

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

Name of person served: Jeff Stroth

Date of development: July 8, 2021

For the annual period from: July 2021 to July 2022

Name and title of person completing the *CSSP Addendum*: Dayna Gordon, Designated Coordinator/Program Supervisor

Legal representative: Kathy Stroth

Case manager: Mai Kou Nguyen, Ramsey County Community Human 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 Jeff is intensive support services in a day training and habilitation (DTH) community based program. The program works with Jeff to develop and implement achievable outcomes that support his goals and interests, and develop skills that help him achieve greater independence and community inclusion. PAI works to increase and maintain Jeff’s physical, emotional, and social functioning. Support is provided in the most integrated and least restricted environment for Jeff. PAI works with Jeff’s residential provider and transportation provider for continuity of care.

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: Jeff will personally hand his money to the cashier when purchasing items in the community at least once a month with one or less hand over hand prompts 80% or more of trials by his next outcome review.

Outcome #2: Daily, when Jeff arrives he will come up with 3 positive things to think about during the day when given 2 or fewer verbal question prompts 75% or more of trials by his next outcome review.

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

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:

Jeff enjoys using technology. He likes playing on his computer in his free time, and also enjoys using iPads at PAI.

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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:

- **Seizures:** Jeff has a seizure disorder which is currently controlled with medication. In the event of a seizure, trained PAI staff will follow PAI standard of operations for seizure first aid.
- **Choking:** Jeff cannot independently cut his food into bite sized pieces. PAI staff will serve food sent from home. Staff will visually check Jeff's lunch and if his food is not cut up into bite sized pieces (quarter size or smaller), staff will cut up the food for Jeff.
- **Chronic medical conditions:** Jeff is prone to blisters/sores on his legs and feet. If blisters are seen, PAI staff will contact Jeff's residential provider via phone call. His residential provider will assist him in following up with his physician as needed. Jeff has a spinal curvature that places him at risk of pain or injury should he attempt to reach or stretch in a manner that strains his back. PAI staff keep objects/work materials within Jeff's reach so he does not need to overextend his back. PAI staff will report any declines in strength or abilities to his team via phone call so this information can be shared with Jeff's physician and/or physical therapist.
- **Treatment orders, medications:** Jeff currently does not take a routine medication at PAI. Should Jeff need to take medication or follow treatment orders, staff trained in medication administration will administer treatment or medication to Jeff per a signed physician's orders. Physician's orders are valid for one year from the signed date. His residential provider will provide all needed medication/treatment supplies.
- **Other: Baclofen Pump:** Jeff has a Baclofen pump and is at risk of skin breakdown with the placement of the pump. Jeff is being monitored by his physician. His residential provider assists Jeff with routine appointments to have baclofen levels checked. PAI will report any concerns with the pump to his residential provider. His residential provider will help him follow up with his physician as needed.
- **Medical and dental appointments, preventative screening:** Jeff needs help with his medical and dental appointments. Jeff's residential provider will help him with his medical and dental appointments and preventative screening. Should Jeff exhibit medical or dental issues at PAI, his residential provider will be contacted. His residential provider will help him follow-up with his medical or dental provider as needed.
- **Risk of falling:** Jeff uses a manual wheelchair for mobility. When using the restroom, Jeff will use the grab bar with one staff pivot transfer. Jeff can bear some weight and can hold onto grab bars. Staff will help him pivot and help him with his pants.
- **Mobility:** PAI staff will physically propel Jeff's wheelchair for him in environments or situations where he needs to move quickly.
- **Regulation of water temperature:** Staff will adjust water taps for Jeff as needed and test water temperatures using their hand or their wrist prior to Jeff's use. At a community based job site, Jeff is encouraged to access the cold water only for hand washing.
- **Community survival skills:** Jeff is with staff in the community. Staff will provide coaching on pedestrian safety and physically push Jeff's chair for him on uneven terrain or long activities as needed. Staff will provide coaching on how to communicate with others in the community as needed.
- **Water safety skills:** If a situation arises in which Jeff is in or on a body of water, Jeff will wear a life jacket.
- **Sensory disabilities:**
 - Vision: PAI staff will place items in close proximity to Jeff as needed so he can complete tasks. Staff will provide verbal cues as necessary when Jeff is ambulating or propelling his wheelchair in close quarters or high traffic areas to avoid obstacles. If needed, staff will propel Jeff's wheelchair for him.
 - Hearing: PAI staff will report any complaints of ear pain and/or symptoms of infection to residential staff by phone call and written illness report so the information can be relayed to Jeff's physician.
- **Person-centered information**
 - Important to Jeff: Having the opportunity to be social with peers, being included in the community, having the opportunity to go to work as often as he can, when people around him are getting along

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- Important for Jeff: Having opportunities to interact and socialize with his peers, having the opportunity to work whenever possible, getting out into the community
- A good day for Jeff: Working at Dynamic Air, socializing with friends at PAI, going to eat at McDonald's, getting to wear his hat all day, eating ham, having good conversations with people.
- A bad day for Jeff: Going to the dentist, being bored and not having work to do, being told what to do, having arguments, and having a sandwich for lunch.
- Likes: Shopping, bowling, mall walking, seeing scary movies, rap and country music, chicken noodle soup, McDonald's, working at Dynamic Air, playing on the computer, chatting with peers and staff, ham
- Dislikes: Rice, sandwiches, going to the dentist, listening to staff at home, being told what to do, when people argue and fight, being at the hospital, Cities 97 radio station

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**:

- PAI offers several classes available for both skill building and leisure. Jeff has control over his schedule by picking how many classes he'd like to attend, and choosing to work on-site when not in class or the community.
- Jeff prefers to work as opposed to attending class when possible.
- Jeff likes to take a break and talk with a trusted staff when he is feeling upset. It is important for staff to provide positive encouragement.

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 Jeff can choose to participate in. Typically, before COVID-19, Jeff would be given a list the classes available quarterly and Jeff's program supervisor or lead would walk Jeff through the different options available and help Jeff pick classes that fit his interest, preferences, or particular skills he would like to work on. Jeff may need assistance with steering or maneuvering his wheelchair and with fine motor skill tasks, but staff always allow Jeff to try these tasks on his own first before asking Jeff if he would like assistance. At Jeff's semi-annual and annual time of year, Jeff's designated coordinator and lead talk to Jeff and discuss his goals for the next review period and adjust his 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 such as Maplewood Mall, Pinz Bowling Alley, Caribou, Starbucks, Cup and Cone, parks and trails, and many other locations. Jeff has the opportunity to choose which activities he would like to participate in by choosing about 1-2 locations a month that interest him. PAI also offers volunteer opportunities offsite, including but

PAI

not limited to: Tamarack Nature Center, Neighbors Thrift Store, Books for Africa, and Meals for Wheels. Other opportunities offered right on site from community members include pet therapy, music therapy, bingo with Spire, and White Bear Center for the Arts.

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

- Jeff is encouraged to communicate and associate with those of his choosing onsite at PAI and when in the community. Jeff has many good social skills and is a friendly individual. When appropriate, staff will introduce Jeff to important members of the community (a tour guide at a museum, a volunteer coordinator at a volunteer site, etc.) and then will let Jeff navigate and develop an appropriate relationship.

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

- Jeff has some competitive paying jobs available to him onsite at PAI though the majority of jobs onsite are still piece-rate jobs. Jeff has expressed interest in the past in finding a job in the community and PAI does offer employment services to anyone that is interested in enrolling. When Jeff and his team feel that it is safe for Jeff to return to PAI, Jeff's team should discuss enrolling Jeff in employment services officially if he is still interested.

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?

- Jeff's residence, guardian, PAI staff, and case manager exchange information as it relates to Jeff's services and cares. Meetings and reports are shared with Jeff's team. Jeff's team works together to ensure continuity of care. In-person conversations, phone calls, emails and faxes may be used to discuss current information.
- Jeff's guardian advocates on his behalf and help make legal decisions for him.
- Case manager, Zoie Mester, develops Jeff's CSSP and completes Jeff's service agreements and communicates with Jeff's support team to ensure continuity of care.
- Jeff's residence, REM, helps Jeff with services at home and communicates any needed medical information and updates to PAI and the team.
- PAI will provide Jeff with employment opportunities onsite and help Jeff work on vocational training and skill building. PAI will communicate any health and medical concerns to Jeff's residence.

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:

Guardian:

Kathy Stroth, Guardian
701-317-0002
strothkathy@yahoo.com

REM:

Christine Wenger, REM Program Director
651-643-6739

PAI

651-321-3660

chritine.wenger@themnetornetwork.com

Afrika Drummond, REM Program Coordinator

651-683-2162

612-450-8822

Afrika.drummond@thementornetwork.com

Case Manager:

Zoie Mester, Pinnacle Service, Case Manager

612-977-3100

Zoie.Mester@pinnacleservices.org

DT&H:

Dayna Gordon, PAI

651-747-8740

dgordon@paimn.org

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:

Jeff has expressed finding a job in the community before but has never been officially enrolled in employment services. Due to COVID-19, Jeff and his team have chosen for him to not return since the beginning of the pandemic. Jeff has the opportunity to enroll in employment services when he and his team decide it is safe for him to return to PAI.

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

When Jeff and his team decide it is safe for Jeff to return to PAI, Jeff's team should discuss enrolling in employment services officially if he is still interested.

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

PAI

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.

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. PAI will notify Jeff's residence if any are noted.
- Monitoring for changes in hearing or vision function. PAI will notify Jeff's residence if any are noted.

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: N/A

Medication assistance: N/A

Medication administration: N/A

Psychotropic Medication Monitoring and Use	
Does the license holder administer the person's psychotropic medication? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	
4.	

Permitted Actions

PAI

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:
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?

Yes **No** If yes, please specify:

PAI

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? Yes **No**

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:

1:4 1:8 1:6 Other (please specify): NA

Frequency Assessments

1. Frequency of *Progress Reports and Recommendations*, minimum of annually:
 Quarterly **Semi-annually** Annually
2. Frequency of service plan review meetings, minimum of annually:
 Quarterly Semi-annually **Annually**
3. Request to receive the *Progress Report and Recommendation*:
 At the support team meeting At least five working days in advance of the support team meeting
4. Frequency of receipt of *Psychotropic Medication Monitoring Data Reports*, this will be done quarterly unless otherwise requested:
 Quarterly Other (specify): **NA**