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

Name of person served: Tish Rogowski

Date of development: 3.22.2021 For the annual period from: March 2021 to March 2022

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

Legal representative: Charlotte Rogowski and Angie Rackstraw

Case manager: Stephanie Brown

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 Tish is intensive support services in a day training and habilitation community-based program. The program works with Tish 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 Tish's physical, emotional, and social functioning. Staff support Tish 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 his health, safety and wellbeing as needed by Tish. Support is provided in the most integrated and least restricted environment for Tish. PAI works with Tish's guardian, group home, 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, Tish will indicate that she needs to use the cares room by signing "restroom" in 80% of all opportunities over the next year.
Tish has expressed interest in learning to use ASL. This outcome allows Tish the opportunity to work on this skill while maintaining appropriate communication around a private matter.

Outcome #2: Weekly, Tish will help plan an activity for the following week in 80% of all opportunities over the next year.
Tish often will show initial excitement of an activity but doesn't always want to participate. This outcome allows Tish to be more involved in the planning process and allows her to find activities that are of interest and more meaningful to her.

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:

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

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: Tish may develop welts and hay fever may appear when she is bitten by a mosquito. Tish has seasonal allergies, this may include symptoms such as a runny nose, cough, sneezing, scratchy throat, and/or red and watery eyes. Staff will monitor Tish for signs of these allergies and report any concerns with the group home via phone, email, and/or communication book.

Seizures: Tish's team states that she does not have seizures; however, she does have seizure like episodes. This is most often seen when Tish is uncomfortable with a transfer and is noted to be behavioral by her team. Her whole body will appear to be limp, and she may be unable to talk or have slurred or harder to interpret speech. Staff at the group home note that it is helpful to tell Tish that it is a behavior. PAI will communicate any seizure like activity with the group home via phone, email, and/or communication book.

Choking and Special Dietary Needs: Tish is at risk of choking while eating and requires a bite sized diet. Tish has poor hand to mouth coordination but can feed herself independently. Tish's food will come prepared from her group home in small pieces; however, staff will still check her meal prior to serving. Difficulty choking seems to appear most often when consuming liquids. Tish also uses Thick It in her drinks to lessen the likelihood of her choking and served with a straw. Tish will use a regular cup with a straw, typical utensils, and a divided plate with edges. Staff will report any concerns with her meals or feedings with the group home via phone, email, and/or communication book.

Chronic Medical Conditions:

- **Anxiety** is an emotion characterized by feelings of tension, worried thoughts, and physical changes like increased blood pressure. People with anxiety disorders usually have recurring intrusive thoughts or concerns. They may avoid certain situations out of worry. They may also have physical symptoms such as sweating, trembling, dizziness, or a rapid heartbeat. Staff will monitor Tish and report any concerns regarding anxiety with the group home via phone, email, and/or communication book.
- **Cerebral Palsy**: A congenital disorder of movement, muscle tone, or posture. Cerebral palsy is due to abnormal brain development, often before birth. Symptoms include exaggerated reflexes, floppy or rigid limbs, involuntary motions, constipation, difficulty swallowing, drooling, hearing loss, seizures, spastic gait, teeth grinding, tremor, or difficulty raising the foot. Staff will report any concerns regarding discomfort with the group home via phone, email, and/or communication book.
- **Neurogenic bladder:** Neurogenic bladder is a problem in which a person lacks bladder control due to a brain, spinal cord, or nerve condition. Several muscles and nerves must work together for the bladder to hold urine until you are ready to empty it. Due to Tish's inability to control her bladder, she has a catheter, which PAI staff are trained to empty. Staff will report any concerns with the group home via phone, email, and/or communication book.

Self-Administration of medications or Treatment Orders: Tish does not currently have any scheduled medications while at PAI. If Tish needed a PRN, staff would administer the medication to her. She is unable to open medication containers, has multiple prescriptions, and is unable to identify dosages. She will take in applesauce or similar substance with water. Staff receive training on medication administration and quarterly medication administration record reviews are completed to ensure no medication errors have occurred. Concerns, supply requests or issues regarding medication will be communicated by PAI staff to her group home via phone, email, and/or communication book.

Other health and medical needs:

- **Personal Cares:** Tish has a catheter and will need to have the bag emptied at PAI. Tish is aware when she needs to use the restroom for a BM and will let staff know when she needs to go. Although Tish has a catheter, she still wears briefs, which has been noted as a comfort thing for her. If she voids in her brief, she will notify staff. She can be assisted in transferring using the Arjo and one staff; however, she tends to like to do a pivot transfer with two staff while using a posey belt, which is sent in daily from her group home. The pivot transfer is consistent with the group home, which tends to be more comfortable for her. Tish is very tall, and it makes her uncomfortable when a shorter staff is assisting her with a pivot transfer. She sits on the toilet and is provided time. Staff will shut the curtain and provide Tish time for privacy, while staying in the restroom. Tish will notify staff when she is done. She is then supported to standing and fully assisted in getting cleaned up and dressed. Staff will report any concerns with the group home via phone, email, and/or communication book.

Risk of Falling and Mobility: Tish has been diagnosed with Cerebral Palsy. Tish can bear weight and assist with transfers with staff support. Tish uses an electric wheelchair as her primary form of mobility which she uses primarily independently, with exception of unfamiliar environments or small spaces. When in her wheelchair, Tish's lap belt is secured, and her foot pedals are down to support proper positioning. She also utilizes shoulder straps during transportation. Tish can be transferred using the Arjo and one staff to assist. When in the Arjo all safety straps will be applied prior to moving. Tish may also transfer using a two person stand pivot with a posey belt, which has been noted to be more comfortable for her. Tish is very tall, and it may make her uncomfortable when a shorter staff is assisting her with a pivot transfer. Tish will assist in repositioning herself in her wheelchair by pushing her legs on the foot pedals to move her bottom back. Tish can also use the tilt feature on her wheelchair as she feels is necessary for repositioning.

Regulating Water Temperature: PAI keeps water at a safe temperature and staff test the water temperature by running their hands under water prior to Tish coming into contact with it. Tish will inform staff when the water temperature is too hot or too cold. Staff will assist her with operating a faucet.

Community Survival Skills: Tish utilizes the PAI transportation provider to safely access the community. Staff provide supervision and physical support of Tish while in the community to practice all pedestrian and traffic safety skills. She is supported in safely engaging with the community activities and people of her choice. Staff observe what is occurring around Tish and intervene on her behalf if a potentially dangerous situation were to arise. Staff will call 911 on Tish's behalf in the event of an emergency.

Water Safety Skills: PAI does not offer swimming or bathing. When near bodies of water, Tish's electric wheelchair will be turned off or her manual wheelchair breaks will be engaged when her chair is not in motion, and staff are in arms reach of her.

Sensory Disabilities: Tish has a visual impairment which requires the use of glasses. Tish is willing to wear them. In the past she has gotten sores on her nose from wearing them, but this issue has been resolved. She may need assistance with cleaning them or drying them off if they get wet from the rain.

Verbal/emotional Aggression: Tish has a history of false reporting. All staff and volunteers are mandated reporters and are trained upon hire and annually thereafter to the MN State Vulnerable Adult Law and company Vulnerable Adult Maltreatment Reporting and Review Policy and Procedures. Staff will report all suspected or known maltreatment per company policy.

Emotional Health Symptoms: Tish has anxiety and may experience it most often while being informed of appointments, community integration, or work schedules. She benefits from having staff inform her of upcoming

events closer to the time that it will be occurring to assist with managing her anxiety. Tish does well when she is included in conversations and knows what the expectations are.

Person Centered Information:

- Important To: It is important to Tish that she socializes with her staff, friends, and family. Music and art are both very important to her.
- Important For: It is important for her to have time to respond and have staff that are patient with her. It is important for her that she have prompts shortly before a task so that she has time to process but not too much time where she could become anxious. It is important for her to have staff that know and honor her communication.
- Good Day: Having coffee and listening to music would both be included in a great day! She also likes to talk with others, socialize, and be included in conversations.
- Bad Day: Having "bad transfers." Being around others who are talking in a mean tone, a lack of communication, or being around those who do not understand her.
- How to have more Good Days: Tish can have more good days by communicating her wants and needs throughout the day.
- Likes: Tish likes music and enjoys going for walks. Tish loves food, sleeping, and singing or "rocking out" on her karaoke. Tish likes finger painting, doing paint pours, and any other painting! Tish enjoys getting out in the community to eat, bowling, and going to dances. Tish loves giving hugs!
- Dislikes: Tish dislikes being bored or having someone too close, specifically someone else too close to her face.

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**:

- Tish prefers to be social and engaged with peers and staff she knows well.
- She prefers to have a variety of opportunities to participate in new and preferred activities.
- For supports, Tish prefers to do as much as she can herself and encouragement to be independent.
- Tish communicates verbally, with facial expressions, and body language. She may need additional time to process information and verbalize her thoughts and ideas. It is important that Tish has prompts shortly before a task so that she has time to process but not too much time where she could become anxious.
- Tish makes choices about her community activities, visiting peers, and daily groups. She is provided options throughout her day to make choices and decisions and her decisions are honored.

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**?

Tish has outcomes that are both important to and important for her. She will be 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?
Tish has opportunities to choose community integration trips. While in the community, Tish is encouraged and supported in interactions and to create 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?
Tish has the opportunity to spend time in the community, volunteer, and visit other preferred places. Tish is encouraged and supported in interactions and to create positive relationships with others she encounters.

What are the opportunities to seek **competitive employment** and work at competitively paying jobs in the community?
Tish 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 Tish and her team decide that they would like to see out competitive employment, her team will hold a meeting and discuss the steps needed to fit Tish's desires.

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?

- Tish's guardian, residential provider, and PAI staff collaborate to share necessary information as it relates to Tish's services and care. Meetings and reports are shared, and the team works together to ensure continuity of service provision. In-person conversations, phone calls, emails and faxes may be used to discuss current information.
- PAI works with her guardian and/or residential provider for supplies needed at PAI, as well as medications and corresponding orders.
- Charlotte Rogowski is Tish's guardian who advocates on her behalf as well as makes legal decisions. Her legal guardian provides information and direction on Tish's services and supports in collaboration with other members of her support team.
- Stephanie Brown, case manager, develops the Coordinated Service and Support Plan, participates in service direction for PAI, and assists Charlotte in advocacy and finding additional opportunities for community involvement. Stephanie also completes Tish's service agreements and communicate with members of the 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

- Phoenix Residence
  Carol Metzger
  Afton@Phoenixresidence.org
  651-245-5386

- Case Manager
  Stephanie Brown
  Stephanie.Brown@co.washington.mn.us
  Phone: 651-275-7285
  Cell: 651-8294357
  Fax: 651-275-7263

- Guardian
  Charlotte Rogowski
  Charrogo1@yahoo.com
  Phone: 651-600-4072

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: Tish 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 Tish and her team decide that they would like to see out competitive employment, her team will hold a meeting and discuss the steps needed to fit Tish's desires.

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

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."

- Monitoring of Tish's medical conditions including anxiety, cerebral palsy, and the related symptoms, and communication with team members as needed.
- Observation of signs related to mental health concerns and communication with team members as needed or as concerns arise.
- Observation of signs of injury or illness and provision of first aid or care to treat the concern.
- Administration of PRN medication as needed.
- Provide first aid and CPR, 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

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: Tish appreciates and will initiate hugs from familiar staff.

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: Tish uses a transfer belt for repositioning. Tish will also use the Arjo for transfers.

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: Tish may require hand over hand assistance to complete and engage in preferred recreation/leisure activities such as playing a game, painting, or using the iPad.

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: Tish will be physically assisted by staff in using her wheelchair to quickly and safely evacuate or move away from 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: Tish's electric wheelchair has shoulder straps, a seat belt, a head rest, and foot pedals. Transfer belt for repositioning.

9. Is positive verbal correction specifically focused on the behavior being addressed?
   ☒ Yes ☐ No If yes, explain how it will be used: Tish may need verbal reminders to give others space as well as verbal reminders for transitional periods.

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: Tish has AFO's (ankle foot orthotics) for stability and comfort that she wears at all times.

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