

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

Name of person served: Matthew Hutchinson

Date of development: July 29, 2021 For the annual period from: July 2021 to July 2022

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

Legal representative: Jenny Madson

Case manager: Raymond Castro, People Incorporated

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 Matthew at PAI include Day Support Services and Prevocational Services. PAI works with Matthew to develop and implement achievable outcomes based on Matthew’s goals and interests. PAI provides supervision, outcome implementation, transportation to community activities, onsite employment opportunities, data tracking and daily support related to his health, safety, and well-being as needed by Matthew.

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: Matthew will follow written microwave instructions to warm up his lunch with 1 prompt or less, 60% of trials until next review.

Outcome #2: Matthew will use his communication device to order food at a restaurant, 75% of trials until next review.

PAI

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

- Matthew currently uses a communication device and it appears to meet his needs. PAI will continue helping Matthew find ways to utilize his device and use it more consistently and 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

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:

- **Dietary Supports; Choking:** Matthew eats very fast and has trouble with portion control. Matthew will pack and prepare his lunch from home. Staff will verbally remind Matthew to slow down when he is eating. If Matthew is being served or buying additional food at PAI, staff will help Matthew follow appropriate portion sizes.
- **Self-Administration of Medication:** Matthew is unable to administer medication independently. Matthew does not have any scheduled medication or PRN medication onsite at PAI. If the need did arise, a staff trained in medication administration could administer medication to Matthew per a signed physician's order. Matthew and his guardian would need to supply PAI with the order and medication ahead of time.
- **Preventative Screenings; Medical and Dental Appointments:** Matthew's mom helps Matthew schedule and attend all medical appointments. Staff will observe Matthew for changes in health or signs/symptoms of illness/injury and will notify Matthew's mom if any are noted. Matthew's mom will help Matthew follow up with his physician as needed.
- **Regulating Water Temperature:** Matthew may not adjust the water to a safe temperature when washing his hands and does not enjoy getting his hands wet. Staff will remind and encourage Matthew to wash his hands after using the restroom and when appropriate. The water temperature at PAI is set at a controlled temperature safe for hand washing. When in the community, staff will adjust and check the water temperature before Matthew washes his hands.
- **Community Survival Skills:** Matthew may wander off and does not understand that strangers could potentially be dangerous. Matthew is non-verbal and would not be able to ask for help if lost or in the event of an emergency. Matthew does not exhibit street safety skills. Staff will always be with Matthew onsite and in the community. Staff will model safe pedestrian skills and stranger safety and prompt Matthew to follow these as needed. Staff will ensure Matthew stays with the group when in the community. Staff carry Matthew's basic health information and ID information with in the community and will share this with emergency personnel if the situation required. Matthew also wears a medical ID bracelet. Staff will encourage and remind Matthew to bring his communication device with on outings.
- **Water Safety Skills:** Matthew does not understand water safety or exhibit the necessary caution around deep water. PAI does not offer swimming as part of programming. If Matthew were to participate in an activity near a large body of water, staff would staff with Matthew the duration of the activity and help Matthew put on a life jacket.
- **Sensory Supports:** Matthew may exhibit some behaviors/actions that he uses to self-regulate. Matthew may hum and rock his body back and forth when he is over stimulated or upset about something. Matthew may stand off to the side of the room and jump up and down or go to the restroom and stare in the mirror. Matthew does not like the sensory feeling of getting his hands wet or dirty. Matthew does not like loud noises and will cover his ears. Staff will watch for signs that Matthew is over-stimulated and support Matthew's attempts to self-regulate. If Matthew seems upset, staff will ask Matthew to use his communication device to tell them what is wrong. Staff can offer Matthew a quiet, less busy room to take a break if needed. It can be helpful to say "it looks like you need a deep breathe," to Matthew to help him calm himself down.

PAI

- **Communication:** Matthew’s verbal vocabulary is very limited, and his speech is inarticulate. Matthew uses a communication device to communicate (a NovaChat5, which Matthew calls his “phone.”) Matthew will usually speak verbally first, and then will use his communication device to clarify or expand when prompted. Matthew is capable of saying full sentences with his device. Matthew keeps his communication device on him and is very good about caring for it. Matthew sometimes exhibits humming as an additional means of communication. Matthew may hum when he is in a good mood, and when asked by his mom “are you happy,” will give her a thumbs up. However, if Matthew is humming and rocking his body or plugging his ears, this usually communicates that Matthew is upset about something.
- **Restroom Assistance:** Matthew needs assistance with hygiene after having a bowel movement. Matthew will let staff know when he needs to have a bowel movement. Staff will follow Matthew to the restroom and allow his privacy until he indicated he is ready for assistance with wiping.
- **Person Centered Information:**
 - **Important to:** spending time with his family (and his sister Megan when she is home), his communication device, and having a consistent and predictable schedule.
 - **Important for:** his family for support, staying active in his community, staying healthy, self-regulation techniques, and his communication device and support with using it.
 - **Likes:** his computer (using it to research places he has gone in the recent past), clear directions and expectations, roller coasters, trains, swimming, restaurants, going to MOA, YMCA, shopping, sleeping, reading, goldfish crackers, peanut butter and jelly sandwiches, music, class on the 50 states, and bowling.
 - **Dislikes:** getting his hands wet, messy situations, changes to his routine, power outages, not knowing what to expect, arts and crafts, and loud noises and sirens.
 - A **good day** for Matthew would be characterized by Matthew smiling and participating in activities. Matthew prefers when the room he is in is quieter and not too crowded. Matthew may do some self-regulating activities like rocking back and forth but will give staff the thumbs up if he is in a good mood. Matthew likes to interact with peers but does not initiate these interactions.
 - A **bad day** for Matthew would be characterized by Matthew needing to take extra breaks to self-regulate and Matthew not wanting to participate in activities. Matthew may hum or plug his ears when rocking his body which usually indicates that Matthew is upset. Matthew may refuse to participate in an activity that does not interest him, like work, and may indicate this with his body (not moving to where asked, swinging his arm). Loud, busy, and chaotic environments make it difficult for Matthew to self-regulate.

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**:

- Matthew will have control over his schedule at PAI by choosing which classes he would like to take after covid-19 cohort restrictions have been lifted. When outings resume, Matthew will get to choose which outings he would like to participate in. When work is available to do, Matthew can choose to work or take a class if he does not want to.
- Matthew prefers a consistent schedule and to know what that schedule is. Unexpected changes to his Matthew's routine or schedule will deregulate Matthew and cause him to be upset. Staff should let Matthew know about changes to his schedule or routine ahead of time.
- Matthew prefers to keep his belongings neat and orderly and in their proper spot. Matthew has specific places that he keeps all of his belongings in his bag.
- Matthew prefers the opportunity to self-regulate as needed- staff will give him the time and space to do this.
- Matthew prefers support with communication device- Matthew will usually speak verbally first, and then will use his communication device to clarify or expand when prompted.
- Matthew prefers some locations to use the restroom over others. Matthew may not use the restroom for bowel movements at PAI and may wait until he gets home.
- Matthew prefers a visual schedule to follow and is a visual learner.
- Matthew prefers to take it easy and may nap for a little bit after lunch.
- Matthew prefers writing over coloring or doing a craft.
- Matthew prefers some classes over others, with music therapy and a 50 states class so far being his favorite.

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 Matthew can choose to participate in. Matthew will be given a list of the classes available quarterly and can pick classes that fit his interests, preferences, or particular skills she would like to work on (post covid-19 when cohorts can mix again).
- Staff will ask for Matthew's input often and accommodate his preferences whenever possible.

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

- PAI usually offers community outings on a daily basis to several community locations. Matthew will have 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. Other opportunities are offered onsite at PAI with community members, such as pet or music therapy.

PAI

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

- Matthew is encouraged to communicate and associate with those of his choosing onsite at PAI and when in the community. When appropriate, staff will introduce Matthew to important members of the community (a tour guide at a museum, a volunteer coordinator at a volunteer site, etc.). Matthew may or may not desire to talk to others in the community. When appropriate, staff will remind Matthew to use his communication device to express his thoughts.
- Matthew can take classes, go on outings, work, and eat lunch with those of his choosing (at his table, or the same room) when available.

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 and there are other services in the area that offer similar services. Matthew is currently not interested in finding a job in the community and is not enrolled in these services but could at any time- with PAI or another organization.

PAI

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?

- Matthew's guardian, PAI, and case manager exchange information as it relates to Matthew's services and cares. Meetings and reports are shared with Matthew's team. Matthew's team works together to ensure continuity of care. In-person conversations, phone calls, emails and faxes may be used to discuss current information.
- Matthew's guardian, Jenny Madson, advocates on Matthew's behalf and makes legal decisions for him. Matthew lives with Jenny and Jenny manages his finances. Jenny ensures all of Matthew's needs are being met and provides any information to Matthew's team about changes in supports needed.
- Case manager, Raymond Castro from People Incorporated, develops Matthew's CSSP and completes Matthew's service agreements. Raymond communicates with Matthew's support team to ensure continuity of care.
- PAI will provide Matthew with day support services and prevocational services at PAI. PAI provides supervision, outcome implementation, transportation to community activities, onsite employment opportunities, data tracking and daily support related to his health, safety, and well-being as needed by Matthew. PAI will communicate any health and medical concerns to Matthew'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:

Raymond Castro, People Incorporated
P: 612-723-4486
Email: Raymond.Castro@peopleincorporated.org

Jenny Madson, Guardian
P: 612-578-5720
Email: jamadson@mmm.com

Cortney Kelly, PAI Program Supervisor
P: 651-747-8740
Email: ckelly@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: Matthew is currently not enrolled in employment services but may be interested in the future.

Describe any further research or education that must be completed before a decision regarding this transition can be made: PAI will provide prevocational services- onsite work and classes and training on work skills. PAI will ask about interest in employment services again at Matthew's 45 day meeting.

PAI

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. PAI will notify Matthew's mom 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
<p>On a continuous basis, does the person require the use of permitted actions and procedures that includes physical contact or instructional techniques:</p> <ol style="list-style-type: none"> 1. To calm or comfort a person by holding that person with no resistance from the person. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain how it will be used: 9. Is positive verbal correction specifically focused on the behavior being addressed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain how it will be used: Matthew needs his communication device on him to effectively communicate with others. Matthew often times needs to be prompted to use his device to elaborate on what he is trying to tell others.

PAI

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:

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