

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

Name of person served: Mary Jo Huberty

Date of development: 8.6.2021

For the annual period from: August 2021 to August 2022

Name and title of person completing the *CSSP Addendum*: Emily Elsenpeter, Designated Coordinator

Legal representative: Therese Behnke and Matthew Huberty, Siblings

Case manager: Maggie Miller, Dakota County

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 Mary Jo is intensive support services in a day training and habilitation community-based program and/or day support services. The program works with Mary Jo to develop and implement achievable outcomes that support her goals and interests and develop skills that help her achieve greater independence and community inclusion. PAI works to increase and maintain Mary Jo’s physical, emotional and social functioning. Staff support Mary Jo in completing activities of daily living and instrumental activities of daily life, outcome development and implementation, supervision, medication administration, data tracking and daily support related to her health, safety and wellbeing as needed. Support is provided in the most integrated and least restricted environment for Mary Jo. PAI works with Mary Jo’s guardian 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: Daily, Mary Jo will choose a sensory activity to participate in, during sensory time, in 75% of all opportunities over the next 6 months.

This outcome is both important to and for Mary Jo. It is important to her that she is able to participate in activities that she values and is interested in. This outcome is important for Mary Jo because she is able to use and continue to strengthen her communication skills.

Outcome #2: Daily, Mary Jo will use her gait trainer in 75% of all opportunities over the next 6 months.

Mary Jo participates in Special Olympics track and field. Mary Jo enjoys walking and will often laugh and smile while doing so. This outcome is important to her, but also important for her. It is important that she maintains the strength in her legs to be able to participate in transfers and her cares routine.

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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:

Mary Jo already is experiencing technology in her daily life that is also gaining her greater independence. This technology includes:

- Mary Jo may utilize technology at PAI daily using the iPad for choice making, communication, music, and videos.
- Mary Jo can access the television in her program area for sensory videos and to play games on the Wii.
- Mary Jo may use the SMART Board to play games and watch sensory videos.
- No further exploration of technology is needed at this time.

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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:

Allergies: Mary Jo has a sensitivity to second and third hand smoke. Mary Jo will limit direct contact (personal cars, assisting with walking or eating) with a staff person who has been smoking or exposed to smoke for 30 minutes after smoking. She is also sensitive to latex band aids and may develop a rash when exposed. Mary Jo will use latex free band aids. Any concerns regarding allergies will be communicated to the support team.

Choking: Mary Jo does not have teeth or chew her food and may pocket food in her cheek while eating putting her at risk of choking. Mary Jo's food is sent in from her residence prepared according to her physician's order. PAI staff check that Mary Jo's food is prepared according to the orders before assisting her in eating. Concerns or issues regarding choking will be communicated by staff to Mary Jo's team.

Special dietary needs: PAI receives Mary Jo's food from her residence prepared. Mary Jo has a physician's order to have a pureed with honey thickened liquids diet. She does not have any teeth or chew her food. Mary Jo uses a small mother care spoon, a sectioned plate, and a regular cup. Mary Jo eats in her wheelchair with arms at the table. Mary Jo is assisted from her right side in eating hand over hand for ten to fifteen minutes. After working with hand over hand assistance, staff will provide full assistance to Mary Jo. She is to have 20-30 seconds between teaspoon sized bites and sips. Liquids are spoon fed to her. Any concerns regarding diet will be communicated to the support team.

Chronic Medical Conditions: Mary Jo has a history of Stroke. She is observed for signs and symptoms of stroke such as headaches, numbness, or weakness on one side of the body, confusion, balance issues while walking or sitting and being uncoordinated. Concerns are reported to the residence as soon as possible and 911 will be called as situation dictates. Mary Jo's team would like her to take short rest periods as needed due to her history of stroke. She has a blood pressure protocol in place monitored by her residence. Should Mary Jo's blood pressure measure high in the morning, she will not attend programming at PAI until it has returned to baseline.

Self-administration of medications or treatment orders: PAI-Oakdale staff receive Mary Jo's medications and set it up according to prescriber's orders and as directed by the pharmacy/prescription bottle. Each medication administration time, staff dispense the medication for Mary Jo and inform her of the medications she is being given. They provide the medication crushed in soft foods such as pudding or applesauce. Staff have received training on medication administration and complete quarterly medication administration record review to ensure no medication errors have occurred. Concerns or issues regarding medication will be communicated by staff to Mary Jo's residence.

Other health and medical needs:

- **Anemia:** Mary Jo is diagnosed with anemia. **Anemia is** a condition in which you lack enough healthy red blood cells to carry adequate oxygen to your body's tissues. Mary Jo takes medication daily at her residence for her anemia. Staff will report any concerns or noted symptoms to Mary Jo's residential provider via phone or communication book.
- **GERD (Gastroesophageal Reflux Disease):** Mary Jo has **GERD which is** a chronic digestive disease that occurs when stomach acid or content flows back into a person's esophagus. Mary Jo's GERD is monitored by her residence and her physician. She takes medication daily to alleviate symptoms. Mary Jo will remain in an upright position for at least thirty minutes after eating. PAI staff will report concerns to Mary Jo's residence.
- **Constipation and Bowel Obstruction:** Mary Jo had a bowel obstruction called Cecal Volvulus in December 2017. Mary Jo's residence monitors her bowel movements and bowel protocol. Mary Jo takes multiple medications each day to address symptoms of constipation. Staff will report Mary Jo's eliminations daily in her communication book along with any concerns.
- **Ventral Hernia:** In April 2019, Mary Jo was diagnosed with a ventral Hernia. A **ventral hernia is** a bulge of

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tissues through an opening of weakness within your abdominal wall muscles. It can occur at any location on your abdominal wall. Mary Jo's hernia is monitored by her residence and her physicians. PAI staff will allow Mary Jo to take a slow pace, as needed, and monitor the hernia. PAI staff will report concerns to Mary Jo's residence.

- **Ear Infections:** Mary Jo has a history of frequent ear infections. Mary Jo takes ear drops weekly at her residence to prevent the occurrence of ear infections. Staff will report any changes in behavior or concerns to Mary Jo's residence who along with her Audiologist monitor her ears.
- **Personal Cares:** Mary Jo needs assistance with repositioning, using the rest room and in completing her personal cares. Personal cares are completed every two hours and as needed. Mary Jo wears briefs and uses the toilet once assisted in transferring to it. Mary Jo is not left unattended in the restroom as she may attempt to flip over. Concerns or issues will be reported to her residence.

Risk of falling: Mary Jo has scoliosis and a full spinal fusion. Scoliosis causes the spine to curve to one side. It can affect any part of the spine. Mary Jo can bear weight and stand with assistance. She is assisted by one staff using a transfer belt and a stand pivot. When in her wheelchair, Mary Jo's seatbelt is engaged by staff, and she wears a chest strap for transportation. If in a recliner Mary Jo will wear a safety strap and the footrest will be up to prevent falls. If in regular chair with arms, Mary Jo will be positioned in front of a table and will use a safety strap to prevent falls. She may use a pillow behind her back for additional support. Should Mary Jo attempt to turn over in the chair she is seated in or push the table away, it will be interpreted as her not wanting to sit in it and she will be assisted in returning to her wheelchair. Mary Jo may flip over and attempt to get out of a chair she is seated in. She has fallen to the floor when attempting this and she is at risk for falling.

Mobility issues: Mary Jo's main mode of mobility is her wheelchair. She relies on caregivers to propel her wheelchair and assist her in transfers. Mary Jo will be physically assisted in propelling her wheelchair and securing her seatbelt and during transportation, her chest strap. Mary Jo is assisted into and out of her gait trainer with two staff and a posey belt. She walks in her gait trainer with the support of one staff behind her offering encouragement, guidance, and reminders to keep her feet on the floor. Mary Jo also wears AFO's the duration of her program day and is assisted by her residence in putting them on/off and maintaining them. Staff will notify the residence with any concerns or issues.

Regulating water temperature: PAI keeps water at a safe temperature and staff test the water temperature by running their hand under water prior to Mary Jo encountering it.

Community survival skills: Mary Jo utilizes the PAI transportation provider to safely access the community. Staff provide supervision and physical support of Mary Jo while in the community to practice all pedestrian and traffic safety skills. She is supported safely engaging with the community activities and people of her choice. Staff observe with is occurring around Mary Jo and intervene on her behalf if potentially a dangerous situation were to arise. Staff will call 911 on Mary Jo's behalf in the event of an emergency. Any Concerns regarding this area will be communicated to the residence.

Water safety skills: PAI does not offer swimming or bathing. When near bodies of water, Mary Jo's breaks will be applied, and staff will be within arm's reach of her.

Sensory disabilities (Legally Blind): Due to Mary Jo's stroke she does not have useful vision in her right eye and is legally blind. Mary Jo should be approached from her left side. Staff will tell Mary Jo what they are going to do and provide tactile cues as needed such as "Mary Jo it is time to begin lunch" and then touch Mary Jo's hand. Any concerns regarding her vision will be communicated to the support team.

Mental or emotional health symptoms and crises: Mary Jo has anxiety disorder. Anxiety disorder is a disorder

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characterized by excessive or unrealistic anxiety about two or more aspects of life (work, social relationships, financial matters, etc.), often accompanied by symptoms such as palpitations, shortness of breath, or dizziness. Mary Jo may show symptoms of behavior such as yelling and loud vocalizations for extended periods of time (15 minutes or more). Staff are to redirect her or sit with her until she has stopped showing symptoms. Any concerns regarding this area will be communicated to the residence.

Person-Centered Information:

- It is **important to** Mary Jo to have relationships in general with family and friends. She appreciates listening to people talk and being in the presence of other people. It is important to Mary Jo to be outside when the weather is nice, and she can swing and garden.
- It is **important for** Mary Jo to be repositioned frequently to remain comfortable. She also needs to be active and walking daily. It is important for Mary Jo to be changed as soon as possible when soiled. She will use vocalizations to express that she needs to use the restroom. She also needs to be offered a beverage throughout the day.
- Finding the **balance of important to and for:** Mary Jo would like to be engaged with Mary Jo and assisting her in engaging in program and community activities, offering sensory activities, opportunities to walk and stand, and provide choices areas are some of the ways she can be supported.
- What can happen to have more **good day than bad:** Mary Jo loves participating in sensory activities such as using the weighted blanket, massages, and aroma therapy.
- Mary Jo **likes** being called “Princess”, “Jo Jo” and “MJ” by her family, friends, and caregivers. Disney movies and movie themed music. She likes to give hugs. She enjoys listening to music and reading. Mary Jo likes bowling, shopping at Target and eating at Baker’s Square. Mary Jo also likes participating in Special Olympics Activities with her family and residence. She likes sweets, especially ice cream and pie. She also enjoys eating mashed potatoes and yogurt. Mary Jo enjoys music, specifically the Beatles, Older Country music, and Folk.
- Mary Jo **dislikes** outings in large groups. She does not like to sit in the same manner for extended periods of time as she gets stiff. She does not like when people are too close to her when she is upset. Mary Jo does not care for food of varying consistency as it is hard for her to process it. She dislikes tuna and peanut butter.

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:**

- Mary Jo prefers to be provided instruction or guidance with verbal prompting and prefers physical assistance through hand over hand. Staff use simple words and sentences when providing verbal and physical assistance.
- Mary Jo communicates by making direct eye contact with her asker for “yes” and at times, will vocalize negatively for “no”. Mary Jo responds best to yes/no questions. Mary Jo will also eye point to indicate a preference when offered choices. She requires time to process requests made of her, it is best to ask and wait 20-30 seconds for her to process.
- Mary Jo makes choices about her schedule, community activities, and daily activities using picture cards and the iPad. She is provided options throughout her day to make choices and decisions. Her decisions are honored.

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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**?

Mary Jo works on outcomes that are both important to and for her. Mary Jo is offered a variety of choices throughout her day regarding her preferred activities.

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

Mary Jo has opportunities to choose community integration trips. While in the community, Mary Jo is encouraged and supported in interacting and creating positive relationships with others she encounters.

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

Mary Jo has the opportunity to spend time in the community, volunteer, and visit other preferred places. Mary Jo is encouraged and supported in interactions with members of the community to create relationships.

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

Mary Jo and her team have decided not to seek out competitive employment at this time. She is content with where she is at and finds value in the enrichment activities that she is currently participating in. If Mary Jo and her team decide that they would like to seek out competitive employment, her team will hold a meeting to discuss the next steps needed to fit Mary Jo's desires.

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?

- Mary Jo's residence, guardian's and PAI staff collaborate in the exchange of information as it relates to Mary Jo's services, health, and care. Meeting and reports are shared, and the team works together to ensure continuity of service through in-person conversations, phone calls, emails, and Mary Jo's communication book.
- PAI works with Mary Jo's residence for supplies needed at PAI, as well as treatments/medications and corresponding orders.
- Therese Behnke and Matthew Huberty are Mary Jo's private legal representative and parent who advocates on her behalf as well as makes legal decisions with her. The legal representatives provide information and direction on Mary Jo's services and supports in collaboration with other members of this support team.
- Maggie Miller, case manager from Dakota County, develops the Coordinated Services Support Plan, completes service agreements, participates in service direction, assists Mary Jo and her legal representative in advocacy and finding additional opportunities or resources and communicates with the members of Mary Jo'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:

- PAI-Oakdale, Day Program
Emily Elsenpeter
eelsenpeter@paimn.org
Phone: 651.748.0373
Fax: 651.748.5071
- Living Well- Cope, Residential
Alyssa Gaus – Residential Supervisor
Alyssa.Gaus@LivingWell.org
Phone: 651-483-9596
Cell: 218-409-0776
- Case Manager
Maggie Miller
Phone: 651-554-6024
Maggie.miller@co.dakota.mn.us
- Guardians:
Therese Behnke
Cell: 651-331-1557
Theresebehnke18@gmail.com
Matthew Huberty
Phone: 952-261-6302
matthew@hubertycreative.com

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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: Mary Jo and her team are not seeking other opportunities at this time. Mary Jo lives at a Living Well home where they assist her guardians in coordinating her services.

Describe any further research or education that must be completed before a decision regarding this transition can be made: There are no further research 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.

Health Needs

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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."

N/A

Please note PAI staff are trained to:

- Observation of signs of injury or illness and provision of first aid or care to treat the concern.
- Request medical supplies and medication refills from guardian and/or group home.
- Administration of medications and treatments.

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

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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: Mary Jo enjoys and may initiate physical interactions such as hand holding and is receptive to touch being initiated by familiar caregivers.
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: N/A
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: Mary Jo requires hand over hand assistance for eating and activities. Mary Jo has minimal fine motor skills and needs staffs help during these times.
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: N/A
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: N/A
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: N/A
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: During an emergency, Mary Jo is unable to leave the area on her own. She needs staff to propel her wheelchair to the safe area while explaining what is happening.
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: N/A
9. Is positive verbal correction specifically focused on the behavior being addressed?
 Yes No If yes, explain how it will be used: N/A
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: N/A
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: Mary Jo uses a gait trainer with staff assistance and needs assistance with putting on and taking off her AFO's.

Staff Information

PAI

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: 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? Yes No

Please note that PAI staff are trained on CPR and First Aid

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