



In-Service Training Log – Linden

Date:

1/4/2022

NOTE: INFORMATION IN GRAY SHADED AREAS MUST BE TYPED IN

Training Time	Trainer Name	Training ID	Area	Content/Description
.150	Emily Elsen Peter Program S.			Semi-Annual Revisions: Sue G., Terrell M., Alan f.
.25	Emily Elsen Peter Program S.			CSSP-Davis W.
.25	Maddie Kessler Program S.			Agency wide updates going by CDC guide lines

Make up Date	Initial	EE ID	Last Name
	BA		Alport, Betsy
	CAJ		Anderson-Jones, Celeste
	KB		Bauch, Kia
	MB		Bradshaw, Morgan
	SC		Christenson, Suzie
	AL		Cox, Alice
1/24/22	MB		Gagner, Megan
1/24/22	OH		Harris, Ocla
			Her, Bao
			Hetchler, Maria
	NG		Johnson, Natalie
	FK		Kalu, Festus

Make up Date	Initial	EE ID	Last Name
	M.		Larson, Nancy
	SM		Mafi, Sommer
	KM		Mason, Kanya
	DM		Mendes, Danielle
	CR		Rice Colette
	ES		Sandstrom, Erin
	AS		Stacken, Laura
	JT		Trimble, Jenny
	LP		Deanne Lepley
	KP		Perry, Kathy
			Ranweiler, Sara

Make Up Date	Initial	EE ID	Admin Staff
	LH		Hiland, Lindsay
	MK		Kessler, Madeline

Make up Date	Initial	EE ID	Admin Staff
	AS		Shirley, Ashleigh

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Sue Gilbertson:

-Outcome 1: Daily, Sue will identify what emotion she is feeling in 75% of all opportunities over the next year.

-Outcome 2: Weekly, Susan will choose a group activity to participate in another programming room in 80% of all opportunities over the next year.

Terrell Monjeau:

-Outcome 1: Being Continued (Daily, staff will model an ASL sign and Terrell will use flashcards to identify the correct sign in 90% or more of all trials for the next 12 months.)

-Outcome 2: Daily, Terrell will choose a programming space to visit in 80% or more of all trials for the next 12 months.

Alan Flader:

-Outcome 1: Daily, Alan will choose a staff to assist him in visiting another programming room in 80% of all trials until his next review.

-Outcome 2: Daily, Alan will choose a genre of music to listen to during his programming day in 80% of trials until his next review.



**DEPARTMENT OF
HUMAN SERVICES**

Coordinated Services and Supports Plan (CSSP)

ABOUT ME

DAVIS S WOLF

Assessment Date: 11/30/2021

Plan Dates: 01/01/2022 to 12/31/2022

Developed by: June Msechu

Address: 1513 Highland Ct

Stillwater, MN

County: Washington

Home: (651) 472-3491

Work: (651) 472-3412

Other:

General Plan Notes:

Document ID: 1109283

Print Date: 12/30/2021

Page 1 of 14

12/30/2021

Report sent to Davis, his guardian and provider (PA) on Dec 15th. Signatures requested. JM

CASE MANAGER NAME AND PHONE NUMBER: June Msechu 651.430.6511[Ⓢ]

PROGRAM(S): DD waiver - CDCS

Date of Re-assessment- 11.30.21

Re-assessor- Chris Witzmann 651.275.8675[Ⓢ]

DATE THIS DOCUMENT WAS MAILED: 12.3.21

Please note that this assessment was completed over the phone due to Covid 19.

STRENGTHS, ROUTINES, & DREAMS: Davis is a young male. He lives at home with his parents and attends a day program Monday through Friday. At eight months of age, Davis was diagnosed with meningitis which resulted in Davis experiencing severe developmental delays and seizures. Davis continues to receive daily supports and supervision due to cognitive difficulties, physical limitations, and seizure disorder. On a good day, Davis gets dressed willingly, roams the house, watches videos, and goes for a car ride. He prefers to be outside the house verses inside. Davis also prefers to getd their garage to be an additional family room where Davis likes to spend time. Davis' mother reports that a truly good day for Davis is when he gets to go to summer camp. Summer camp is a very important part of Davis' routine, socialization, and quality of life and he could not go due to Covid 19. Davis loves music, likes to be around friends, and loves books. He loves Barney and the Wiggles. He has started to communicate a couple words at a time. He will repeat words from Barney videos. Davis enjoys spending time with his parents, sister, family in general, friends at school and camp. He also does a car ride daily for new scenery and just time in the car and movement.

He is described by others as kind, happy, and positive.

Davis is good at being friendly, playing on his iPad, and being active.

He dreams of going to camp- he loves camp and being active and being with others. It is currently on hold due to Covid 19.

Services Discussed- Davis and family want to continue on the DD Waiver with CDCS.

Davis and family would like to look into respite monthly for their relief and increased independent skills for Davis while away from home.

Davis and family would like funding for camp as this would benefit his overall health- physically, spiritually, and socially.

PERSON INFORMATION

Date of Birth: 07/31/1997 Age: 24 yrs

Emergency Contacts

Name	Relationship	Phone
Lee Valsvik	Other Relative	(612) 963-7121

Notes/Comments**Decision Making Representatives**

Name	Type of Authority	Address	Phone
Mary and David Wolf	Private Guardian	1513 Highland Ct., Stillwater, MN 55082	(651) 472-3491

Notes/Comments**Health Insurance & Payers**

Is the person certified disabled by Social Security or through the State Medical Review Team (SMRT) process? Yes

Type	Describe	Policy Number	Effective Date
Medical Assistance		02273789	08/01/2018
Other	private through mom's employer	BSSB800312760	03/01/2017
Notes/Comments private			

Notes/Comments**Providers**

Health Care Providers	Phone	Comments

Health Care Providers	Phone	Comments
Primary Physician	(651) 439-1234	Dr. Brian Cress/Stillwater Medical Group - 1500 Curve Crest Blvd, Stillwater, MN 55082
Psychiatrist	(651) 220-6894	David Einzig, MD/Children's - 360 Sherman St STE 62-299, St. Paul, MN 55102
Specialty Clinic	(651) 241-5290	Dr. Michael D. Frost, MD/MN Epilepsy Group - 225 Smith Ave N #201, St Paul, MN 55102

Notes/Comments**WHAT'S IMPORTANT TO THE INDIVIDUAL****Short and Long-Term Goals**

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Davis wants to go to camp in the summer (2 weeks per month Sunday through Friday)	12/31/2019		
Davis wants to attend a work program that offers socialization and community outings on a regular basis.	12/31/2019		
Davis wants to be in the community with socialization and being around people.	12/31/2019		
Davis wants to continue spending time with family, attending the day program and going to camp.	01/01/2020		

Short and Long-Term Goals

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Davis's parents would like for him to continue to live in the community, and be as independent as possible with waiver support and financial management through ORION.	12/31/2020	ORION ISO INCORPORATED FMS -- A514465200	Monthly
Davis has wonderful and consistent family support. He dreams of going to camp. He loves camp! He likes being with others around his age and the fun activities that are done.	01/01/2021		
He dreams of going to camp- he loves camp and being active and being with others. It is currently on hold due to Covid 19. Davis and family would like to look into respite monthly for their relief and increased independent skills for Davis while away from home. Davis and family would like funding for camp as this would benefit his overall health- physically, spiritually, and socially. Please note that this assessment was completed over the phone due to Covid 19.	01/01/2022		
Davis plans to continue accessing Day Support Services at PAI throughout the year.	12/31/2022	PHOENIX ALTERNATIVES INC -- M784481600	Annually

Action Steps for Goals:

What will the person do?

Davis will continue to participate in activities that are preferred to him. He will indicate his wants and needs through gestures and facial expressions. He will receive the DD waiver with flexibility through CDCS and continue to live at home with his family.

What will the case manager do?

Davis's case manager will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources as available and appropriate to support his preferences, needs, desires, and identified outcomes.

What will others do?

Davis's parents, informal, and other formal supports will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources as available and appropriate to support his preferences, needs, desires, and identified outcomes.

What will the provider do?

Davis works with Orion FMS for CDCS, who will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources as available and appropriate to support his preferences, needs, desires, and identified outcomes.

SUMMARY OF PROGRAMS AND SERVICES

Program Type	Start Date	End Date	Annual Amount	Total Plan Cost	Avg Monthly
Developmental Disability Waiver	01/01/2022	12/31/2022	\$102,071.00	\$158,299.21	\$13,191.60
Case Manager/Care Coordinator	June Msechu	Case Manager/Care Coordinator Provider ID A647970400		Responsible Party Name Mary and David Wolf	
Program Notes					

Service							
CDCS Background Check - Per Print							
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly	Total Service
01/01/2022	12/31/2022	T2040	5-Flexible Use	5	\$42.00	\$17.50	\$210.00
NPI/UMPI A514465200	Status Pending	Provider Name ORION ISO FINANCIAL SERVICES, INC.		Funding Source DD Waiver	County of Service Washington		
Areas of Need Personal Security							
Support Instructions All CDCS staff will have the necessary background checks							
Service Notes 5 individual background checks at time of renewal							

Service						
Case Management - 15 Minutes						
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly
01/01/2022	12/31/2022	T1016 UC	5-Flexible Use	120	\$23.19	\$231.90
NPI/UMPI	Status	Provider Name	Funding Source	County of Service		
1700969334	Pending	WASHINGTON COUNTY COMMUNITY SERVICE	County/Tribe	Washington		
Areas of Need						
Supportive Services, Self-Direction						
Support Instructions						
DD Social Worker will offer Person Centered Planning meetings, as Davis, his parents and his providers request. Davis will enjoy a healthy balance of what is important to Davis (what Davis wants) and what is important for Davis (what Davis needs to remain healthy and safe).						
Service Notes						
Approximately 30hrs per year; assist with coordination and monitoring of services and support based on Davis's values, needs, strengths, and goals.						

Service							
Consumer Directed Community Supports: (CDCS) (Decremental) - per Month							
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly	Total Service
01/01/2022	12/31/2022	T2028	5-Flexible Use	1	\$114,336.25	\$9,528.02	\$114,336.25
NPI/UMPI	Status	Provider Name		Funding Source		County of Service	
A514465200	Pending	ORION ISO FINANCIAL SERVICES, INC.		DD Waiver		Washington	
Areas of Need							
Home Management, Cognitive and Behavior Supports, Quality of Life, Personal Security, Health Related/Medical, Personal Assistance							
Support Instructions							
CDCS staff help Davis watch his favorite videos (ie: Barney), do crafts and art projects, listen to music and do other activities that he chooses. Davis loves to go out in the community and enjoys socializing and connecting with others in a variety of settings. Mary said one of Davis' goals is to learn to use the toilet more independently.							
Service Notes							
Annual state budget for 2022 fiscal year is \$114,336.25. This final budget includes 20% exception for vocational programming							

Service						
Day Support Services - 15 Minutes						
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly Total Service
01/01/2022	12/31/2022	T2021 UC	5-Flexible Use	5544	\$4.59	\$2,120.58 \$25,446.96
NP/UMPI A308360800	Status Pending	Provider Name PHOENIX ALTERNATIVES INC		Funding Source DD Waiver	County of Service Washington	
Areas of Need Supportive Services, Employment/Training/Skill Building						
Support Instructions Davis will receive Day Support Services at PAI As needed, he will work less than a full day, and in such occasions, his transportation will be billed separately. At PAI, Davis will work on developing and maintaining skills that help him achieve greater independence, productivity and community inclusion. Staff will work with Davis in a person centered manner, based on his assessed needs and the specific goals that he has set for himself. PAI will also coordinate review and planning meetings with Davis's Case Manager, and send reports about his progress and changing needs at agreed intervals. PAI will also coordinate review and planning meetings with Davis's Case Manager, and send reports about his progress and changing needs at agreed intervals. All staffs who work directly with Davis must pass a background check, and become familiar of his assessed needs and person centered support plan before working with him. They are also mandated reporters. Consequently, staff will report suspected maltreatment by calling the Minnesota Adult Abuse Reporting Center (MAARC) at (844) 880-1574.						
Service Notes						

Service						
Transportation - Per One Way Trip						
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly Total Service
01/01/2022	12/31/2022	T2003 UC	5-Flexible Use	504	\$30.80	\$1,293.60 \$15,523.20
NPI/UMPI	Status	Provider Name	Funding Source	County of Service		
M784481600	Pending	PHOENIX ALTERNATIVES INC	DD Waiver	Washington		
Areas of Need						
Supportive Services						
Support Instructions						
<p>PAI will provide necessary non-emergency transportation to enable Davis to meet program needs and preferences as stated in the support plan for her to be included in the community (check provider guidelines for transportation guidelines regarding accompanying persons)All staffs who work directly with Davis must pass a background check, and become familiar of his assessed needs and person centered support plan before working with him. They are also mandated reporters. Consequently, staff will report suspected maltreatment by calling the Minnesota Adult Abuse Reporting Center (MAARC) at (844) 880-1574.</p>						
Service Notes						
504 one way trips for the year 2021						

RISKS

How will Health and Safety Issues be Addressed?

Davis is not able to get help during an emergency. He receives 24 hour supervision and someone is always with him to get

assistance should there be an emergency. Davis' parents and school staff ensure his safety.

The following table documents and acknowledges any risks that exist based on identified remaining needs above.

Identified risk and choice regarding services	Negative outcome that may result	Alternative measure that may be implemented
NA	NA	NA

Summary plan/agreement reached to address the identified risks:

Has accepted all services and has a backup plan on file

Emergency & Back Up Plans

Plan for unforeseen events (e.g, weather, storms, power outages)

contact Davis' parents and they will be the emergency and back up support for Davis

Key Contact Name	Relationship	Phone Number
Mary Wolf	mother/guardian	(651) 472-3491
David Wolf	father/guardian	(651) 472-3412

Plan for emergency health events

contact parents/guardians and they will handle emergency health events

Key Contact Name	Relationship	Phone Number
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Key Contact Name	Relationship	Phone Number
Mary Wolf	mother/guardian	(651) 472-3491
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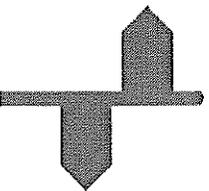
Plan for unavailable staffing that puts the person at risk

contact parents/guardians and they will provide backup staffing, if needed

Key Contact Name	Relationship	Phone Number
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David wolf	father/guardian	(651) 472-3412



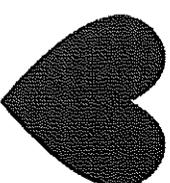
Welcome



Sign In



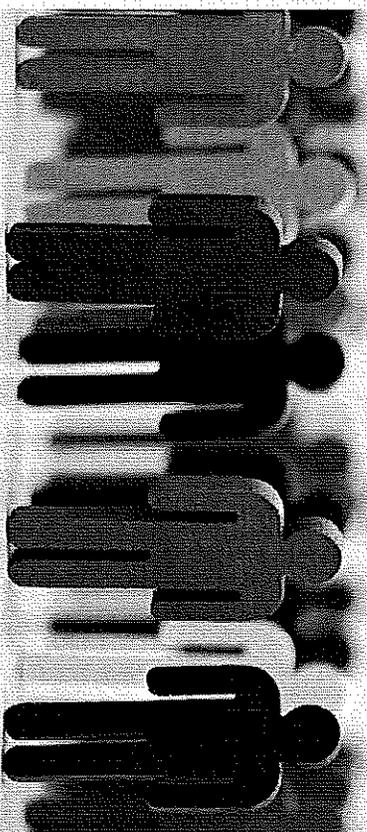
Introductions



A moment of gratitude

PAI- Linden/Oakdale Team Meeting

1/4/2022



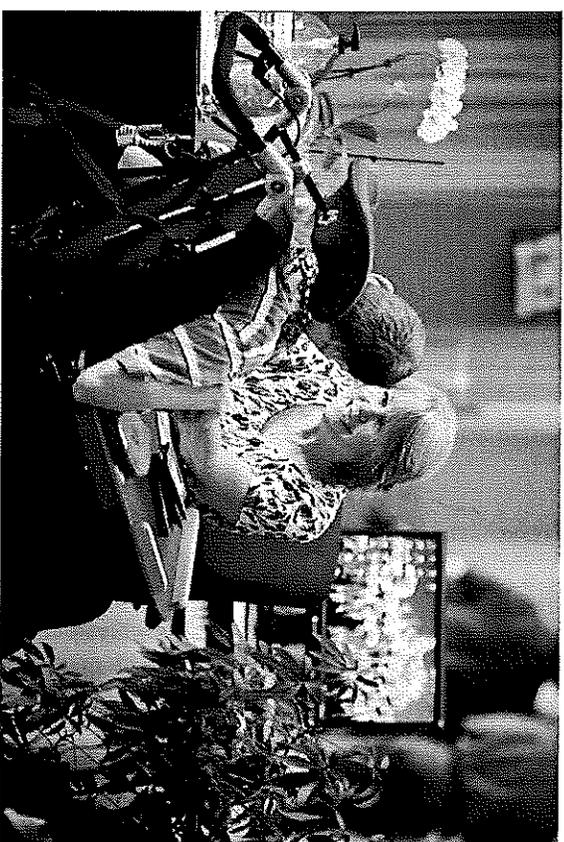
Site-Specific Updates

LMS Training

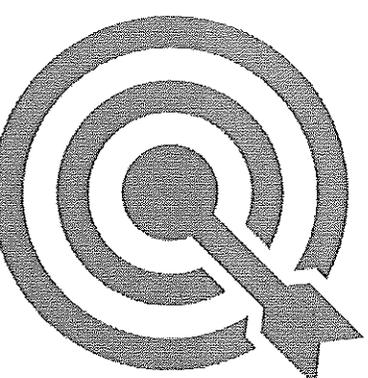
- 4-hour course assigned, due in January.

Winter: Safety, Shoveling, Bussing

- During bussing and throughout the day please be vigilant of slick floors.
- If you notice any liquid pooling, please take a moment to mop up excess snow and water on floors to keep each other safe.



Agenda



Welcome

Site-Specific Updates

Agency Updates

Policy and Procedure Review

Employee Handbook Review

Semi-Annual and CSSP Reviews

Wrap Up





Agency-Wide Updates

December 28, 2021

To: All PAI Employees

From: Mike Milner

Re: Covid-19 Isolation and Quarantine Policy Update

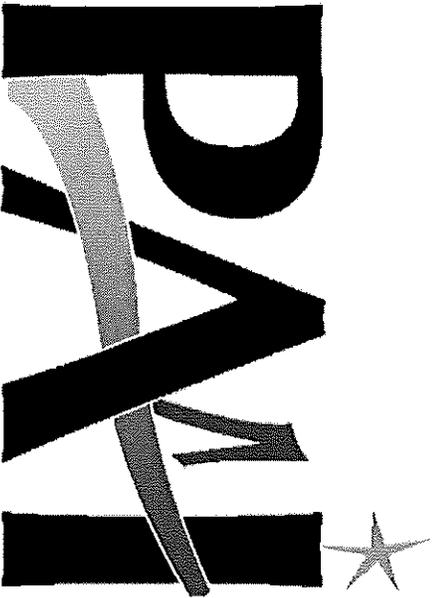
As of December 27th, 2021, our policy is changing to better align with recent updates to CDC guidance. These policy specifics vary from the CDC language based on our work environment and other factors. All references to "days" refer to total calendar days, not work days.

If You Test Positive for COVID-19 (Isolate)	
Everyone, regardless of vaccination status.	<ul style="list-style-type: none"> Stay home for 5 days. If you have no symptoms or your symptoms are rapidly resolving after five days, return to work and wear a KN95 or N95 mask for 5 additional days, unless: <ul style="list-style-type: none"> You have a new cough; Do not return to work until the cough has resolved or for 10 days total, whichever comes first. You have a fever; Stay home until the fever resolves.
Follow the advice of your doctor if any symptoms are severe or persist for more than 10 days.	
If You Were Exposed to Someone with COVID-19 (Quarantine)	
<p>If you:</p> <ul style="list-style-type: none"> Have been boosted OR Completed the primary series of Pfizer or Moderna vaccine within the last 6 months OR Completed the primary series of J&J vaccine within the last 2 months <p>If you:</p> <ul style="list-style-type: none"> Completed the primary series of Pfizer or Moderna vaccine over 6 months ago and are not boosted OR Completed the primary series of J&J over 2 months ago and are not boosted OR Are unvaccinated 	<ul style="list-style-type: none"> You may continue working if you do not have symptoms. Wear a KN95 or N95 mask for 10 days. Test on day 5, if possible. If you develop symptoms, get a test and stay home.
<ul style="list-style-type: none"> Stay home for 5 days. After that wear a KN95 or N95 mask at work for 5 additional days. Test on day 5, if possible. If you develop symptoms get a test and stay home. 	

Site staff should direct questions to their supervisor; all others should direct questions to me or Amanda Neumann.

Thank you, and take care.

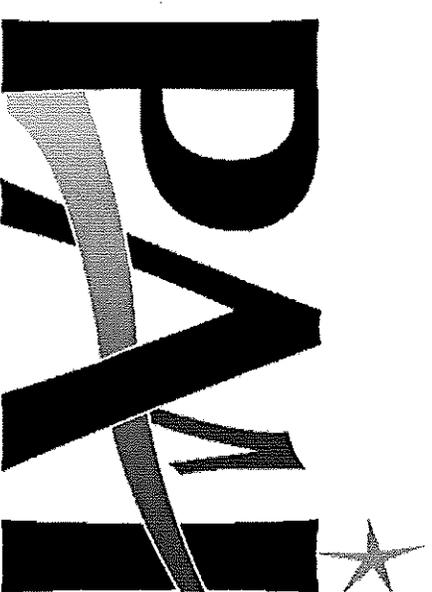
Where People with Disabilities Connect with the Community and the World
3700 Highway 61 N, Suite 200 • White Bear Lake, MN 55110 • 651-407-7174 • paininlog



Agency-Wide Updates

Updated Mask Policy

Effective next Monday, December 27th all site staff and anyone visiting or otherwise working in a site must wear a surgical or KN95 mask. Cloth masks are not allowed, including at Admin.

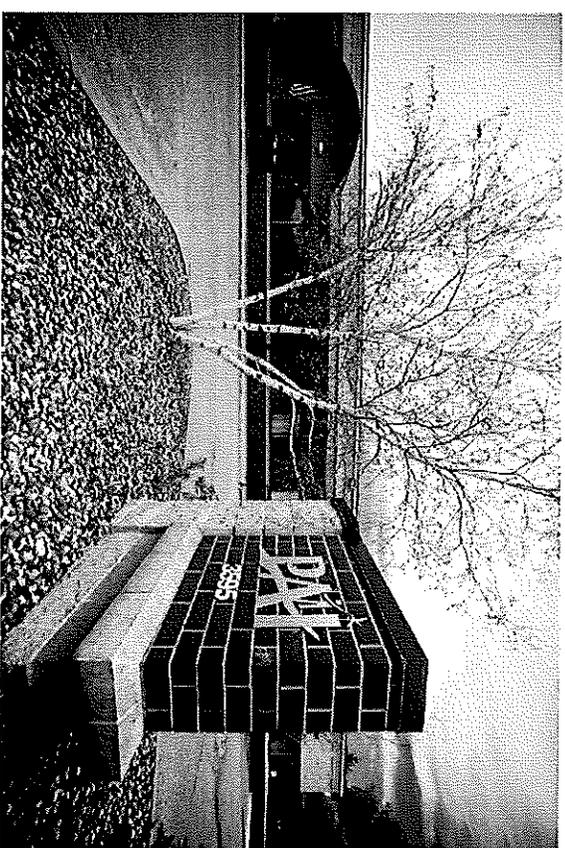


Employee Handbook Review

Safety

Safety is our top priority. PAI wants to keep you and everyone else safe in the workplace. You are expected to play an active part in maintaining a hazard free environment; this includes but is not limited to keeping the building organized and clean.

- Put safety first; follow all applicable emergency and safety procedures and protocols.
- Avoid accidents by identifying and eliminating hazards. If you know of an unsafe condition, immediately report it to your supervisor.

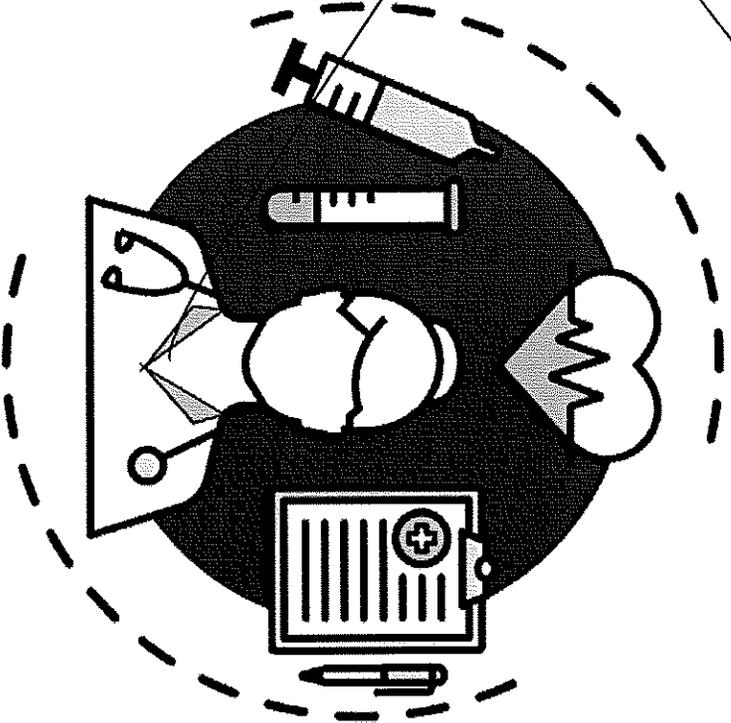




Policy and Procedure Review

Presented by Toni Anderson R.N.

Monday next week



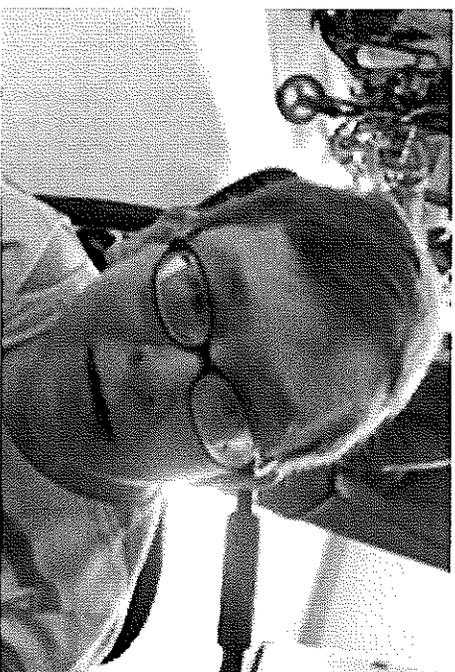


Semi-Annual Reviews

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Outcome 1: *Daily, Sue will identify what emotion she is feeling in 75% of all opportunities over the next year.*

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CSSP Review

Davis Wolf



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Wrap Up

Thoughts and feedback on new All-Staff

Agenda

Objectives

Suggestions for continued improvement

Is there information you would like to provided at next meeting?

Any final thoughts?

