1. Describe the target symptoms the psychotropic medication is to alleviate:
N/A
2. Does the prescriber require documentation to monitor and measure changes in the target symptoms that are to be alleviated by the psychotropic medications?
 Yes No
3. If yes, please indicate the documentation methods to be used to collect and report on medication and symptom-related data according to the prescriber's instructions:
N/A

Permitted Actions

On a continuous basis, does the person require the **use of permitted actions and procedures** that includes physical contact or instructional techniques:

1. To calm or comfort a person by holding that person with no resistance from the person.
 Yes No If yes, explain how it will be used:
2. To protect a person known to be at risk of injury due to frequent falls as a result of a medical condition.
 Yes No If yes, explain how it will be used: Hannah is diagnosed with Tinnitus, a physical condition that causes noises or ringing in one or both ears. If Hannah tells staff that she feels off-balance or if staff notice that Hannah is unsteady, staff will offer Hannah physical assistance when walking by offering her a hand or arm to hold on to for balance.
3. To facilitate a person's completion of a task or response when the person does not resist, or it is minimal:
 Yes No If yes, explain how it will be used:
4. To block or redirect a person's limbs or body without holding or limiting their movement to interrupt a behavior that may result in injury to self or others with less than 60 seconds of physical contact by staff.
 Yes No If yes, explain how it will be used:
5. To redirect a person's behavior when the behavior does not pose a serious threat to self or others and the behavior is effectively redirected with less than 60 seconds of physical contact by staff.
 Yes No If yes, explain how it will be used:
6. To allow a licensed health care professional to safely conduct a medical examination or to provide medical treatment.
 Yes No If yes, explain how it will be used:
7. Assist in the safe evacuation or redirection of a person in an emergency and they are at imminent risk of harm.
 Yes No If yes, explain how it will be used:
8. Is a restraint needed as an intervention procedure to position this person due to physical disabilities?
 Yes No If yes, explain how it will be used:
9. Is positive verbal correction specifically focused on the behavior being addressed?
 Yes No If yes, explain how it will be used:
10. Is temporary withholding or removal of objects being used to hurt self or others being addressed?
 Yes No If yes, explain how it will be used:
11. Are adaptive aids or equipment, orthotic devices, or other medical equipment ordered by a licensed health professional to treat a diagnosed medical condition being used?
 Yes No If yes, explain how it will be used:

Staff Information
Are any additional requirements requested for staff to have or obtain in order to meet the needs of the person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please specify: N/A

Does a staff person who is trained in cardiopulmonary resuscitation (CPR) need to be available when this person is present, and staff are required to be at the site to provide direct service? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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For facility-based day services only – please indicate the staff ratio required for this person. Additional information on how this ratio was determined is maintained in the person’s service recipient record: <input type="checkbox"/> 1:4 <input checked="" type="checkbox"/> 1:8 <input type="checkbox"/> 1:6 <input type="checkbox"/> Other (please specify): <input type="checkbox"/> NA
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Frequency Assessments
1. Frequency of <i>Progress Reports and Recommendations</i> , minimum of annually: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annually <input type="checkbox"/> Annually
2. Frequency of service plan review meetings, minimum of annually: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input checked="" type="checkbox"/> Annually
3. Request to receive the <i>Progress Report and Recommendation</i> : <input checked="" type="checkbox"/> At the support team meeting <input type="checkbox"/> At least five working days in advance of the support team meeting
4. Frequency of receipt of <i>Psychotropic Medication Monitoring Data Reports</i> , this will be done quarterly unless otherwise requested: <input type="checkbox"/> Quarterly <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> NA