

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

Name of person served: John Boeck

Date of development: 9/1/21

For the annual period from: September 2021 to September 2022

Name and title of person completing the *CSSP Addendum*: Briana Hinzman, Designated Coordinator

Legal representative: Kathy and Robert Boeck

Case manager: Raymond Castro

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 John is intensive support services in a community DTH program and community environment. The program works with John to develop and implement achievable outcomes that support his goals and interests including meeting quality of life indicators, health, and safety. PAI supports this by working with John to encourage activities, outings, and visiting with peers. Staff support John in doing activities of daily living (ADLs), outcome implementation, supervisions, medication administration, data tracking, and daily support related to his health, safety, and well-being as needed by John. Support is provided in the most integrated and least restrictive environment.

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, John will choose a group to participate in 85% of all trials over a 12 month period. John is continuing to work on his choice making skills. John has enjoyed visiting other rooms and would benefit from attending different groups throughout the week.

Outcome #2: Weekly, John will invite a peer from another room using a Mack switch to play or watch a game 85% of all trials over a 12 month period.

Games are important to John. John is working on making new friends and connections while at PAI and is benefitting from working on this skill doing something that he enjoys.

PAI

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:

- John uses technology at PAI daily through the use of the iPad for choice making and music.
- John is able to access the television in the room for sensory videos and to play games.
- No further exploration of technology is needed at this time.

PAI

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: John is allergic to penicillin (rash), amoxicillin (asthma/skin rash), Bactrim (rash), and high fat milk/milk products (mucus build up/difficulty swallowing). John also has precautions to latex (precaution), mosquito bites to head/facial/neck area (lethargy/nausea/ emesis), cats (sneezing/runny nose), dogs (sneezing/runny nose), and anesthesia (facial/throat swelling). Staff are aware of John's allergies and will not give him medication he is allergic to. If John is prescribed any of these medications staff will alert John's residence and doctor. Staff will monitor John for allergic reactions and report any symptoms to his guardians.

Seizures: Staff and John's nurse will monitor John for seizure activity. John's nurse will administer medication to John according to his protocol and notify his guardians.

Choking and special dietary needs: John is diagnosed with oropharyngeal dysphagia and has difficulty initiating a swallow. If John were to eat at PAI his nurse would make this choice and assist John in eating. John's nurse will follow John's dietary protocol. John receives half of his nutrition via G-tube. Trained medication passers are available to John if John's personal nurse were to experience an immediate medical emergency requiring the nurse to go 911 and be unavailable to John.

Chronic medical conditions: John is diagnosed with Agenesis of Corpus Colosseum, a rare birth defect (congenital disorder) in which there is a complete or partial absence of the corpus callosum. It occurs when the corpus callosum, the band of white matter connecting the two hemispheres in the brain, fails to develop normally, typically during pregnancy. Spastic Quadriplegia Cerebral Palsy, a group of disorders that affect movement and muscle tone or posture. It's caused by damage that occurs to the immature brain as it develops, most often before birth. Hypothyroidism, an underactive thyroid gland. Tachycardia, a condition that makes your heart beat more than 100 times per minute. Adrenal insufficiency, a disorder that occurs when the adrenal glands don't make enough of certain hormones. Colitis, a chronic digestive disease characterized by inflammation of the inner lining of the colon. Panhypopituitarism is a condition of inadequate or absent production of the anterior pituitary hormones. John has also been diagnosed with severe aspiration pneumonia complicated by Sepsis, Acute respiratory failure, and neuromuscular restrictive lung disease. John has had a history of acute hypoxic and hypercapnia, subcutaneous emphysema with tension mediastinal pneumothorax, sacral blushing consistent with stage one pressure injury. Staff and John's nurse will follow John's medical protocols and doctor's orders. John's nurse will report and signs or symptoms of John's chronic medical conditions to his guardians.

Self-administration of medication or treatment orders: John's nurse gives medications according to current medication orders. John receives all of his medication by his personal nurse. Trained medication passers are available to John if John's personal nurse were to experience an immediate medical emergency requiring the nurse to leave PAI. The guardian and the nursing agency supervisor will be notified if John's nurse experiences a personal medical emergency requiring the nurse to leave the site.

Tracheostomy: John's personal nurse/staff will follow all medical protocols. Guardians and John's personal nurse will provide PAI with updated protocols that are signed by his physician prior to a PAI staff completing a task. John's nurse will provide all care to John's trach site. John has a full code status. In the event that he needs CPR, his nurse will perform it. PAI staff are not trained to give breaths via trach. If John's nurse is not immediately available to assist with CPR, PAI staff will perform chest compressions only, and call 911.

Equipment Failure: John's nurse and guardian will assess the temperature and decide if it is safe for John to attend program. John's nurse will listen for any alarm sounds and notify his guardians.

PAI

Blood clot: John's nurse visually checks John's lower extremities during cares twice daily or as cares needs allow. John's nurse or staff look for swelling, pain, increased warmth, or changes in skin color. Nursing and guardians are notified as soon as possible if stated symptoms are observed.

Risk of falling and mobility issues: John is diagnosed with Spastic Quadra paresis Cerebral Palsy. John is transferred using a Hoyer lift or in-ceiling track system. John's chest strap should be in secured position during transportation. During program hours, the chest strap and/or lap tray may be removed ensuring pelvic strap and lap belt remain secure. John's nurse will change his brief when necessary and will reposition him throughout the day. Staff are available to assist the nurse for Hoyer transfers. When John is on the mat table, the side rails will be up unless the personal nurse/staff is standing in front of him. His nurse may offer a wedge to be placed under his knees for additional comfort and support. John's personal nurse/staff will ensure all necessary straps are secured. John wears bilateral AFO's while in his stander. John is at risk of increased seizure activity when being lowered in his stander. John uses his stander at nurse's discretion. John's personal nurse will ensure John's bilateral AFO's are on. When returning John from standing to seated position in his stander, his nurse will lower John 15-20 degrees and then allow him 30 seconds to adjust. The nurse will continue lowering John in 15-20 degree intervals until he is seated.

Personal Cares: John wears a disposable brief. John transfers to the mat table via Hoyer, in-ceiling track system, or one-person lift. John's personal nurse assists him with his cares. John will be assisted to wear clean and dry clothing. John is not able to reposition himself. John's personal nurse will help him with repositioning throughout the day.

Regulating water temperature: Staff will physically check the water by placing their own hand in the water and adjust to a safe and comfortable temperature prior to exposing John to the water.

Community survival skills: John is accompanied by staff while in the community. Staff model appropriate social behavior and follow pedestrian safety rules.

Water safety skills: PAI does not offer community outings that are focused around a needed demonstration of water safety skills. PAI may offer outings to local parks with water. John is 1:1 while in the community.

Sensory disabilities: Staff will present choices verbally to John. Staff will state, "raise your hand for (x)" describe the choice or offer tactile choices when available. John startles easily. If a loud noise is about to occur, staff will tell John about it beforehand, such as the sound of the blender at lunchtime. John's nurse may also move John away from the loud environment. Additional noises that John is averse to include recorded voices and the sound of someone paging over the intercom.

Person-centered planning: Things important to John are his family, TV and game shows, music, singing, and spending time outside. Things important for John are his trach, health protocols, and his NPO order.

A good day for John would involve a warm sunny day, someone to sing to him, and being able to watch game shows.

A bad day for John is when people are talking too much, when he attends reading group, or when an environment is too loud.

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**:

John prefers a quiet environment.

John does not like books or reading group, John would prefer to engage in a different activity during these times.

John would like to watch or listen to a game show daily.

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:

NA

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

John is able to work on outcomes that are important for and to him. John makes choices throughout the day of what activities, outings, and groups he would like to participate in.

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

John chooses what outings or community activities he wants to participate in. John is encouraged to interact with community members as he is comfortable.

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

John has the opportunity to volunteer and spend time in the community. John is encouraged to interact with community members as he is comfortable.

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

John and his team are not seeking competitive employment at this time. John and his team feel he is content participating in enrichment activities.

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?

- John's guardians, nurses and PAI staff will share necessary information as it relates to John's services and care. Needed supplies and medications will be provided by his guardian and nurse. Meetings and reports are shared and the team works together to ensure the continuity of service. In person conversations, phone calls, emails and faxes may be used to discuss information.
- Raymond Castro, county case manager, will create the Coordinated Service and Support Plan, participate in meetings, and assist John and his guardians in other supports as requested.

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:

Briana Hinzman, PAI DC
3595 Linden Ave. White Bear Lake MN, 55110
651-777-5622
bhinzman@paimn.org

Kathy and Robert Boeck, Guardians
219 Cesar Chavez St. St. Paul MN, 55107
651-293-0055
rboeck@comcast.net

Raymond Castro, Case Manager
1170 15th Ave. SE Minneapolis MN, 55414
612-522-7055
Raymond.castro@peopleincorporated.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: John and his team are not seeking other providers or options at this time. John lives at home and utilizes day services. John would need to learn bathroom and hygiene skills, know how to work medical equipment, be able to transfer himself, and learn dietary skills prior to leaving a provider setting.

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

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:
NA

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: NA

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:

NA

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
<p>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.”</p> <ul style="list-style-type: none"> • 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 residence • Administration of medications to John • Provide first aid and CPR, as needed <p>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: NA</p> <p>The following information will be reported to the legal representative and case manager as they occur, unless otherwise indicated here.</p> <ul style="list-style-type: none"> • 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

<p>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:</p> <p><input type="checkbox"/> Medication set up:</p> <p><input type="checkbox"/> Medication assistance:</p> <p><input checked="" type="checkbox"/> Medication administration:</p>

Psychotropic Medication Monitoring and Use
<p>Does the license holder administer the person’s psychotropic medication? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, document the following information:</p> <ol style="list-style-type: none"> 1. Describe the target symptoms the psychotropic medication is to alleviate: 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 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:

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: NA
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: NA
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: John has limited fine motor skills, staff are able to assist him complete tasks with hand over hand or hand under hand as tolerated.
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: NA
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: NA
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: NA
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: John is unable to remove himself from an emergency, staff can push John's wheelchair or help him transfer out of the building in an emergency.
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: John is not able to position himself, staff are able to help John be positioned comfortably in his chair. John uses a seatbelt to help him stay comfortably in his chair.
9. Is positive verbal correction specifically focused on the behavior being addressed?
 Yes No If yes, explain how it will be used: NA
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: NA
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: John uses a seatbelt, a pelvic strap, shoulder straps, and a lap tray to help John with positioning. John also uses AFO's when he is in his stander.

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: NA

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