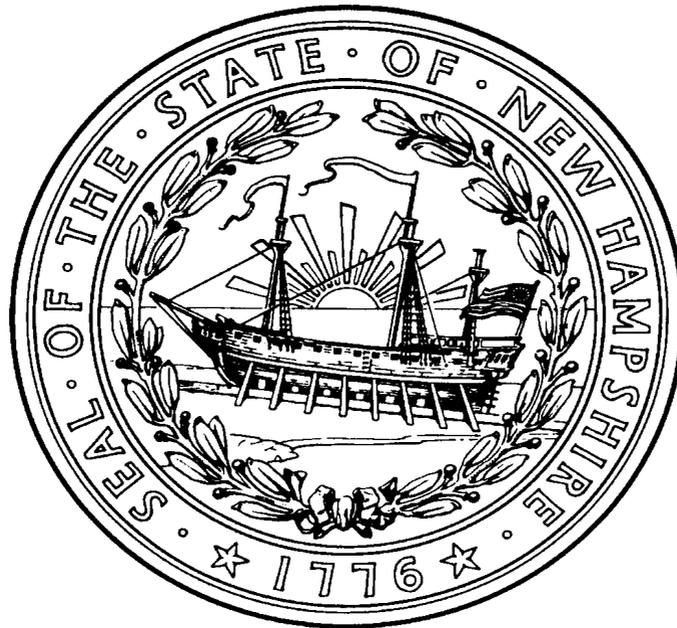


**REGION 10
COMMUNITY SUPPORT SERVICES, INC.**

REDESIGNATION REVIEW



CONDUCTED BY:

THE BUREAU OF DEVELOPMENTAL SERVICES
Matthew Ertas, Bureau Administrator

THE DIVISION OF COMMUNITY BASED CARE SERVICES
Nancy L. Rollins, Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Nicholas A. Toumpas, Commissioner

FEBRUARY 2008



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF DEVELOPMENTAL SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Director

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February 11, 2008

Cathy Spinney, President, Board of Directors
Jane Dichard, Executive Director
Region 10 Community Support Services, Inc.
8 Commerce Drive, Suite 801
Atkinson NH 03811

Dear Cathy & Jane:

As you know, the Bureau of Developmental Services has recently concluded its redesignation review in Region X as required by the State Rule, He-M 505, Establishment and Operation of Area Agencies. The review focused on eight indicators of successful area agency operations: mission; rights, health and safety; choice, control and satisfaction; individual and family/guardian involvement; system of quality improvement; governance and administration; budget development and fiscal health; and compliance. I would like to thank all of the people associated with Region 10 Community Support Services, Inc. for their cooperation in assisting the Bureau in carrying out this important process. The redesignation team is particularly grateful for the assistance given by Chris Roy, Carole Fongemie and Sheila Prunier who made every effort to see that meetings were scheduled and that materials were available for the team's use.

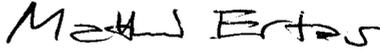
It is my pleasure to inform you that Region 10 Community Support Services, Inc. has been approved for redesignation for the period of October 1, 2007 through September 30, 2012. The Bureau recognizes your agency's efforts on behalf of persons with developmental disabilities and acquired brain disorders and their families and is pleased that you are a part of New Hampshire's service delivery system.

The results of the redesignation review are contained in the attached narrative report. Please share it with the local stakeholders. Where recommendations have been made, please work with the appropriate parties regionally to consider how to improve the areas highlighted. If appropriate, please add areas of recommendation to your Biennial Plan. Finally, if support from the Bureau could be helpful in addressing any of these areas, please let us know how we could be of assistance. [Note that we are also sending you an extensive attachment, which lists all of the specific findings of the redesignation team. We hope that you will find this as a useful source document.]

Cathy Spinney & Jane Dichard
February 11, 2008
Page 2

Again, thank you for your contribution to New Hampshire's community-based service system and to the lives of persons with developmental disabilities and acquired brain disorders and their families.

Sincerely,

A handwritten signature in black ink that reads "Matthew Ertas". The signature is written in a cursive style with a large, stylized "M" and "E".

Matthew Ertas
Bureau Administrator

Enclosures

cc: Nicholas A. Toumpas, Commissioner
Nancy L. Rollins, Director

Bureau of Developmental Services

DATE: Thursday, February 07, 2008

TO: Matthew Ertas, Bureau Administrator
Bureau of Developmental Services

FROM: Lorene Reagan
Redesignation Team Leader for Region 10
Community Support Services, Inc.

RE: Redesignation Review, Region 10, 2007

On July 9, 2007, Region 10 Community Support Services, Inc., requested redesignation as the area agency that provides services to individuals with developmental disabilities and acquired brain disorders in Region 10.

During September, October, November and December of 2007, a team of Bureau staff reviewed the services provided by the area agency. The team was comprised of Darlene Ferguson, Jude Schultz, Elizabeth Collins, Michelle Rosado, Karen Kimball, Jan Skoby and me as team leader. Robert Landry conducted interviews with management staff of the agency's adult services sub-contract agencies and Jane Iarussi compiled and tabulated survey data. Paula Bundy conducted phone interviews with cooperating agencies. The narrative report of our findings was written by Jeanne Cusson.

Attached please find:

- ❖ A list of activities associated with the review process
- ❖ A source document containing bullets substantiating material used in reaching our conclusions
- ❖ A narrative report of our findings

The redesignation team wishes to recognize and thank Chris Roy for her coordination of the team's activities. Chris' flexibility, organizational skills and positive and helpful approach truly facilitated the work of the redesignation team. Carole Fongemie and Sheila Prunier also contributed to the success of the redesignation team's review through their organization of materials, coordination of meetings and friendly demeanor. We also wish to thank the agency's Board of Directors, Family Support Council and the People Power Self-Advocacy Group for sharing their valuable perspectives on the work of the agency.

If approved, the agency's redesignation would extend from October 1, 2007 through September 30, 2012 or, if conditionally approved, any time therein. The review team has agreed to meet with the Board of Directors, agency staff and other individuals or groups that the agency wishes to invite to discuss our findings and answer questions.

Please contact me or any other team member if you require additional information.

Components of the 2007 Redesignation Review in Region 10

The redesignation review process in Region 10 included:

- Review of Region 10's Biennial Plan for fiscal years 2002 & 2003, 2004 & 2005, 2006 & 2007 as well as a July 31, 2007 review and update regarding the current Biennial Plan.
- Review of the area agency mission statement and organizational chart.
- Review of the rosters of the Board of Directors, Board Committees, Family Support Council and the People Power Self-Advocacy Group.
- Review of the Bureau's summary reports of the Adult Consumer Outcomes Surveys (ACOS) for fiscal years 2003, 2004, 2005, 2006 and 2007 and review of aggregate data for Adult Consumer Outcome Surveys collected from fiscal years 2003-2007.
- Review of Employment data collected as part of the Department's Employment Advisory Group during calendar year 2006.
- Review of Bureau of Health Facilities Administration program certification data from 2003-2007.
- Review of Early Supports and Services Family Outcomes data collected in calendar years 2006 and 2007.
- Review of results of a written survey of parents and guardians conducted by the redesignation team in collaboration with the area agency in September 2007 (163 respondents).
- Review of results of written surveys of the following:
 - ❖ Area agency Service Coordinators (6 respondents)
 - ❖ Area agency Family Support Staff (1 respondent)
 - ❖ Direct Service Providers (45 respondents)
 - ❖ Home Providers (10 respondents)
 - ❖ Early Supports and Services direct service providers (3 respondents)
- Review of Community Support Network, Inc. (CSNI), Family Survey data for 2003, 2005 and 2007.
- A review of financial audits of the area agency.
- A review of 10 service agreements at the Region 10 office in September 2007.
- An interview conducted by the review team with the Region 10 Board of Directors on October 11, 2007.
- An interview conducted by the review team with the Region 10 Family Support Council on October 2, 2007.
- An interview conducted by the review team with the Service Coordination and Family Support Staff on October 10, 2007.
- An interview conducted by the review team with the Region 10 Management Team (Planning Team) on October 9, 2007.
- An interview conducted by the redesignation team with Region 10 sub-contract Agency Nurse Trainers on October 9, 2007.
- An interview conducted by the redesignation team with the People Power Self Advocacy Group on October 4, 2007.
- An interview with the Director of Quality Improvement by selected members of the redesignation team.
- An interview with the Complaint Investigator by selected members of the redesignation team.
- An interview with the Human Rights Committee liaison by selected members of the redesignation team.
- An interview with the Training Coordinator by selected members of the redesignation team.

- Interviews with management team staff of 12 adult and 3 Early Supports and Services sub-contract agencies.
- Attendance at two family forums held on October 2, 2007 in Hampstead, NH and attended by a total of 20 family members/guardians.
- Attendance at two consumer forums held on October 4, 2007 in Hampstead, NH and attended by a total of 21 individuals.
- Phone interviews with 9 agencies identified to the redesignation team by Region 10 as Cooperating Agencies in providing supports and services.
- A review of the agency's Fiscal Policy Manual was conducted by a member of the Department's Office of Improvement and Integrity.
- Review of documentation, including:
 - ❖ Area agency policies and procedures
 - ❖ Job descriptions of key personnel
 - ❖ Board of Directors Orientation manual
 - ❖ Board of Directors meeting minutes
 - ❖ Management Team meeting minutes
 - ❖ Human Rights Committee meeting minutes
 - ❖ Training curricula
 - ❖ Data regarding complaint investigations
 - ❖ Data regarding medication administration occurrences
 - ❖ Human Rights information
 - ❖ Area agency Newsletters
 - ❖ Area Agency brochures
 - ❖ Area agency Website

I. MISSION

- I. The area agency demonstrates, through its services and supports, a commitment to a mission that embraces and emphasizes active community membership and inclusion for persons with disabilities.**

Expectations:

The area agency is unequivocal in its mission: supporting people who have a disability in being valued members of their communities, and educating communities to recognize the value of individuals who have a disability. Individuals who receive services in the region and/or their families and guardians have a clear understanding of the mission and its implications. All staff members of the area agency and of its provider agencies are committed to this common mission and understand the purpose of their work.

- I.1 The area agency mission articulates a commitment to community membership and inclusion for people with disabilities.**
- I.2 Individuals, families/guardians, and collaborating agencies are aware of the mission of community membership and inclusion for people with disabilities.**
- I.3 The area agency and its subcontract agencies staff, including all direct service providers, are aware of the mission of community membership and inclusion for people with disabilities, work to support individuals and their families in developing and maintaining relationships with family, friends, and community members.**
- I.4 The area agency focuses on providing inclusive opportunities in all service arrangements.**
- I.5 The area agency supports individuals to participate in paid employment, volunteering and being members of community organizations, as they choose.**

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II. RIGHTS, HEALTH AND SAFETY

II. The area agency, through multiple means, demonstrates its commitment to individual rights, health and safety.

Expectations:

The area agency has systems in place to promote the health and well being of the individuals who receive services. It is proactive in its efforts to protect individuals from abuse, neglect, and exploitation; and, when there are rights violations or questionable injuries, these are thoroughly investigated and the information is used to prevent future occurrences. Individuals, families, guardians and service providers receive on-going training regarding rights, rights' protection, health promotion, and safety.

- II.1 The area agency has policies and processes to ensure that individual rights protection, health care needs, safety and emergency situations are addressed.**
- II.2 Individuals and families/guardians have been made aware of their rights, health care information, and safeguards and understand them.**
- II.3 The area agency supports the individual's right to engage in meaningful activities during day and residential services, as evidenced in service agreements and progress notes.**
- II.4 The area agency assures that trainings for staff, providers, subcontract agencies, individuals, self-advocacy groups and families/guardians include information on rights protection, Basic Health Observation Guidelines, safety measures, healthcare needs, and emergency situations.**
- II.5 The area agency uses an effective complaint process, which includes follow-up on an individual and system-wide basis.**
- II.6 Individuals and families express a feeling of safety and well-being.**
- II.7 The area agency has a Human Rights Committee that provides oversight regarding rights, health care needs, and safeguards.**

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III. CHOICE, CONTROL AND SATISFACTION

III The area agency provides individuals and families with information and supports to design and direct their services in accordance with their needs, preferences, and capacities and to decide who will provide them.

Expectations:

The unique needs, strengths and preferences of individuals and families are acknowledged, respected and supported. Individuals and families/guardians have the knowledge, authority and support they need to direct and manage their supports and services and to decide who will provide them. Supports and services are designed to address the needs of individuals and their families, and to improve the quality of their lives.

III.1 Individuals and families/guardians are given information to help them understand their rights and responsibilities to plan, direct and manage their services and resources.

III.2 Services and goals are customized and reflect individual and family/guardian choices.

III.3 Individuals and families are supported to reach their goals.

III.4 Individuals and families/guardians are satisfied with the type of service options offered to them and the quality of services provided.

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IV. INDIVIDUAL AND FAMILY/GUARDIAN INVOLVEMENT

IV. The area agency involves those who use its services in regional planning, system design and development.

Expectations:

The area agency believes that people who need and/or receive services have the greatest investment in and understanding of how those services should be designed and provided. Individuals and families/guardians are invited, welcomed, and supported as full participants in system planning and decision-making. The opinions of individuals and families/guardians are continuously sought to inform policy making and system improvement. Financial and other assistance is available to enable individuals and families/guardians to play leadership roles and participate in all activities that affect them.

IV.1 Individuals and families/guardians are made aware of area agency activities and committees, including the ones related to regional planning and quality improvement. They are invited, supported and valued as participants.

IV.2 Individuals and families/guardians receive information from the area agency regarding proposed or implemented changes in regional and/or statewide services.

IV.3 Family Support Council members are invited and supported to participate in the agency's planning regarding overall availability, accessibility and quality of services, budget development, and waiting lists. Their participation is valued by the area agency.

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V. SYSTEM OF QUALITY IMPROVEMENT

- V. The area agency continuously assesses and improves the quality of its services and ensures that the recipients of services are satisfied with the assistance that they receive.

Expectations:

There is a resolute and continuous commitment to excellence and quality improvement. The area agency is committed to assessing the quality of services on an ongoing basis and is accountable to individuals and families who receive services. Individuals, families, as well as others are active partners in evaluating system quality and provider performance. There is continuous evaluation and improvement of services and supports to achieve better outcomes for individuals and families.

- V.1 The area agency and its subcontract agencies have policies and processes related to ongoing quality assessment and improvement. Ongoing inquiry regarding individual and family/guardian satisfaction is a common practice of the area agency and its subcontract agencies.
- V.2 The area agency and its subcontract agencies share the results of quality assessments and utilize the information to improve services, operations, and personnel development.
- V.3 The area agency provides effective follow-up if there is no progress in service agreement implementation.

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VI. GOVERNANCE AND ADMINISTRATION

VI. The area agency Board of Directors and the Management Team demonstrate effective governance, administration and oversight of the area agency staff, providers, and if applicable, subcontract agencies.

Expectations:

The area agency Board of Directors and Management Team play crucial leadership roles in administering an effective regional service system. A well informed and active Board and Management Team fulfill their responsibilities by engaging in and promoting effective communication with and among all stakeholders in the agency and region, achieving quality services, individual/family/guardian satisfaction, and employing a well trained, supported and supervised work force. The Board and Management Team engage in activities to enhance the area agency's association with the community at-large on behalf of individuals with disabilities.

- VI.1 The area agency policies, procedures, bylaws, organizational chart and job descriptions reflect current agency practices.**
- VI.2 The area agency Board of Directors and Management Team members receive orientation and ongoing training regarding their roles and responsibilities, as well as new regional and/or statewide initiatives.**
- VI.3 The Board of Directors and Management Team provide oversight and leadership to achieve individual safeguards, quality services and individual and family/guardian satisfaction.**
- VI.4 The management team provides effective communication, supervision and support to staff, providers and subcontract agencies.**
- VI.5 The area agency engages in community outreach and public education efforts regarding its services and mission.**
- VI.6 The area agency provides organizational supports for and has a collaborative relationship with the Family Support Council and the local self-advocacy group.**
- VI.7 The area agency and its subcontract agencies support staff orientation and ongoing training; and the area agency requires that subcontract agencies provide orientation and ongoing training consistent with area agency practices.**

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VII. BUDGET DEVELOPMENT AND FISCAL HEALTH

VII. The area agency is fiscally sound, manages resources effectively to support its mission and utilizes generic community resources and proactive supports in assisting people.

Expectations:

The Management Team and Board of Directors provide leadership in achieving financial health in the pursuit of the area agency mission. The agency's resource allocation, budget oversight, and billing procedures reflect sound fiscal management. The development and management of the agency and individual budgets are achieved through the involvement of appropriate stakeholders. The agency reviews its fiscal status on an ongoing basis, maintains good financial health and considers cost effectiveness in resource allocation. In responding to requests from individuals and families/guardians for assistance, the area agency draws on generic community supports and services as key resources to enhance its own funding, including its efforts to address the needs of those who are on waiting lists.

- VII.1 The area agency has policies and procedures to ensure sound fiscal management and financial health.**
- VII.2 The area agency Management Team members are involved in regional budget development.**
- VII.3 The area agency and its subcontract agencies seek input from appropriate staff and providers in developing and managing budgets.**
- VII.4 The area agency manages its resources to address waiting list needs.**
- VII.5 The area agency seeks and utilizes other/generic sources of revenue to enhance its financial resources.**
- VII.6 The area agency is financially sound and manages its fiscal resources effectively and efficiently.**
- VII.7 The area agency demonstrates a commitment to proactive supports and services to reduce the need for or intensity of long-term services.**

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VIII. COMPLIANCE

VIII. The area agency complies, along with its subcontractors, if applicable, with state and federal requirements.

Expectations:

The area agency and its subcontract agencies are knowledgeable of and in compliance with the basic state and federal standards regarding services. The area agency and its subcontract agencies fulfill requirements regarding certification of day and residential services, medication administration, determination of eligibility for area agency services, establishment of service agreements for each person being served, authorization for Medicaid's Community Care Waiver funding stream, provision of Family Support and Early Supports and Services, and management of waiting lists. The area agency and its subcontract agencies also submit to the Division requested information and data regarding services provided under the contracts with the State.

VIII.1 The area agency and its subcontract agencies comply with all applicable federal and state laws and regulations.

VIII.2 The area agency and its subcontract agencies comply with the Division of Developmental Services' requests for information and data that are accurate, timely and in correct format.

MISSION

Expectations:

The area agency is unequivocal in its mission: supporting people who have a disability in being valued members of their communities, and educating communities to recognize the value of individuals who have a disability. Individuals who receive services in the region and/or their families and guardians have a clear understanding of the mission and its implications. All staff members of the area agency and of its provider agencies are committed to this common mission and understand the purpose of their work.

“To support people who have developmental disabilities or acquired brain disorders in partnership with families and caregivers, to enhance their independence and personal growth while fostering meaningful relationships and involvement within their communities.”

Mission Statement for Region 10 Community Support Services, Inc.

The area agency embraces a mission that provides a clear focus for all of its supports and services. The mission underscores the partnerships essential to success, and it emphasizes the importance of relationships and community involvement for individuals who have a developmental disability or acquired brain disorder. By incorporating key components of the mission into its Strategic Plan, the agency has developed an excellent strategy for tracking performance.

The agency’s efforts to publicize the mission are evidenced by its inclusion in the Region 10 monthly newsletter, *Connections*, its prominent display in the area agency offices, on the area agency Website and the emphasis the mission statement is given in agency brochures that provide a description of the services offered. These publications provide a venue for information on community events, resources, agency and family support activities throughout the region. The area agency also has a schedule of coordinated and consistent community partnerships, from annual fundraisers that have forged collaborative relationships over the years, to a new initiative with SARC: a “Serve New England” chapter that is fostering community building with other volunteers and organizations in the region.

The Family Support Council’s mission mirrors that of the area agency: *“The Family Support Council is dedicated to supporting people with developmental disabilities and acquired brain disorders and their families in partnership with Region 10 Community Support Services, Inc. As an advisory Council, we strive to increase community awareness, expand recreational opportunities, and provide support, training and other resources to families in our community.”*

Both the Council and family support staff described the work they are doing to assist families and individuals to participate in community life. This includes a Parent Support Group, a youth group, trainings and financial support to access community events. The Council also participates in the community fundraisers sponsored in partnership with the area agency. The Board of Directors reports that, at the request of families who were dissatisfied with summer camp opportunities, the agency developed and sponsored ‘Camp Ucandoit’.

The nine community agencies contacted during the redesignation review reported that they understood and shared the area agency’s mission. This was echoed by the subcontract agencies in the region. Staff and other service providers confirmed the commitment to the area agency

mission. An average of 93% of direct service staff, home providers, service coordinators and early supports and services providers who were surveyed during the redesignation review felt supported in their efforts to assist individuals to find and maintain relationships in their communities.

Data from Adult Outcome surveys 2003-2007 indicate that an average of 29% of participants in the surveys were volunteering at the time of their interview and an average of 40% had paid employment. Fifteen percent (15%) of those who did not volunteer indicated they would like to try this, and one third of individuals who were not employed reported that they would like to have a job. A review of the employment data provided the Bureau by the area agency from 2003-2006 provided further indication that more could be done to expand employment opportunities for people. The number of individuals employed has averaged 57 during this period, ranging from 53 to 58 at various times, and the average hourly pay has decreased slightly from \$6.98 in 2003 to \$6.80 in 2007. However, the average pay in the region is still higher than the statewide average of \$6.20 in 2007. The average number of hours worked, 13.8, although higher than the statewide average, has not changed over the same period.

Recommendation:

- While acknowledging that the area agency has already identified employment as a priority for those who have this as a goal in their service agreements, a broader focus on employment in the region is needed. Identifying skilled employment specialists, and providing them with the training and resources they need, is one key to success in this area. There is also a need for furthering partnerships with families and business leaders for the purpose of significantly increasing employment opportunities for individuals in the region.

The area agency mission of supporting individuals to develop and maintain meaningful relationships with others in their communities is clear, and it is supported by all who work in developmental services and all who collaborate with the agency in the region. Making this ideal a reality is the challenge. There is an obvious commitment in Region 10 to meeting this challenge. The focus on improved employment outcomes and the expansion of individual volunteer opportunities will provide a means to forging stronger community connections for individuals who receive services in the region.

RIGHTS, HEALTH AND SAFETY

Expectations:

The area agency has systems in place to promote the health and well being of the individuals who receive services. It is proactive in its efforts to protect individuals from abuse, neglect, and exploitation; and, when there are rights violations or questionable injuries, these are thoroughly investigated and the information is used to prevent future occurrences. Individuals, families, guardians and service providers receive on-going training regarding rights, rights' protection, health promotion, and safety.

An overwhelming majority of direct service staff and home providers (95%) feel that the individuals who receive services in Region 10 are safe and that their health care needs are being addressed appropriately. These were the results of the redesignation surveys sent to direct service providers. It is a testament to the agency's strong emphasis on health and safety, as demonstrated by policies, procedures and staff training, all of which reinforce this commitment.

Among the area agency's policies and procedures is a comprehensive protocol that outlines the steps to be taken in emergencies. The fact that the plan for communicating in emergencies includes a process for supporting families, underscores the central role of families in the region's support network. To safeguard the health of individuals, there is a region-wide smoking policy that requires staff to refrain from smoking in the presence of individuals who receive services. The agency is also in the process of developing a Disaster Recovery Plan.

Several area agency committees focus almost entirely on health and safety. The Human Rights Committee is chaired by a member of the Board of Directors and includes members of the Board, the Family Support Council, area agency staff and members of the community. This committee meets semi-annually and is charged with assuring that the necessary policies and procedures are in place for the protection of individuals' rights. It also reviews summary reports on complaint investigations to identify trends and propose changes in procedures. A subcommittee of the Human Rights Committee, the Behavior Review Committee, is chaired by the area agency Executive Director. It meets monthly to review behavior plans and protocols and to review any environmental modifications or restrictive measures taken to address individual behavioral challenges. This review includes plans developed by all subcontract agencies. There is also an area agency Safety Committee that focuses on environments and practices related to the health and safety of employees and visitors. All of the above-mentioned committees recommend policies and procedures related to safety.

Service coordinators reported that individuals' health is always assessed when they present with challenging behaviors in order to first rule out any medical issues. They also request reviews by the Behavior Review Committee when they determine the need for environmental adaptations such as alarm systems.

The area agency Management Team underscored staff training and protocols that have been put into place to safeguard individual rights and safety. The video entitled "Fire Safety" has been incorporated into all staff orientation training. There has been a concerted effort to identify all individuals identified as having frail health, and crisis funding is accessed to assist individuals who have terminal conditions to remain at home. Since all incident reports are sent to the Quality

Improvement Coordinator who reviews them with the Quality Improvement Committee, this direct communication and first hand information are likely to serve individuals well.

Subcontract agency managers confirmed that the area agency makes its expectation about individual rights clear and they felt supported by the area agency during crisis situations. The Early Supports and Services (ESS) subcontract agencies described their own internal rights protection procedures. They utilize the Bureau's ESS protocol and training on rights protection. They indicated that the area agency is responsive to requests for assistance in times of crisis.

Although the area agency has achieved one of its Biennial Plan goals and put into effect procedures for identifying and sharing information about individuals who experience frail health conditions, both service coordinators and nurse trainers who work for subcontract agencies reported that the turnover in middle management and direct service staff is a concern. There are times when new staff accompanying individuals to medical appointments do not have accurate information to communicate to medical professionals. Additional concerns were voiced about health histories being completed by staff that may not be familiar with individuals' needs. During the redesignation family forums, several families underscored staff turnover as a problem when new staff did not have all the information they needed to provide effective supports to individuals. This is in contrast to the information provided by home providers and direct service staff, 98% of whom reported that they had received health status and emergency protocol information about individuals prior to their providing services to them. The discrepancy could perhaps be attributed to the staff turnover identified by families, when direct service staff are called upon to provide services to individuals other than those they routinely serve.

Recommendation:

- The agency has systems in place to identify and closely follow individuals who have frail health and chronic medical conditions. Mechanisms are now needed to ensure that health information for all individuals is accurately documented and relayed at the time of individual medical and dental appointments, and that all new direct service staff have information essential to address the unique needs of each person they serve, even when this must occur on short notice.

In order to determine whether or not individuals, families and guardians receive adequate information about rights and safety issues, multiple sources of information were examined during the redesignation process: the CSNI Family Surveys 2003-2007; the Bureau's Adult Outcomes Surveys, over the same five year period; and individual/family forums. An average of 91% of families and guardians were aware of the agency's complaint process. While the majority of the individuals who attended the redesignation forums and those who participated in the Bureau's Adult Outcomes Surveys (90%) reported that they did not know how to file a complaint, all indicated that they would know whom to go to for assistance with this. An equal percentage said that they received adequate information about rights and rights protection.

Individual's rights to engage in meaningful activities during day and residential services were assessed by the redesignation team via a review of 27 service agreements, including goals and related progress notes. Ten of these were examined during the redesignation review and 17 were examined during the Adult Outcomes Surveys through the retrospective analysis done in FY 06.

The FY 06 review revealed that goals were in line with individual interests identified in the personal profile portion of the service agreement. In addition, service plans met the required guidelines and contained detailed health histories and nursing interventions where appropriate.

Most profiles included updates on previous goals; however, there were some examples of service coordination notes that did not match provider progress notes or did not include follow-up to needed services. Some progress notes (4 out of 10 in the redesignation review) were found to be repetitive, changing little from month to month.

Consideration: It is suggested that samples of service agreements and progress notes be reviewed periodically by the Quality Improvement Committee or any other appropriate group to provide feedback to service coordinators and service providers.

Effective training on rights, safety and the complaint process in the region is evidenced by the high number (between 90% and 100%) of direct service staff, home providers, and service coordinators who reported that they were familiar with the area agency complaint process; they knew whom to contact to file a complaint; and they felt the area agency was responsive when any rights' violation was reported. This was echoed by subcontract agencies that provide adult services.

The area agency's Complaint Investigator follows up on recommendations made in investigation reports. These are reviewed with individuals and guardians as well as with service providers.

The majority of families and individuals who attended the redesignation forums reported that the health and safety of individuals were being adequately addressed. An average of 99% of Adult Outcomes Survey participants over the past five years reported feeling safe at home and during day services. Participants in family surveys over the past several years agreed to a lesser extent. Seventy-nine percent reported that there were sufficient information and resources to address overall health and safety, and 73% felt that sufficient information and resources were available to address mental health needs and dental care.

It is evident that the Region 10 area agency has been engaged in new and ongoing initiatives to improve the health and safety of the individuals who receive services in the region by increasing staff and provider awareness. These efforts have had a very positive impact on those who have been working with individuals both at the area agency and at subcontract agencies. The challenge is to expand this knowledge and awareness to staff that sometimes find themselves in situations where they are less certain about individual needs.

CHOICE, CONTROL AND SATISFACTION

Expectations:

The unique needs, strengths and preferences of individuals and families are acknowledged, respected and supported. Individuals and families/guardians have the knowledge, authority and support they need to direct and manage their supports and services and to decide who will provide them. Supports and services are designed to address the needs of individuals and their families, and to improve the quality of their lives.

The degree of individual and family involvement in planning and directing services is measured during redesignation primarily through individual and family surveys and the forums conducted during the review.

Family surveys conducted in 2003, 2005 and 2007 indicated that an average of 81% reported that they were supported by agency staff to plan and direct services for their family member and an average of 88% reported being satisfied with their level of involvement in service planning. However, the majority of families surveyed and participating in the family forums were not aware of the option for consolidated services through which individuals and their guardians are directly involved in managing individual budgets and making determinations about how money is spent. In addition, some families suggested a checklist of what individuals and families should know and, more specifically, guidance on what to ask for from the area agency. It appeared that families have been satisfied with their level of involvement but they do not know that there are opportunities for greater involvement, particularly with regard to individual and family-directed services.

The information provided by families was confirmed by the agency's own assessment in this area. During redesignation interviews, service coordinators and the Management Team reported that the families of adults and children who had in-home support arrangements (a total of 17) were very involved in directing these services and in determining budget expenditures, but they acknowledged that this level of involvement had not yet expanded to all individuals and families in the region. It was for this reason that the agency identified the expansion of consolidated services as one of its Strategic Plan goals. The area agency, however, does support individuals and families to select the subcontract agency they want to provide their services.

Consideration: The area agency is encouraged to implement its plan to develop trainings on consolidated services for service coordinators and to expand these trainings to individuals and families in the region. All who receive services should be aware that this is an option open to them.

Families who had children birth to three who received early supports and services reported in surveys that they felt well supported as equal partners in the planning and delivery of services for their children. One hundred percent of ESS direct service providers reported that the area agency always or usually assisted families in exercising choice and control over the planning and delivery of these services. Subcontract agency management staff echoed this and added that families identify the goals for their child; their choice of staff is honored to the extent possible; and, if families request a change of staff, that occurs immediately.

Seventy-seven percent (77%) of individuals participating in the Adult Outcome Surveys conducted over a five-year period reported that they were always or usually involved in

identifying their planning goals. When individuals were not able, or did not want to choose their goals, others selected the goals for them based on their interests. A very high percentage (98%) reported that they were always or usually involved in choosing their daily schedules. Ninety-seven percent (97%) also reported that they did the things they enjoyed doing during the day. The same Adult Outcome Survey results, however, gave strong indication that individuals who receive services have not been participating in the hiring or selection of the staff that support them. Overall only 30% of the individuals surveyed reported they had been involved in hiring or selecting their personal care staff, employment staff, or the staff who support them to volunteer and participate in community activities.

Recommendation:

- In order to give people control over who supports them, regional trainings need to be provided for all subcontract agencies, specifically on how to involve individuals and families in the selection and hiring of staff and home providers. The practice could help to address, to a degree, the problem of staff turnover previously identified in the Rights' section of this report and should be included among best practices in the region.

Almost all individuals surveyed reported that they received the support they needed to reach their goals. The majority of family members surveyed and those in attendance at family forums also reported that the goals in individual service agreements were being met. Service coordinators interviewed during the redesignation review discussed some of the barriers to assisting individuals in meeting their goals. Among these were the problems associated with subcontract agency staff turnover. Given the information provided by individuals and families, the area agency has been successfully meeting these challenges in most instances.

Questions on family and subcontract agency surveys, in family forums and in staff interviews included queries about the area agency's responsiveness. The majority of families and subcontract agency staff find area agency staff responsive to any requests made, but there were comments about problems with the area agency's phone answering system, indicating that the system can be difficult to negotiate. Several stakeholders suggested that the agency consider simplifying its answering machine menu and provide a mechanism for more direct access to staff.

Individuals and family members were asked in surveys about their overall satisfaction with area agency services. Over 90% of individuals were satisfied with their living arrangements, with what they did during the day, and with the supports they received. They were less satisfied with their employment supports, with approximately 40% of the respondents indicating that they would like to work more hours and would also like to make changes in their employment supports. Over 90% of families also reported overall satisfaction with the services they and their family members received, with early supports and services receiving a particularly high rating. When questions addressed individual service areas, however, families reported less satisfaction with the supports available for making the transition from school to adult life. Families also reported somewhat less satisfaction with the assistance they receive in finding respite providers.

Consideration: Given the lower satisfaction ratings for assistance with finding respite providers and transition supports, it is suggested that the area agency focus improvement efforts in these areas.

The Region 10 area agency provides information about all of its services at the time of intake and through a variety of other means. Its monthly newsletter, *Connections*, the Family Support Brochure and the agency web site all contain information about services open to individuals who have a developmental disability or acquired brain disorder and their families. The agency

involves individuals and families in planning their services and designing these services in accordance with individual interests. Based on its Strategic Plan, and on information provided by the Management Team, the area agency is prepared to develop the mechanisms needed to expand self-directed or consolidated services and to publicize this option, opening it to all who are interested. The Bureau of Developmental Services fully supports this plan.

INDIVIDUAL AND FAMILY/GUARDIAN INVOLVEMENT

Expectations:

The area agency believes that people who need and/or receive services have the greatest investment in and understanding of how those services should be designed and provided. Individuals and families/guardians are invited, welcomed, and supported as full participants in system planning and decision-making. The opinions of individuals and families/guardians are continuously sought to inform policy making and system improvement. Financial and other assistance is available to enable individuals and families/guardians to play leadership roles and participate in all activities that affect them.

Individuals who receive services and family members are invited and supported to participate in area agency committees. They are involved in a number of standing committees, including the Quality Improvement Committee, the Respite and Environmental Modification Committees, and a number of Board committees. Ongoing invitations to participate in agency committees are included in the area agency newsletter, *Connections*, and the agency website.

There is strong consumer representation on the agency's thirteen member Board of Directors. Seven of the thirteen are family members and one person is an adult consumer. One of the family members is also on the Family Support Council and serves as a liaison with the Board. The Board supports individuals and families to participate in attending meetings by offering respite, transportation and reimbursement for expenses related to Board membership.

People Power, the Region 10 self-advocacy group, reported during their meeting with the redesignation team that they are invited to be on agency committees and the on Board of Directors. Several members were aware of the legislative hearings on Senate and House bills that affect people who have a disability, such as the Wait List bill. They were directly involved in the hiring of the People Power advisor who is paid by the area agency and they provide feedback on that person's job performance. When the redesignation team asked the members of People Power if their contributions were valued by the area agency, the team was greeted with a resounding "Yes."

Families who attended forums confirmed that the agency newsletter and its website postings were the primary sources of information for them to keep abreast of regional or statewide changes. The area agency's legislative email also provides families with up-to-date information on legislative hearings. A majority of families who responded to the redesignation surveys reported that they did receive information about proposed changes in regional and statewide services; 20%, however, indicated that they would find it helpful if there were more information about the implications of these changes.

The Family Support Council receives reports from the area agency Executive Director, the Community Services Director and the Family Support Coordinator. They receive information about statewide issues from their delegate to the State Family Support Council who is vice chair of the State Council. During their redesignation interview, the Council members reported that they develop and write their Family Support Plan and they contribute to the development of the agency's Biennial Plan. Their involvement in other areas of agency policy making, planning strategies, quality improvement initiatives and wait list oversight is related to their work on the various agency committees in which they are invited and supported to participate. They are also

directly involved in developing surveys and it was as a result of one of their suggestions that the agency instituted the Respite Committee.

Consideration: The Family Support Council feels that they have been sufficiently involved in agency policy development and planning initiatives but they had several suggestions to improve the collaboration between the Council and the area agency, and areas where the agency could assist the Council in its work:

- Past practices such as annual joint meetings with the Board of Directors, informal gatherings with Board members, and the attendance of the Community Services Director at monthly Council meetings could contribute to better communications and a closer relationship.
- Including a listing of Council members in the agency newsletter could help families connect with the Council.
- The Council would appreciate more assistance from the agency to recruit Council members.

The Region 10 area agency has successfully involved individuals and families in its planning activities and in the ongoing reviews of its services. Those who are engaged in agency committees feel well supported and valued for their contributions. Self-advocates and the Council receive the information they need to provide feedback to the agency about its services. The suggestions for improvement made by the Council will only serve to further develop the positive relationships that have been formed.

SYSTEM OF QUALITY IMPROVEMENT

Expectations:

There is a resolute and continuous commitment to excellence and quality improvement. The area agency is committed to assessing the quality of services on an ongoing basis and is accountable to individuals and families who receive services. Individuals, families, as well as others are active partners in evaluating system quality and provider performance. There is continuous evaluation and improvement of services and supports to achieve better outcomes for individuals and families.

The area agency has an active Quality Improvement Committee that meets bi-monthly to develop and monitor region-wide quality improvement initiatives. Representatives from across the region serve on this committee that includes an individual who receives services, a family member, a Board member, subcontract agency representatives, area agency representatives and the Bureau of Developmental Services Liaison to the region. The regional quality improvement plan is developed each year by this committee, which oversees its implementation. In the process of developing this plan, the committee reviews and analyzes information from a number of sources and provides a framework for improvement. Included in the data reviewed are: certification reports, family surveys, adult outcome survey reports, medication and incident reports, complaint investigation reports, employment data, fire safety and employee training.

The area agency has an additional subcommittee that also meets bi-monthly. This committee, called the Quality Improvement/Safeguards Committee, is comprised of subcontract agencies as well as the area agency quality improvement Director. The subcommittee focuses primarily on health and safety issues, but it also provides a forum for provider agency and area agency staff to share best practices and to discuss ways to meet the challenges and overcome the obstacles to providing better services.

Both the area agency Board of Directors and the Family Support Council reported that they receive information about the agency's quality improvement efforts and that they are involved in discussions about any initiatives around improving the quality of services. Surveys of staff and providers conducted during the redesignation review provided further evidence that staff at all levels of the organization are engaged in some aspect of quality improvement initiatives. The vast majority of survey respondents (80%), including direct service staff, service coordinators, home providers, early supports and services staff and family support staff reported that they had been involved in discussions about improving the quality of services and that these discussions "usually" or "always" resulted in positive changes for individuals.

Although Self-Advocates reported during their redesignation review forum that their service coordinators discussed the quality of their services with them, they could not recall agency staff providing them with any survey results. In contrast to the very positive results in staff and home provider surveys, where respondents reported that suggestions for improving quality were followed-up, the results of the family survey revealed that 22% felt there was no follow-up on suggestions they had made on improving the quality of services.

Consideration: Sharing the results of surveys with Self-Advocates and publicizing quality improvement activities to families in general may encourage greater involvement of individuals and families in the agency's quality improvement efforts.

Region-wide quality improvement activities in 2006 and 2007 have focused on fire safety, day and employment services, and improved care for individuals who experience complex health care needs. The agency hosted a subcontractor forum where best practices for fire safety were shared and participants were invited to provide feedback on a document that would be used throughout the region. Greater attention has been given to defining what specific supports individuals need to participate in their community during the day, and there has been an added emphasis on attainment of individual employment goals. Clear expectations have been established between the area agency and subcontract agencies for the roles that nurse trainers, program coordinators and service coordinators play in overseeing health care for individuals who have complex health needs.

Although the area agency management team meets on a regular basis with individual subcontract agencies, and these agencies participate in the Quality Improvement subcommittee, subcontract agencies reported that there was no requirement by the area agency that they have internal quality improvement processes in place. They also reported that they are not provided with reports on area agency follow-up to suggestions made in the Bureau of Developmental Services Adult Outcome Survey reports. A review of the subcontractor boilerplate confirmed that there was no specific requirement for quality improvement processes. These agencies, however, listed a number of internal measures that they use to assess and improve the quality of their own services, including unannounced visits by managers to service locations; meetings with staff and families to assess how things are going; outcome interviews that mirror the Bureau's process; and surveys of families and employees.

Consideration: It is evident that the area agency involves subcontract agencies in its region-wide quality improvement activities. In addition to this, it is suggested that the agency provide clear expectations on quality improvement for its subcontract agencies.

On an individual level, the Bureau's Adult Outcome Survey interviews have provided concrete evidence that service coordinators and program coordinators address concerns cited in individual outcome reports. A recent retrospective review demonstrated that individuals who wanted to change living arrangements, change jobs, or have more flexible service hours were given the opportunity and support to make these changes.

The Region 10 area agency has a number of mechanisms in place to assess the quality of its services, and it demonstrates a strong commitment to improving these services. The area agency Board, the Family Support Council, area agency staff, home providers and subcontract agencies are aware and involved at some level in the effort to evaluate and improve services. Their suggestions could serve to enhance these efforts.

GOVERNANCE AND ADMINISTRATION

Expectations:

The area agency Board of Directors and Management Team play crucial leadership roles in administering an effective regional service system. A well informed and active Board and Management Team fulfill their responsibilities by engaging in and promoting effective communication with and among all stakeholders in the agency and region, achieving quality services, individual/family/guardian satisfaction, and employing a well trained, supported and supervised work force. The Board and Management Team engage in activities to enhance the area agency's association with the community at-large on behalf of individuals with disabilities.

The area agency's Board of Directors is comprised of community members who reside in six different towns in the region and bring to the Board a wide range of personal and professional experience. Over 50% of the members are either individuals who receive services or family members, adding a depth of understanding and a perspective that are unique and highly valued. During the past several years the Board has been actively engaged in reviewing area agency policies, procedures, and objectives.

In 2006, the Board revised its bylaws, which included a review of standing committees and the roles of committee members, and in 2007 it reviewed and updated Board member responsibilities and expectations, and revised its Code of Ethics/Conduct. These are all reflective of current practice. The Board also initiates new policy as evidenced by the recent development of an area agency Respite Policy.

The agency's organizational chart was updated in 2007 and is congruent with current structure and roles within the organization. Prominent in the organizational chart are the roles of consumers and families, including the Family Support Council and the Self-Advocacy group. Job descriptions for all management staff include specific leadership, monitoring and reporting responsibilities.

The orientation training for all new Board members incorporates several levels of information sharing. Each new Board member meets with the area agency management team and receives an overview of the functions and responsibilities of every department in the agency. New Board members are also paired with a veteran member who provides ongoing mentoring and support, and they receive a variety of printed materials, including the agency's Strategic Plan and the current redesignation report.

The area agency ensures that the Board is fully apprised of agency activities. The Executive Director provides a comprehensive packet of information prior to each Board meeting and Board subcommittees report regularly to the full Board. A review of the Board minutes confirmed the Board's involvement in discussions about issues of concern to the agency, such as fire safety regulations, and the agency's efforts to address these challenges. Both the Board and the Family Support Council have long-standing members whose knowledge and experience are valued.

The Board, Self-Advocates and subcontract agencies all reported that communications between their groups and the area agency are excellent. The majority of the Family Support Council also reported having a positive relationship with the area agency Management Team. The Family Support Coordinator is a member of the agency's Management Team, providing direct access for

the Council. Subcontract agencies meet with Management Team members regularly and they are standing members of the region wide Quality Improvement Committee. Home providers, direct service staff and subcontract agencies all underscored their relationships with the agency by rating the support they receive as good to excellent. Direct service staff, home providers and service coordinators noted that their supervisors are accessible and helpful.

The agency's Management Team is also a highly stable and reliable force in the region. Its members are engaged in community associations such as SARC and Chambers of Commerce. Individual members are active in statewide efforts to improve training and quality improvement processes. The Management Team's goal under community outreach included member participation in local town events such as Old Home Days and fund raising activities for civic organizations. Cooperating agencies throughout the region are aware of the services the Region 10 area agency offers. The agency's newsletter, 'Connections', and its website provide information to individuals and families who receive services as well as to the community at large.

In an effort to maximize resources and to offer many more trainings than would otherwise be possible, Region 10 collaborates with Region 8 in its ongoing staff orientation and training. These trainings are open to all staff, home providers and subcontract agencies. The trainings are well regarded by staff and providers in the region.

The agency has a long-standing presence in the greater Salem community and it has established good working relationships with many other community organizations. It is seen as stable and dependable, important qualities in any human services organization.

BUDGET DEVELOPMENT AND FISCAL HEALTH

Expectations:

The Management Team and Board of Directors provide leadership in achieving financial health in the pursuit of the area agency mission. The agency's resource allocation, budget oversight, and billing procedures reflect sound fiscal management. The development and management of the agency and individual budgets are achieved through the involvement of appropriate stakeholders. The agency reviews its fiscal status on an ongoing basis, maintains good financial health and considers cost effectiveness in resource allocation. In responding to requests from individuals and families/guardians for assistance, the area agency draws on generic community supports and services as key resources to enhance its own funding, including its efforts to address the needs of those who are on waiting lists.

There is ample evidence that the agency Management Team and its Board of Directors are actively engaged in review and discussion of the area agency's finances.

In 2005, the Board of Directors reviewed and revised its bylaws. The Board receives quarterly financial reports from the agency's Finance Director and the Board's Finance Committee meets quarterly to review the agency's financial status and to make recommendations to the Finance Director and the full Board. In accordance with its bylaws, the Board of Directors reviews and approves the agency's annual operating budget. Its standing agenda items include development and fundraising, finance, strategic planning and Wait Lists.

Consideration: Monthly financial reporting by the agency's Finance Director to the Board's Finance Committee would create a process through which financial issues and challenges could be more immediately identified and addressed by the Board.

During the redesignation interview with the area agency Management Team, members of the team discussed their direct involvement with budget development and monitoring. Job descriptions of all senior managers, including the Family Support Coordinator, incorporate responsibilities for developing and monitoring the regional budget. The Bureau's Liaison to the region is also involved in fiscal reviews, meeting periodically with the Management Team to discuss high cost services, Wait List concerns and crisis situations.

Subcontract agency managers report having excellent communications with the agency regarding budgets and other fiscal matters. The majority of the agencies said they had a very positive relationship with all area agency senior managers, and with the fiscal director in particular. Annual budgets, annual audits, and quarterly financial reports are all required and reviewed by the area agency. Internally, the subcontract agencies report various approaches to cost containment as well as varying degrees of involvement of their staff in budget monitoring. Assessing individual progress and satisfaction with services and streamlining administrative costs are among the measures employed to improve the cost effectiveness of services.

Quarterly meetings of vendors with the area agency Community Services Director include person-by-person review of high cost budgets and the costs related to individuals' extensive medical and behavioral needs. The Community Services Director also discusses high cost budgets with individual service coordinators, other members of the Management Team, and the Bureau Liaison in an effort to find opportunities for cost savings as well as to find ways to improve the quality of services.

The area agency incorporates training on individual budget development in its orientation for service coordinators. When funding has been identified for an individual, the service coordinator discusses service and subcontract agency options with the individual and family and then works with them to develop an individual budget. Although families involved in the in-home support waiver have detailed knowledge of their budgets and receive monthly updates from the area agency, other individual budgets are not reviewed after initial development unless changes are required. At the redesignation family forums, families who attended reported that they had not been provided with information about family-directed services or consolidated service arrangements. Results of family surveys confirmed that only 36% of the families who responded to the surveys were aware that they could become involved in directing services and in deciding how monies are spent in individual budgets. This information underscores the need to provide all individuals and families in the region with information about consolidated services, as noted in the Choice, Control & Satisfaction section of this report.

In the 2002 Redesignation Report, the agency was “strongly encouraged to review and update policies regarding fiscal management and accounting practices”. Based on record reviews and information provided by the Finance Director, this has not yet been accomplished. The Board bylaws have been updated and there is a current detailed Information Technology Policy but other policies have not been revised. The Board minutes of May 2007 reference an ad hoc committee that has been convened to review agency policies, including all policies and procedures related to fiscal management.

Recommendation:

- Having up-to-date fiscal policies and procedures is essential. While working to revamp its policies and procedures, the area agency should consider formally incorporating the following into the Business Operations Section of the manual:
 - Requirements for approval of non-recurring and unusual journal entries;
 - Requirements for receiving proposals on services, property or major purchases;
 - A formal procedure for accountability in the use of credit cards;
 - Billing procedures, including fee collections;
 - Requirements for two signatures on checks in excess of a set amount;
 - A policy differentiating capital expenditures and repairs;
 - Requirements for writing off outstanding stale dated checks;
 - Requirements for cash receipts, cash disbursements, petty cash and payroll;
 - The area agency’s budget process.

The area agency has a Wait List Committee that meets quarterly. The Bureau Liaison to the region has recently become a member of this committee, which is charged with tracking the status of individuals on the Wait List and identifying resources to assist them while waiting.

In an effort to enhance its resources, the area agency has a Board Development Committee, a Fundraising Grant Committee and a Fundraising Event Committee. It hosts three community fundraisers annually: a golf tournament, the Folktale Carnival, and a silent auction. The Management Team reports that, in addition to providing resources for individuals and families, these events have increased partnerships with local agencies and residents and promoted awareness of the area agency and of disabilities in general. The area agency web site has added a PayPal function to facilitate donations and sponsorship of events on line.

Proceeds from fundraisers have been among a variety of resources that the agency has earmarked to assist individuals and families in a proactive way. Preventive dental care is not covered by Medicaid. Recognizing this as a service essential to the health and welfare of individuals, the area agency works closely with dental providers to meet individual needs and has an in-house process to review all possible resources to cover these services, including proceeds from fundraisers. The agency is also very supportive of the regional self-advocacy group, People Power. This group provides a role model for others to achieve greater independence and self-assurance. Service coordinators in the region connect individuals and families to community resources such as Vocational Rehabilitation, Mental Health Centers, and supplements such as food stamps, all in an effort to assist people in a proactive way.

Area agencies are able to provide supports and services to individuals and families only if they manage fiscal resources effectively and efficiently. In this the Region 10 area agency has succeeded. Each year the agency has ended with a surplus, and its cash on hand has increased over the past several years from 11 days in 2003 to a healthy 45 days as of June 30, 2007.

COMPLIANCE

Expectations:

The area agency and its subcontract agencies are knowledgeable of and in compliance with the basic state and federal standards regarding services. The area agency and its subcontract agencies fulfill requirements regarding certification of day and residential services, medication administration, determination of eligibility for area agency services, establishment of service agreements for each person being served, authorization for Medicaid's Community Care Waiver funding stream, provision of Family Support and Early Supports and Services, and management of waiting lists. The area agency and its subcontract agencies also submit to the Division requested information and data regarding services provided under the contracts with the State.

Area agency adherence to state and federal regulations is assessed throughout the redesignation review. The Region 10 area agency has demonstrated compliance with He-M 1201, Medication Standards, with follow-up regarding any corrective action being provided within required timelines.

A review of service agreements, eligibility determinations and Wait List criteria confirmed the agency's compliance with He-M 503, Eligibility Determinations and Service Provision. Requests to obtain prior authorizations for services under the Medicaid Community Care Waiver meet the documentation requirements under He-M 517, the Medicaid Standard. Improved service coordinator contact notes have resulted in full compliance with He-M 521, the adult in-home support standard.

The agency's by-laws, policies and procedures, and Biennial Plans have met the requirements of He-M 505 and the size and composition of the Board of Directors meet or exceed the standard. The Family Support Council meets all of the standards in He-M 519, but it does not currently have a member who represents families with children less than three years of age.

Based on information obtained from the BDS review of day services' documentation and billing in 2006, the agency was in compliance with He-M 507, the Day Services' standard. There were some problems noted with documentation in the service coordinator quarterly visit reports but this has since been remedied.

There have been three BDS reviews of compliance with He-M 524 from 2004 through 2007. Although there had been problems identified initially with budget reports and documented agency visits, there has been notable improvement in these areas during the five-year period.

The agency demonstrates compliance with state and federal regulations. There is, however, an area in need of improvement related to the less routine data sometimes required and essential for Bureau review. There have been times during the past several years when requested information regarding individual budgets, narratives that support increases in services, and mortality and sentinel report information had not been provided in a timely manner. In some instances, repeated requests had to be made to obtain the information. Delays in resolving individual budgets issues have resulted in prolonged vacancies in some staffed residences and in not maximizing the use of available funds.

Consideration: Although there have been improvements noted in recent months, the agency is strongly encouraged to develop a more efficient process to resolve issues when asked to provide information about individual circumstances, whether they be budgetary or service related.

Over the past several years the three Early Supports and Services programs have shown steady improvement in meeting the 45-day eligibility determination timeframe and the 90-day transition meeting timeline, attaining 100% compliance in both areas during the FY 2007 review.

Certification data, compiled by the Bureau of Health Care Facilities, revealed that the area agency was essentially within the statewide average for the number of deficiencies as well as for the number of sites that were deficiency-free during the past five years. Interviews with staff from the Bureau of Developmental Services confirmed the agency's efforts to provide accurate and timely contract information; financial reports; Wait List information; employment data; and family support, respite and ESS data.

The area agency has a positive overall record on complying with regulatory requirements.

SUMMARY

The Region 10 area agency mission is understood and supported by everyone who works within and with the agency. There is evidence of a strong commitment on the part of management and families to assist all who receive services to have meaningful relationships with others in their community. Full community participation is a reality for some individuals and a dream for others. It is a work in progress and the agency's strategic plan goal to increase employment opportunities in the region, thus providing avenues for new relationships as well as valued roles, will serve individuals well.

For the past several years the agency has been engaged in a number of initiatives to improve the health and safety of individuals who receive services. It has successfully implemented protocols for identifying people who have frail medical conditions and for closely following their health care. The agency has systems in place to safeguard individual rights and the effectiveness of staff and provider training in this area is evidenced by the degree of awareness of rights protection both within the agency itself as well as within its subcontract agencies.

There is broad involvement of stakeholders in the agency's quality improvement work. Data and reports are reviewed by committees whose members include individuals, families and subcontract agency staff. These practices serve an important role in evaluating services. It is clear that the agency considers the continuous feedback from surveys as central to its continuous quality improvement efforts. The agency has also taken some steps to incorporate new and innovative ways of providing services. Its stated commitment to continuing on this road is applauded.

The area agency has an active and engaged Board of Directors and Management Team that have effectively and efficiently managed resources, ensuring that the agency is in a sound financial position. Over the years the agency has demonstrated strong support for the Family Support Council and the Self-Advocacy group in the region. Both subcontractors and community agencies that collaborate with the region 10 Area Agency recognize it as a stable, dependable organization.

In recognition of its successes, the Bureau commends the agency and is fully supportive of its strategic planning initiatives.