



# Coordinated Services and Supports Plan (CSSP)

## ABOUT ME

### MICHELLE E BARROWS

**Assessment Date:** 05/13/2021      **Plan Dates:** 07/01/2021 to 06/30/2022

**Developed by:** Paula Goeldner (651) 270-5903

**Address:** 1685 Howard Street N

St. Paul, MN 55109

**County:** Ramsey

**Home:** (651) 777-6754      **Work:**

**Other:** (651) 470-7759

**General Plan Notes:**

Case Manager Information:

**Paula Goeldner, LSW** | Contracted Case Management Supervisor

Country Services, Inc.  
Washington County Community Services |Intellectual and Developmental Disabilities  
13000 Ravine Parkway, Cottage Grove, MN 55016  
651-270-5903  
651-998-0844 (fax)  
[Paula.Goeldner@co.washington.mn.us](mailto:Paula.Goeldner@co.washington.mn.us)

Michelle is a 53-year-old female who currently lives in a Phoenix Residence (ICF) group home in Maplewood. She currently receives services through the Rule 185 case management and ICF placement through Ramsey County. Michelle's parents, Judy and Valmer Barrows, are her co-guardians. Michelle diagnoses include mild intellectual disability (F70), degenerative disease of nervous system, unspecified (G31.9), major depressive disorder, single episode, unspecified (F32.9), ataxia (G11.1), tremors (G25.0), high cholesterol (E78.0), constipation (K59.00), incontinence (R32), osteoporosis (M81.0) and osteopenia (M89.9).

Michelle likes spending time on her iPad playing games, getting her nails done, and watching the Minnesota Twins. She enjoys reading the Sunday paper. Michelle enjoys traveling (pre COVID 19) and is accompanied by residential staff. Michelle likes to go shopping at Target, going to the movies, and going out to eat at Culver's, McDonald's and Red Lobster. Michelle also likes arts and crafts, game nights, and being outside when it is nice out. She very much enjoys seeing her family and spending time with them.

Annual meeting was held on 5/21/2021 at 10am via Zoom due to the risk of Covid 19. Attending annual meeting were Michelle, Nikki Novak/Phoenix, PAI staff, her sister/parents/guardians, Cortney Kelly/PAI, and case manager.

**PERSON INFORMATION**

**Date of Birth:** 09/24/1968 **Age:** 52 yrs

**Emergency Contacts**

Name	Relationship	Phone

Name	Relationship	Phone
Judy & Valmer Barrows (parents) / cell: 715-808-0677	Guardian/Legal Representative	(715) 671-3008
Kathy Picha (sister)	Guardian/Legal Representative	(651) 480-7759

**Notes/Comments****Decision Making Representatives**

Name	Type of Authority	Address	Phone
Judy & Valmer Barrows	Private Guardian	30 Brighton Path, Hudson, WI 54016	(715) 808-0677
Kathy Picha	Private Guardian	943 Daily Road, Hudson, WI 54016	(651) 470-7759

**Notes/Comments****Health Insurance & Payers**

Is the person certified disabled by Social Security or through the State Medical Review Team (SMRT) process? Yes

Is the person on medical assistance? Yes

Type	Describe	Policy Number	Effective Date
Managed Care	UCare, SNBC		
Medical Assistance	MA / DX	00004397	08/01/2012
Medicare - Part A		7UT0RA0NR26	03/01/2003
Medicare - Part B		7UT0RA0NR26	03/01/2003
Medicare - Part D		7UT0RA0NR26	01/01/2006

**Notes/Comments****Providers**

Health Care Providers	Phone	Comments
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Health Care Providers	Phone	Comments
Dentist	(612) 873-6963	Cynthia Strand / Dr. 701 Park Ave, Minneapolis, MN 55415
Pharmacy	(952) 854-1190	Geritom Pharmacy. 10501 Florida Ave S, Bloomington, MN 55438
Specialty Clinic	(651) 770-1371	Richard Stanek / Ophthalmologist. 30 E 7th St, St Paul, MN 55101
Other	(651) 231-7000	St Johns. 1650 Beam Ave., Maplewood, MN, USA
Primary Physician	(651) 788-4444	Dr. David Rossmiller / Entria Family Clinics. 1050 West Larpenteur AVE, StPaul, MN 55113

**Notes/Comments****WHAT'S IMPORTANT TO THE INDIVIDUAL****Short and Long-Term Goals**

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Michelle will continue to participate in outings and activities she enjoys.	06/30/2022		annually
Michelle will continue to reside in the least restrictive most normative setting available to her.	06/30/2022		annually

**Short and Long-Term Goals**

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Michelle will continue to attend her day program.	06/30/2022		annually

**Action Steps for Goals:**

**What will the person do?**

Michelle will continue to work with residential and vocational supports to build and maintain all skills necessary to achieve her goals.  
 Michelle will attend PAI and participate in contract work and activities she enjoys at her day program.

**What will the case manager do?**

Case Manager will meet with Michelle twice per year or more often as needed, to assist with service planning, coordinating referrals, assessing strengths and needs and monitoring what is important to Michelle. CM will monitor health, safety, service utilization and the delivery of supports. The case manager will provide a copy of all service plan changes when they occur.  
 Case management staff is a mandated reporter who will be responsible for reporting any suspected abuse to Minnesota Adult Abuse Reporting Center (MAARC) 1-844-880-1574.

**What will others do?**

Her Guardian will continue to work with her formal and informal supports to assist Michelle to reach her goals while ensuring her health and safety needs are being met.

Michelle's family will provide mental and emotional health, informally.

**What will the provider do?**

Residential provider will continue to work with Michelle to build and maintain all skills to meet her goals and to ensure all her health and safety needs are met. They will assist Michelle in her goals as identified by the IDT members.

PAI will continue to work with Michelle to build and maintain employment and vocational skills to meet her goals, and to ensure her health and safety needs are met during their scheduled time. PAI will help Michelle meet her goal of socializing at PAI by providing group activities.

## **SUMMARY OF PROGRAMS AND SERVICES**

<b>Program Type</b> DD Rule 185/Related Condition	<b>Start Date</b> 07/01/2021	<b>End Date</b> 06/30/2022	<b>Annual Amount</b> \$0.00	<b>Total Plan Cost</b> \$0.00	<b>Avg Monthly</b> \$0.00
<b>Case Manager/Care Coordinator</b> Paula Goeldner		<b>Case Manager/Care Coordinator Provider ID</b> A501724600		<b>Responsible Party Name</b>	
<b>Program Notes</b>					

<b>Service</b> ICF-DD							
<b>Start Date</b> 07/01/2021	<b>End Date</b> 06/30/2022	<b>Procedure Code</b>	<b>Frequency</b>	<b>Units</b> 365	<b>Rate</b>	<b>Avg Monthly</b>	<b>Total Service</b>
<b>NPI/UMPI</b> 1134217037	<b>Status</b> Approved	<b>Provider Name</b> HOWARD HOUSE	<b>Funding Source</b> Medicaid State Plan	<b>County of Service</b> Ramsey			
<b>Areas of Need</b> Home Management, Personal Security, Health Related/Medical, Quality of Life, Personal Assistance, Cognitive and Behavior Supports							
<b>Support Instructions</b> Howard House/Phoenix Residence provides a 24 hour plan of care for Michelle. Michelle cannot be left alone at home, or in the community. Michelle needs assistance with all ADLs.							
<b>Service Notes</b>							

<b>Program Type</b> Other	<b>Start Date</b> 07/01/2021	<b>End Date</b> 06/30/2022	<b>Annual Amount</b> \$0.00	<b>Total Plan Cost</b> \$0.00	<b>Avg Monthly</b> \$0.00
<b>Case Manager/Care Coordinator</b> Paula Goeldner		<b>Case Manager/Care Coordinator Provider ID</b> A501724600		<b>Responsible Party Name</b>	
<b>Program Notes</b>					

<b>Service</b> Adult day program						
<b>Start Date</b> 07/01/2021	<b>End Date</b> 06/30/2022	<b>Procedure Code</b>	<b>Frequency</b>	<b>Units</b> 250	<b>Rate</b>	<b>Avg Monthly</b> <b>Total Service</b>
<b>NPI/UMPI</b> A984668900	<b>Status</b> Approved	<b>Provider Name</b> PHOENIX ALTERNATIVES INC-COMMERCE		<b>Funding Source</b> Medicaid State Plan	<b>County of Service</b> Washington	
<b>Areas of Need</b> Employment/Training/Skill Building						
<b>Support Instructions</b> Michelle attends PAI Commerce 4 days per week, and has every WEDnesday off. Michelle goes into the community often for volunteer work and also community activities. She considers herself to be "partially retired". Michelle's PAI service is funded by straight medical assistance d/t living in an ICF/ID.						
<b>Service Notes</b>						

## RISKS

### How will Health and Safety Issues be Addressed?

Michelle knows to call 911 in an emergency. Michelle receives 24-hour supervision, and someone is always with her to get help in the event of any emergency. It was reported that if she were yelled at or mistreated, she would get quiet. She wouldn't talk for a long time and may not tell parents. She is not an accurate reporter and has reported inaccurate things in the past. Her staff will monitor for changes in affect and behavior. Michelle at risk of self-neglect in the above checked areas and is a vulnerable adult. Michelle's parents, Judy and Valmer Barrows, are her co-guardians.

The following table documents and acknowledges any risks that exist based on identified remaining needs above.

Identified risk and choice regarding services	Negative outcome that may result	Alternative measure that may be implemented
Michelle is a vulnerable adult and at risk for verbal, physical, and financial exploitation.	Verbal, physical, financial exploitation.	Michelle has a 24 hour plan of care with family and staff supports to ensure all of his health and safety needs are met.

### Summary plan/agreement reached to address the identified risks:

Michelle has a 24 hour plan of care to ensure all of her health and safety needs are met, that she and her team work together to create and follow.

## Emergency & Back Up Plans

### Plan for unforeseen events (e.g, weather, storms, power outages)

Michelle's 24 hour plan of care is the responsibility of The Phoenix Residence/Howard House. The Phoenix Residence has a building plan for weather emergencies and practice drills for such events per their licensing.

Michelle has a 24 hour plan of care to ensure all of her health and safety needs are met, that she and her team work together to create and follow.

Key Contact Name	Relationship	Phone Number
Niki Novak/The Phoenix Residence/Howard House	House Manager	(651) 777-6754

### Plan for emergency health events

Michelle has a 24 hour plan of care to ensure all of her health and safety needs are met, that she and her team work together to create and follow. This includes scheduling, attending medical appointments, following doctor recommendations and medication set up and administration. Her residential and vocational staff along with her family will monitor Michelle for any illnesses or injuries and follow the appropriate protocol.

Key Contact Name	Relationship	Phone Number
Howard House/Niki Novak AND Judy and Valmar Barrows and Kathleen Picha	House Manager and Parents/sister/gdn	(000) 000-0000

### Plan for unavailable staffing that puts the person at risk

The Phoenix Residence/Howard House is responsible for a 24 hour plan of care and they must provide coverage staffing if needed in accordance to their licensing.

Key Contact Name	Relationship	Phone Number
Niki Novak/The Phoenix Residence/Howard House	House Manager	(651) 777-6754