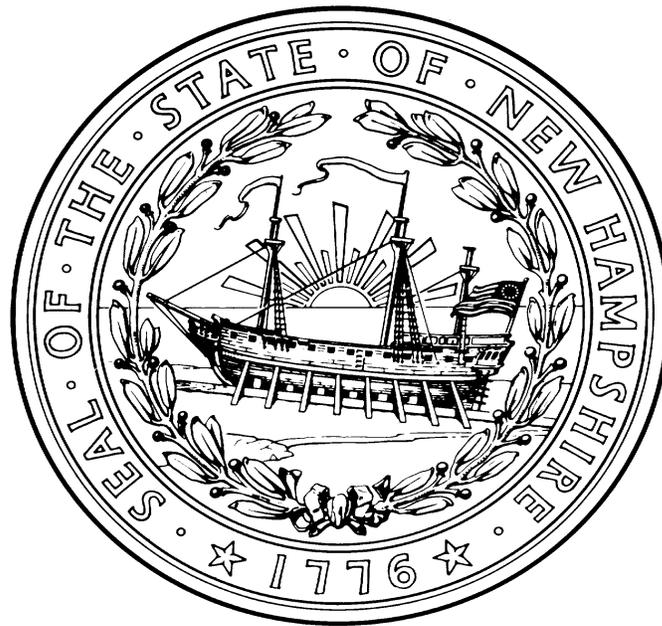


**REGION 8
ONE SKY COMMUNITY SERVICES**

REDESIGNATION REVIEW



CONDUCTED BY:

THE BUREAU OF DEVELOPMENTAL SERVICES
Matthew Ertas, Bureau Administrator

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

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

APRIL 2010



**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
Associate Commissioner

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April 8, 2010

David Brown, Esq., President, Board of Directors
Bob James, Executive Director
One Sky Community Services
755 Banfield Rd
Portsmouth, NH 03801

Dear David and Bob:

As you know, the Bureau of Developmental Services has recently concluded its redesignation review in Region VIII 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 One Sky Community Services for their cooperation in assisting the Bureau in carrying out this important process. The redesignation team is particularly grateful for the assistance given by Cathy King 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 One Sky Community Services has been approved for redesignation for the period of October 1, 2009 through September 30, 2014. 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 Regional 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.]

David Brown, Esq., President, Board of Directors
Bob James, Executive Director
One Sky Community Services
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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, slightly slanted style.

Matthew Ertas
Bureau Administrator

Attachments

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

Bureau of Developmental Services

DATE: Monday, March 29, 2010

TO: Matthew Ertas, Bureau Administrator
Bureau of Developmental Services

FROM: John T. Capuco, Psy.D.
Redesignation Team Leader for Region 8
One Sky Community Services

RE: Redesignation Review, Region 8, 2009

On July 6, 2009, Region 8, One Sky Community Services, requested redesignation as the area agency that provides services to individuals with developmental disabilities and acquired brain disorders in Region 8.

During October and November of 2009, a team of Bureau staff reviewed the services provided by the area agency. The team was comprised of Darlene Ferguson, Kaarla Weston, Joyce Butterworth, Linda Graham, Barbara-Joyce Reed, Jan Skoby, Denise Sleeper and me as team leader. Gordon Dubois conducted interviews with management staff of the agency's sub-contract agencies and Darlene Ferguson compiled and tabulated survey data. Paula Bundy conducted phone interviews with cooperating agencies. The narrative report of our findings was written by Jeanne Cusson with input and final editing from the redesignation team.

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 Cathy King for her coordination of the team's activities. Cathy's flexibility, organizational skills, and positive and helpful approach truly facilitated the work of the redesignation team. We would also like to thank Karen McLaughlin and Lenore Sciuto for their prompt responses to the team's questions and inquires and their help in coordinating the Family Forum and Individuals' Forum. We also wish to thank the agency's Board of Directors, Family Support Council and the region's Self-Advocacy Groups for sharing their valuable perspectives on the work of the agency.

If approved, the agency's redesignation would extend from October 1, 2009 through September 30, 2014 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 2009 Redesignation Review in Region 8

The redesignation review process in Region 8 included:

- Review of Region 8's Strategic Plan for fiscal years 2006 – 2016. Updated September 2009
- Review of Region 8's 2007 Region VIII Planning Retreat "The Crisis in Finding (and Keeping) Direct Support Professionals and Home Providers."
- Review of the area agency mission and vision statements, Bylaws, and organizational chart.
- Review of the rosters of the Board of Directors, Board Committees, Family Support Council, Self-Advocacy Group and area agency committees/workgroups.
- Review of the Bureau's summary reports of the Adult Consumer Outcomes Surveys (ACOS) for fiscal years 2005, 2006, 2007, 2008, and 2009 and review of aggregate data for Adult Consumer Outcome Surveys collected from fiscal years 2005-2009.
- 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 2005-2009.
- Review of 2009 Complaint Investigator Summary
- Review of Early Supports and Services Family Outcomes data collected in calendar years 2005, 2006, 2007, 2008, and 2009.
- Review of results of a written survey of parents and guardians conducted by the redesignation team in collaboration with the area agency in September 2009 (186 respondents).
- Review of New Hampshire Developmental Services Family Survey conducted by the Community Support Network, Inc. (CSNI) for the years 2005 & 2007 and the Area Agency's Family Survey conducted in 2009.
- Review of results of written surveys of the following:
 - ❖ Area Agency Service Coordinators (9 respondents)
 - ❖ Family Support Coordinators (4 respondents)
 - ❖ Direct Service Providers (31 respondents)
 - ❖ Home Providers (12 respondents)
 - ❖ Early Supports and Services direct service providers (4 respondents)
 - ❖ Area Agency and Subcontract Agency Nurses (3 respondents)
- A review of financial audits of the area agency.
- A review of 8 service agreements at the Region 8 office
- Review of a summary sheet of individuals identified as medically frail.
- An interview conducted by the review team with the Region 8 Board of Directors on November 9, 2009.
- An interview conducted by the review team with the Region 8 Family Support Council on October 14, 2009.
- An interview conducted by the review team with the Region 8 Management Team on November 10, 2009.
- An interview conducted by the redesignation team with the Self-Advocacy Groups on October 13, 2009.
- Review of written questionnaire by the Associate Director regarding Quality Improvement and Training.
- Review of written questionnaire by the Complaint Investigator.
- Review of written questionnaire by the Human Rights Committee Chairperson.
- Interviews with management team staff of 13 sub-contract agencies.
- Attendance at a Family Forum on October 14, 2009.
- Attendance at an Individuals Forum on October 13, 2009.

- Phone interviews with 10 agencies identified to the redesignation team by Region 8 as Cooperating Agencies in providing supports and services.
- Review of the agency's Fiscal Policies
- Review of documentation, including:
 - ❖ Area agency policies and procedures
 - ❖ Job descriptions of key personnel
 - ❖ Board of Directors Orientation manual
 - ❖ Board of Directors meeting minutes
 - ❖ BOD QA Committee meeting minutes
 - ❖ Management Team meeting minutes
 - ❖ Human Rights Committee meeting minutes
 - ❖ Waitlist Committee meeting minutes
 - ❖ Subcontractor Agency meeting minutes
 - ❖ Data regarding complaint investigations
 - ❖ Data regarding medication administration occurrences
 - ❖ Human Rights information
 - ❖ Crisis Plan
 - ❖ 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.

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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.

“We assist people with developmental disabilities or acquired brain disorders to live as valued and participating members in their communities.

Recognizing the inherent value of each person, we are committed to:

- *Helping people to choose for themselves where they live, work, and spend time;*
- *Using existing resources, and creating and maintaining supports and services, which are flexible and responsive to the circumstances of each individual;*
- *Assisting families in ways they view as supportive;*
- *Promoting community understanding, acceptance and support of people with disabilities;*
- *Fostering the inclusion of people in community relationships and affairs;*
- *Working together with citizens and professionals to realize this mission.”*

Mission Statement for One Sky Community Services

The mission statement, revised in 2009, is promoted through a variety of area agency communications including the agency’s website, employee handbook and Board orientation handbook. It is also included in all agency brochures, newsletters and vendor contracts. Articles in local newspapers and multiple features on Moor’s *Chronicle* have highlighted the contributions of people with disabilities to their communities. One Sky’s mission is consistent with the overarching mission of the Bureau of Developmental Services on community inclusion.

Responsibilities for implementing the mission begin at the top of the agency with the Executive Director, whose core responsibility, outlined in the director’s job description, is to “ensure that One Sky remains true to its mission.” The strategic plan, upon which the agency evaluates itself yearly, includes several goals related to remaining “mission-centered.” Based on information gathered during redesignation interviews and a survey of the Board of Directors, the Board was highly engaged in developing and finalizing the mission and it plays an active role in expanding understanding of the mission through its community outreach efforts. During their interview with the redesignation team, the area agency’s managers underscored that their trainings and consults were focused on community and relationships. They cited as examples the training provided on Asset Based Community Development and the consultant hired to make the agency truly family friendly. All service agreements incorporate community inclusion both in the planning and in the development of the agreements.

Over 170 families that receive services in the region responded to a redesignation family survey. In response to the question about whether their family member was being supported to form and maintain relationships and become an active member of the community, 75% responded affirmatively. The 81 individuals who participated in the consumer Adult Outcome Surveys from 2005 through 2009 were even more positive about the support they received to develop and maintain relationships with family and friends. Over 90% responded that they were supported to invite friends and family to their homes for visits and meals. When asked if they had the transportation they needed to go to appointments and attend community events, including religious services, 97% responded affirmatively. Over 90% also responded that they had good community health care and felt respected by the health care professionals they had. Fewer respondents (70%) indicated that they belonged to community clubs or organizations. And of those who could vote, 62% said that they did.

A review of area agency documentation in service agreements indicates that community participation and relationships are an important part of the services provided. Service coordinators meet with subcontract agency staff at least quarterly to assess progress in these areas. Results from surveys completed by families and direct service staff also confirmed that the agency supported their efforts to enable individuals to participate in their communities and to establish and maintain relationships. Only a limited number of home providers responded to the redesignation survey (12). A few indicated that they did not feel well supported to help individuals with community participation and developing relationships.

During the redesignation review, other community agencies in the region as well as subcontract agencies of the area agency were surveyed. Community agencies that work in cooperation with One Sky gave it high marks for making its mission of community participation clear to all. Subcontract agencies echoed this sentiment, indicating that they worked well with area agency service coordinators and managers to implement what they see as their common mission. One of the subcontract agency managers cited an example: "A parent had expectations that her adult child needed a very sheltered environment. We had to work with (the parent) and the Service Coordinator Supervisor in breaking down the parent's fears... (In the end) we designed a program that was safe yet challenging and fully integrated in the community."

Family support coordinators and service coordinators were also surveyed during the redesignation review. The family support coordinators responded very positively when asked if the agency supported them in helping families have inclusive community opportunities and access community resources. Service coordinators, however, indicated that they needed and welcome additional support. Thirty-three percent (33%) responded that success in helping people establish relationships in the community was limited.

One measure of an area agency's success in helping individuals experience full community inclusion is the number of people receiving services that are employed and engaged in volunteer work in their community. Both the Adult Outcomes Survey and the statewide employment data reflect the need for a more concentrated regional effort in these areas. There are examples of individuals in the Adult Outcome Survey who reported wanting to work who were unemployed. Additionally, the statewide employment data indicate that the total number employed in the region between 2004 and 2009 rose by only 7. The number of hours people work on the job per week has actually declined from 12 in 2007 to 9 in 2009. These data are understandably impacted by the current labor market; however, in some sections of the work force there are more opportunities for part time employment. During their forums, some individuals who receive services and the Self-Advocacy group clearly stated that they either wanted to work, or wanted more work.

Recommendation:

A greater focus on employment in the region is needed. It is recommended that the area agency engage specialists in this area, providing ongoing training and consultation to improve employment outcomes.

The redesignation review includes an assessment of how effectively the mission is communicated to all stakeholders in the region, how individuals, families, providers, staff and the broader community understand the mission, and how it is implemented. One Sky has demonstrated that it believes in the mission of full community participation for the people it serves and it has communicated this clearly to all. Though the mission has not yet been fully implemented, the area agency's commitment is unquestioned.

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.

The expectation that people who receive services will be safe, will have the support they need to receive good health care, will be free from abuse and neglect, and will have staff and providers who are acutely aware of their responsibilities in this area is paramount in the area agency service system.

Based on the information gathered during the redesignation review, One Sky has policies and practices in place that communicate expectations and that provide for the health and safety of individuals. Area agency policies are current on rights protection, privacy and confidentiality, complaints and provision of services that promote independence and inclusion. Policies incorporate the responsibilities of the area agency and subcontract agency nurses in health and medication oversight and training, as well as the responsibilities of the Quality Coordinator and management team. Documentation from the "Know Your Rights" manual for Early Supports and Services ensures parental consent in each step of the service delivery process and thereby encourages a family's involvement.

The Board of Directors plays an active role in overseeing agency practices on rights, health and safety. The Board's Quality Assurance Committee approves and recommends policies on rights and it reviews client rights investigations, data on individuals who have frail health, and the agency's crisis plans. In order to increase its knowledge of these issues, the Board recruited a new member, a manager from a local hospital who has expertise in this area. In addition to the oversight provided by its Quality Assurance Committee, the entire Board reviews quarterly reports on individuals who have frail health conditions, corrective action plans of subcontractors, satisfaction surveys regarding health care, and crisis plans.

The area agency's management team has demonstrated strong leadership in developing crisis plans that define how all agency staff would be expected to respond in the event of a crisis and has developed a best practice model. The plans, developed in conjunction with local and regional resources, consist of both short-term (two week) and long-term (six-month) responses. Provisions are included for back-up coverage for each person that provides services. These best practices for an emergency response incorporate ongoing departmental monthly reviews and discussions of the plans, with revisions based on lessons learned in emergencies such as the 2006 flooding in Newmarket. In an effort to collaborate with others in the community around crisis planning, the area agency nurse participates in the Portsmouth Area Emergency Planning Team. The area agency is to be commended for the exemplary work that it has done in this area.

The area agency has effectively communicated information about rights, health and safety to families in the region. Results of the Community Support Network, Inc. (CSNI) family surveys completed between 2005 and 2009 demonstrate that the majority of families in the region feel well informed about rights, health and safety and understand their rights in the service system, with a combined total of 88% responding positively. With regard to knowing whom to contact if they felt their family member's rights had been violated or services were inadequate, 85% responded that they did know whom to contact at the area agency. Interestingly, the same percentage indicated that they would, in

fact, contact the agency if they had concerns in these areas. Most of the 13 families who attended the redesignation family and guardian forum indicated that they knew whom to contact if they had concerns about rights violations but several families said they did not. Families responding to Early Supports and Services surveys were unanimous in saying that they both understood their rights in the service system and knew whom to contact at the agency if they had concerns or disagreed with the way services were provided. The area agency recognizes that people who have a developmental disability or acquired brain disorder often have great difficulty understanding their rights and speaking up for themselves and the area agency is encouraged to continue their efforts in this area.

All staff and providers in the region are given orientation sessions about rights protection, safety and emergency protocols by their supervisors prior to working with individuals. The area agency requires that all subcontract agencies provide training to their staff on rights, health and safety within the first week of hire, with more in-depth training required in the first six months of employment. There is an additional 36 hours of training required within the first year of employment. The area agency nurse is directly involved in trainings related to health care and medications, working in conjunction with another area agency to share best practices. A combined total of 90% of direct service staff and home providers responded in surveys that they were given sufficient training prior to supporting specific individuals in the areas of health and safety, and to address any behavioral emergencies. Service coordinators responded less positively in their assessment of area agency trainings. Although the majority (85%) responded in surveys that they had sufficient training regarding rights, and medical and behavioral emergencies, they did not feel adequately trained to do all that was required of them. They indicated that their work loads did not afford them the time to attend the trainings currently offered, and they thought that additional trainings would be helpful, e.g. training in benefits and stress management. Family support staff and coordinators, although very positive about most trainings they received on how to support families, expressed interest in receiving additional trainings on how to assist families regarding rights violations.

In an effort to ensure greater objectivity in complaint investigations, the area agency contracts with an external Complaint Investigator. Area agency staff responded positively to survey questions related to rights protection. Staff surveyed included service coordinators, family support staff, direct service staff and home providers. Fifty four of the 56 respondents felt that the area agency was responsive when rights violations were reported. The area agency nurse is involved in assessing individuals in any allegations of abuse or neglect, and in reviewing mortality and serious injury reports. Both the management team and the Board's Quality Assurance Committee review reports on complaint investigations, accident/incidents and sentinel event reports. All management team and Board reviews are done with a view to ensuring that any required follow-up action is completed and any systemic problems are addressed.

The area agency hired a full time registered nurse during this redesignation period, whose role includes provision and supervision of corrective actions related to medication errors, and increased oversight of individuals identified as needing additional supports. This nurse is also available for consultation with subcontracted agency nurses, providing guidance and additional oversight of services for individuals with increased medical needs.

The area agency's Human Rights Committee is comprised of a family member, a representative from the Bureau, representatives from three of the region's subcontract agency, and five area agency employees, including the Associate Director who chairs the meetings. The committee reviews all behavior plans for individuals who have challenging behaviors, individual complaint investigation reports, and summary reports related to accidents and incidents and medication errors. The committee meets four to five times per year. When recommendations are made by the Human Rights Committee, the chair of the committee provides follow-up to ensure that recommendations are implemented.

Having systems in place to ensure rights protection, health and safety is essential. Assessing whether or not these systems are effective is imperative. Results of all surveys used in the redesignation review clearly indicate that individuals who receive services in the region, their families, as well as staff and providers all feel that people who receive services are safe and that their health care needs are being met. A total of 95% of all surveyed responded positively.

One Sky is demonstrating its commitment to individual rights, health and safety through multiple means. The suggestions made in this report are intended to strengthen the agency's efforts in this area.

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.

In this section of the redesignation review, area agencies are evaluated on the degree to which individuals and families have the information they need to make decisions about their services, the degree to which they have the freedom to exercise control of their services, and they are satisfied with the services they receive.

The majority of families that responded to the redesignation survey and the CSNI family surveys from 2005-2009 reported that they received the information they needed to make decisions about services. Family support staff are committed to assisting families to make informed decisions about their services by providing them with a lengthy list of resources that includes: respite, parent to parent connections, special education law, financial resources, information about other community agencies, and guardianship. In Early Supports and Services (ESS) for children birth to three, the data clearly indicate that significant efforts have been made over the past five years to have 100% compliance with providing families the information they need to ensure a smooth transition for their children into the school system, as well as with information about community resources. The area agency continues to develop methodologies that ensure that families have the information to make informed decisions during transition to adult services. A lower percentage of families reported that they received the information they needed about wait lists for adult services and transitions to these services. While only a small number of families (13) attended the redesignation family forum, the majority who did attend echoed concerns about transitioning their family member from school to adult services. Currently, there is an area agency committee developing family-friendly materials on Consumer Directed Services, something One Sky wishes to make available to anyone who is interested.

Services and goals must be customized and reflect individual and family/guardian choices. Individuals in the region who participated in the Adult Consumer Outcomes surveys over the past five years (n 81) responded to questions about how involved they were in deciding many aspects of their services. Ninety six percent (96%) reported that they decided how to spend their discretionary funds. This seems to be the area where they feel they have the most control. The majority of individuals reported that they chose their own daily schedules as well as the goals listed in their services agreement. Lower percentages were reported regarding choosing staff who assist them in the community, at work and during volunteer activities.

Surveys used during the redesignation review included questions about the extent to which individuals and families are supported to reach their goals. Both individuals (90%) and families (87%) reported that they were being helped to reach their goals. For those families that receive Early Supports and Services, the data indicate a 98% compliance rate for services being delivered as described in the individual plans.

During her redesignation interview, the Director of Service Coordination acknowledged the many challenges that service coordinators face when working to ensure that individuals are supported to have as much control over their service planning as possible. One challenge is the composition of the individuals' own teams and another is the ability of some individuals to communicate what they really

want. The Director of Service Coordination was open and direct in her assessment of individuals' control and involvement in their service design and implementation. She cited staff ratios in day services that limit individual choice. When an individual is supported along with one or two other individuals, they may not be able to seek employment. Staff turnover was also cited as a barrier, as was transportation. When two individuals would like to do the same things during the day but they live at opposite ends of the region, this is a challenge. A few situations were cited as successes in overcoming these obstacles, however, the problem of limited choices for individuals who are in traditional program models remains.

During the self-advocates forum it was evident that this is a group with enthusiastic participants who expressed interest in both recreation activities as well as learning more about legislative activities. They currently do not have elected offices. There is an opportunity for them to be more self-governed. During the forum, self-advocates reported that they were not involved in evaluating the job performance of their advisor, they added, however, that they really liked him.

Family members, staff and providers in the region were very positive about the degree to which individuals and families have choice and control over services. The majority of families who receive Early Supports and Services reported in the last three family surveys that they feel an equal partnership with providers. In the CSNI family surveys conducted over a five-year period, a majority of families that responded to the question about employment reported that career planning and job searches were based on the individual's interests. A majority of families also reported that services met their family member's needs and that coordinators responded to their questions or requests in a timely manner. Area agency and subcontract agency staff were equally positive. A majority of family support and service coordinators, direct service staff, and home providers that responded to surveys reported that individuals selected their goals, their providers and staff, and made decisions about where and with whom they lived.

While acknowledging the difficulties when supporting people in traditional service models to choose their staff in all aspects of their services from among those who work for an agency or obtain individual employment, these are the challenges that must be met if individuals are to have more control over their services. The agency is moving forward with providing individuals and families the highly customized Consumer Directed Services option. This is commendable. Those who remain in traditional services, however, should have as much choice as possible on how they are being supported.

Subcontract agency managers in the region were interviewed during the redesignation review. They provided examples of services that were designed to meet the unique needs and interests of individuals, including, in several instances, providing services to individuals and families that had been homeless. However, during their interviews, some subcontract agencies also expressed concerns that individuals and families in the region do not have full knowledge of the array of subcontract agencies available to them and therefore make decisions based on incomplete information.

Consideration:

The area agency needs to engage its subcontract agencies in a review of the processes it utilizes to provide information to individuals and families about all providers in the region.

In recent years, One Sky has been working on developing expertise in Consumer Directed Services (CDS), where individuals and families determine and manage how their budgeted funds will be spent. The area agency identified three service coordinators to focus primarily on CDS who were trained in budget development. They use laptops to construct budgets with the individual and family present. The agency also hired an account analyst to support the business office in tracking CDS budgets, and

is in the process of developing a Human Resources manual for families who choose to be the employer of record.

Assessing satisfaction with services is an ongoing practice in the region. Results of the Adult Outcomes Surveys from 2005 through 2009 indicate that, individuals are very satisfied with many of the services they receive, including assistive technology. Family responses to the CSNI surveys during the same period also reflected an overall 86% satisfaction rate. However, the responses to the survey identified assistive technology as a possible area of concern. Specifically, 49% were not satisfied with assistive technology their family member received for communication. Forty-five percent (45%) of families who responded reported that they were not satisfied with the assistance they received in obtaining home and vehicle modifications.

Recommendation:

The CSNI Family Survey data related to assistive technology and home and vehicle modification may indicate that not all families are aware of and have access to these services. Given that the previous redesignation review included a recommendation in this area, it is recommended that the area agency look into this issue further to determine what additional efforts are needed in this area

It is evident that the area agency has been working diligently over the past five years to assist individuals and families in having greater control over their services. In many areas there have been significant improvements, particularly in developing stronger partnerships with families, and in the extensive efforts to expand Consumer Directed Services as an option for any individual or family. Addressing the suggestions made in this section should further strengthen the area agency's efforts to provide greater choice and control.

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.

Area agencies have a responsibility to involve individuals and families, not only in designing their own services, but in all aspects of regional planning, system design and development.

The Area Agency is to be commended for their work on collecting and utilizing data to inform their understanding of individuals. They have embraced the data as a source of a deep understanding of the individuals they serve as noted by the many ways they use, collect and add to the information they receive.

In region 8, the area agency holds a biannual retreat where all individuals and families, Board members, Family Support Council members, staff, providers, and subcontract agencies are invited to discuss regional planning. Management presents information about current practices and engages all who attend to participate in setting the direction for agency. The One Sky strategic plan is developed from the information gathered at this retreat.

The strategic plan is reviewed and approved by the Board of Directors whose membership of nine includes four family members. The agency offers respite and transportation to any individual or family member to support them to participate in agency activities. Board committees that have family representation include the Quality Assurance Committee, the Finance Committee and the Public Relations Committee. There is also family representation on area agency committees including the Human Rights Committee and the Events and Awards Committees. At time of the redesignation review, however, no individual with a developmental disability or acquired brain disorder served on the agency's Board of Directors or on area agency committees. In their redesignation forum, self-advocates reported that they were not well informed of legislation that might affect their services or of any changes at the area agency.

Consideration:

The agency has greatly improved family representation on its Board of Directors and committees since the last redesignation review in 2004. Individuals who receive services bring a unique perspective that cannot be provided by anyone else. The area agency would do well to recruit and support an individual to join the Board, as well as other agency committees, whose members were generally positive about such a possibility during the redesignation interview.

One of the primary tools One Sky uses to communicate information about proposed changes in regional or statewide services is the Family Support newsletter. Over 800 newsletters are sent monthly to all who are eligible for family support and early supports and services. The newsletters also go out to Special Education Directors, Legislators, the Family Support Council, the Board of Directors, staff, subcontract agencies, and other community agencies. The newsletter includes information about events and workshops in the region. On the front page of the newsletter, the Executive Director provides updates on legislative action, budgets and statewide issues. Individuals

and families are reminded in each issue to contact the agency for financial assistance and eligibility. During their interview, families reported that they receive most of their information from the Family Support newsletter. The newsletter, however, does not go to individuals who receive services but live on their own. Recently, the area agency has supplemented the Family Support newsletter with a quarterly agency newsletter that is mailed to individuals who receive services, legislators, the Family Support Council, the Board of Directors, subcontract agencies and other community agencies. The quarterly newsletter is sent by email to all staff. Both are available on the website.

During their redesignation interview, the management team reported that they hold forums to provide information to individuals and families and there is a legislative liaison that keeps in contact with families by email. The area agency specifically set about to improve their accessibility to families as they redesigned their website. They focused on a consumer friendly home page that includes tabs entitled “How can we help you”, and “Get involved.”

Based on the results of the CSNI family surveys conducted every two years, families in the region are satisfied with the information they receive about the Family Support Council, about proposed or implemented changes in services both regionally and statewide, and about any changes in service coordination. They also reported that any changes were well explained. There was on average a 77% positive response to questions related to satisfaction with the information received about services. A lower percentage of families (66%) were satisfied with the information they received about legislative hearings on House and Senate bills. Consistent with the information found in other sections of the redesignation review, families indicated they needed more information about wait lists and transitioning to adult services.

During their redesignation interview, the Family Support Council reported that the agency kept them well informed of regional and statewide activities. They receive updated wait list information, and each month a different manager from the agency reports on what is occurring in his or her area. The Family Support Coordinator provides the Council a monthly summary report on family support activities in the region. The Council representative, who is on the agency’s Board of Directors as well as the Board’s Quality Assurance Committee, keeps the Council informed of Board activities and the Board informed of Council activities. During the development of the strategic plan, Board members attend Council meeting to receive their input on the plan. Specific components important to family support are worked on by the Council. The Executive Director informs the Council members directly by email of any legislative action on the state’s budget. Overall the Council reported being well supported by the area agency. Members did add, however, that the agency could do more to assist the Council with recruiting new members. There was a missed opportunity during a recent family survey when a couple of families expressed interest in joining the Council but there was no area agency follow-up.

Consideration:

In addition to supporting the Council in its work, it is suggested that the area agency become more active in helping to recruit members. The agency is encouraged to assist the Council in its recruitment efforts.

Overall, families in region 8 are satisfied with the information they receive about regional and statewide changes in services. There is a good relationship between the Family Support Council, area agency and the Board. While family members are involved in area agency committees, people who receive services are not. The agency can benefit from their increased involvement.

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.

Assessing the quality of human services at any agency has two components. There is the subjective assessment of the person receiving the services that is of primary importance, but there must also be an objective component, measuring the services against a high standard of excellence.

In the redesignation review surveys, when families were asked if the area agency inquired about their satisfaction with the services they received, 80% of families responded “always” or “sometimes”. When asked if the area agency followed-up on their suggestions about their services, 75% responded “yes” or “sometimes.” When the direct service staff, home providers, service coordinators and early supports and services staff were asked if they were involved in discussions about improving the quality of services, on average 75% responded positively. These data reflect consensus between staff and families in the region about how the area agency has involved them in quality improvement.

During the redesignation review, the area agency management team completed a questionnaire about the system for quality improvement that was in place at One Sky. They described the many reviews that occur at the agency at different levels, including reviews of incident reports, complaint investigation follow-up, and the evaluation of individual subcontract agency services semi-annually. There are also quarterly meetings with all subcontract agencies and representatives of the area agency management team, chaired by the area agency Executive Director. The area agency’s Quality group attended by subcontract agencies meets three to four times per year, or more often if necessary. Of particular note, and highlighted here as very proactive measures, are several practices the area agency has in place. A subcontract agency that provides the majority of supports to individuals who present risk to community safety is required to participate in the area agency’s monthly Preventive Services meetings. All subcontract agencies that provide residential services are required to conduct and document monthly visits to all homes using a standard checklist. They are also required to do unannounced visits to all certified homes at least once per year. The frequency of unannounced visits is increased when the area agency feels there is a need for intense monitoring of a home. In addition, area agency service coordinators conduct unannounced visits to homes and day services periodically.

The area agency Quality Coordinator completed the redesignation questionnaire. The Coordinator oversees quality improvement activities in the region and supervises a Quality Improvement (QI) Specialist who collects and compiles data from a number of sources. This information, in summary form, is shared with the area agency management team, the Board of Directors’ Quality Assurance (QA) Committee, and the area agency’s quality group, which includes subcontract agencies, and the Family Support Council president. Two family members and one member of the broader community participate in reviewing quality improvement activities in the region as members of the Board’s QA committee, which reports to the full Board. The information reviewed includes: summaries of quarterly service coordinator reports, where individuals and families are asked about their satisfaction with services; data related to medication administration; incident reports, and certification deficiencies. The Quality Coordinator listed among her responsibilities some notable practices, including: participation in the Preventive Services Review Committee that works to assure quality services to individuals who present a high risk; the supervision of the area agency Nurse Trainer; participation in

annual nurses' meetings with another region to share best practices; and sharing information from the Adult Outcomes Surveys with individuals and guardians and follow-up on concerns. One Sky conducted a CSNI Family Survey in FY09 which is above and beyond that which was required. The Coordinator provides the annual regional report from these and other surveys to the management team and the Board's QA committee. The reports are also summarized and included periodically in the family support newsletter that is distributed to all families, subcontract agencies and other community agencies.

Managers of eleven subcontract agencies interviewed during the redesignation review reported that they each have their own internal quality improvement activities that include satisfaction surveys, reviews of certification deficiencies, medication and health reviews, incident reports, on-site reviews by managers and monitoring of daily activities schedules. All of this information is reviewed by the subcontract agency management staff and changes are implemented where needed. When asked whether the area agency supports subcontract agencies' internal quality improvement efforts, the majority of responses indicate that this is an area that requires improvement. The subcontract agencies provide the area agency with data that include incidents, medications, and certification deficiency follow-up. The area agency then compiles this information and shares it with its subcontract agencies. There is, however, little or no support for each subcontract agency's own initiatives in quality improvement. When asked whether One Sky's monitoring activities lead to area agency sponsored training or other supports to subcontract agencies, ten of the eleven subcontract agency managers responded "no." Though there is reference to quality improvement in the area agency's subcontract agency contracts, more specific language is needed since the majority of subcontract agencies were unclear about this.

Recommendation:

In the words of several subcontract agencies, the area agency and subcontract agency quality improvement efforts should be coordinated and a more collaborative approach adopted. This coordination needs to include identification of trainings based on survey results. Redundancies in surveys could lead to frustrations and reduced participation by individuals and families over time.

The area agency nurse and subcontract agency nurses are involved in sentinel event reports in the region. The area agency always solicits their input. They are also consulted regarding improving the quality of any health-related services to individuals, and they are involved in follow-up on medication errors, both immediate and long-term analysis. The nurses described the environment at the area agency as being open to their ideas, opinions and suggestions.

Direct service staff, home providers, early supports and services staff and family support staff that responded to the redesignation surveys were positive in their assessment of quality improvement activities in the region, with 84% reporting that quality assurance activities generally resulted in improved services for individuals. Direct service staff cited examples of how the agency was able to improve the quality of services to individuals. Examples included: improving living conditions by replacing furniture; improving the health of individuals by supporting memberships at fitness centers; changing day services' routines to address stability in behaviors; and incorporating training for individuals in accessing public transportation.

Service coordinators were less positive in their assessment of quality improvement activities in the region, with 67% reporting that suggestions resulted in improved services to individuals. Service coordinators meet weekly as a group with the Director of Service Coordination. They review progress or obstacles in meeting goals. The Director of Service Coordination also co-chairs the area agency Quality Group and in this capacity is able to bring service coordinators' concerns to the group as well as provide service coordinators with information related to quality improvement efforts in the region.

The view of a minority of service coordinators, who are less positive about service provision in the region, was consistent throughout the surveys completed during redesignation. It is unclear if this can be attributed to the challenges of people who are on their caseloads, or if some other factors are at work, such as the need for more discreet training for service coordinators, or greater time to participate in the trainings offered.

Progress in meeting goals in individual service agreements was assessed during the redesignation review. A very small sample of eight service agreements was randomly selected. Three of the eight did not document that changes had been made when the individual or guardian indicated that modifications were needed.

Recommendation:

Based on redesignation survey results, the area agency is encouraged to explore more fully the need for additional service coordination supports and training opportunities, including establishing and maintaining relationships within the community. Additionally the area agency is encouraged to examine the role of service coordinators in quality improvement.

One Sky has many policies and practices in place to ensure ongoing assessment of service provision and individual and family satisfaction with services. There is involvement by staff at all levels of the organization, from service providers to the Board of Directors. There are also frequent meetings with subcontract agencies. There is ongoing monitoring of residential services and periodic monitoring of day services by both the area agency and its subcontract agencies. These are commendable practices. In addition, the Board of Directors' Quality Assurance Committee plays a very active role in reviewing all information related to quality improvement activities at the area agency, and the management team plays a strong role in evaluating services through multiple means. There is clear indication, however, that the area agency needs to involve its subcontract agencies and service coordinators in more extended discussions related to the effectiveness of some of its quality improvement strategies.

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.

Under Governance, area agencies are assessed on how effectively they manage the regional service system for which they are responsible. Communications both within the agency and between the agency and its stakeholders are scrutinized in this section.

One Sky's organizational chart and management team job descriptions are current and accurately reflect staff responsibilities. Minutes from the Board of Directors' meetings document discussions on a wide range of area agency activities, including budget reviews, quality improvement activities, system change strategies, policies, information technology and subcontract agency functions. In their redesignation self-assessment survey, Board members confirmed their understanding of Board responsibilities in setting agency policy. Regarding their orientation, members agreed that there was a structured orientation for new Board members. There is a comprehensive Board orientation manual that includes news articles and videos on community integration and the role of area agencies. The philosophy, history and development of family support are also included. The area agency mission and purpose are clearly understood by the Board, and they understand their role in governance, as distinct from management's role. During their redesignation interview, some Board members commented that they would like to visit different service arrangements in the region to observe first hand the supports provided by the area agency and its subcontract agencies. This was echoed by the self-assessment results where 28% indicated they lacked adequate knowledge about the agency's programs and services. Again, in the self-assessment, several Board members expressed concern that the current membership of the Board did not possess all the expertise needed to be a more effective Board. Members of the Board went to review the home modifications at one of the area agency owned properties in 2009. As requested by some members of the Board, periodic visits to various service arrangements in the region would increase the members' knowledge and understanding of services, beyond what is possible through a review of reports and data.

Consideration:

Given the concern of some Board members, and acknowledging that Board membership is at the minimum level required by regulation, the area agency and its Board could expand recruitment efforts to increase Board membership and broaden expertise and further explore ways of providing opportunities for Board members to visit service programs.

During their orientation, new members of the area agency management team meet individually with all other managers at the agency in order to gain a good understanding of all aspects of the organization. Managers attend conferences and they meet regularly with their supervisors who mentor and identify any training needs.

The Board of Directors provides oversight while the management team at the area agency administers supports and services in the region. As part of its oversight responsibilities, the Board of Directors receives, reviews and discusses the results of all surveys at the agency, wait list information, budget

updates, and quality assurance activities. Agency managers attend Board meetings on a rotating basis and report on progress in meeting the goals of their departments. The management team reviews and updates the biennial plan quarterly. Members of the team also meet with individual subcontract agencies twice per year to discuss all aspects of service provision and budgets.

A measure of management's success at an agency is the degree to which staff feel they have the knowledge and support to fulfill their responsibilities. When asked in their redesignation surveys if the agency created a work atmosphere where they were encouraged to offer ideas and suggestions, the majority of family support staff, direct service staff and service coordinators responded positively. In response to questions related to the accessibility of supervisors and the support they received from supervisors, 82% of these staff responded positively. The 12 home providers who responded to the redesignation survey were even more positive, with 91% reporting that the support they received was "good" to "excellent." Subcontract agency managers and the complaint investigator under contract with the area agency reported that communications between them and the agency were positive and open. During their redesignation interview, the management team commented that its relationships with subcontract agencies have improved since the area agency became a service provider itself. The management team feels it is able to negotiate services and budgets more effectively.

The management team and Board at the area agency engage in community outreach. The most recent strategic plan established a public relations/marketing initiative, family support staff participate in the local community resources network, and some staff and Board members belong to the Chamber of Commerce and Rotary Club. Activities such as the annual area agency picnic and Regatta are used as occasions to provide information to large numbers of people. Subcontract agencies reported that the Family Support newsletter, the area agency trainings and their annual meeting, as well as the semi-annual individual subcontract agency meetings, were all ways of remaining connected with the agency and sharing information. They felt the agency's mission was well understood by the community at large.

The area agency and Family Support Council have a good working relationship. During their interview with the redesignation team, the Council described the agency staff as "cooperative and helpful" and the Council feels valued by the area agency. The Council members are involved in the selection and hiring of the Director of Family Support, but they have chosen not to play an active role in the evaluation of family support staff. The Family Support Council is always invited to participate in strategic planning and other aspects of agency planning.

Staff and providers surveyed during the redesignation review were positive about the orientation and training they received from the area agency and subcontract agencies in the region. Some family support staff felt they did not have sufficient information to assist families regarding rights violations. Both direct service staff and home providers, as well as family support staff who responded to surveys (92%) reported having sufficient information about health and safety and emergency protocols prior to working with individuals. Staff in the Early Supports and Services programs were highly positive about their agencies' support for ongoing professional development. The area agency management team highlighted its support for training in the region. Its Human Resources Department has a primary role in compiling information that documents both area agency and subcontract agency compliance with He-M 506, the Bureau's regulation on training. The area agency provides two direct service staff scholarships for each of its subcontract agencies, encouraging their participation in the annual Direct Support Professionals Conference. The region 8 area agency and the region 10 area agency share training resources for staff orientation and medication administration. A training bulletin board and the area agency web site provide information on all local and statewide trainings available to families, staff and providers. The area agency does not have a designated training coordinator. The

area agency needs to ensure that there is consistent representation from the agency at the statewide training collaborative meetings at the Bureau of Developmental Services.

Consideration:

Area agencies have the opportunity to determine what types of statewide trainings will be made available to their staff each year through participation in the statewide training collaborative meetings held at the Bureau of Developmental Services. One Sky is encouraged to become more involved in these discussions.

The area agency demonstrates a commitment to proactive supports and services to reduce the need for, or intensity of long-term services. One Sky cooperates with many other community agencies in the region, including Seacoast Mental Health, the NH Brain Injury Association, Vocational Rehabilitation and Community Action Programs

All of the information gathered during the redesignation review confirms that the area agency is well governed and administered. It has an active, engaged Board of Directors whose members want to increase their knowledge and expertise to become an even more effective governing body. The agency's organizational structure provides clear roles and responsibilities and staff and provider trainings are well publicized and tracked. The agency provides individuals with proactive supports and services and it collaborates with other community agencies. One Sky demonstrates that it is providing an effective regional service system.

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.

In order to give all of its customers a sense of security that their services will be ongoing, an area agency must have in place and implement sound fiscal policies and practices. One Sky revised its financial manual and by-laws in 2008. The agency's policies and procedures cover all aspects of budget reporting and monitoring, from internal accounting controls to petty cash funds. The agency's by-laws, approved by the Board of Directors, include detailed responsibilities of Board members, and Board minutes reflect discussions regarding agency policies, procedures, by-laws and organizational structure. The job description of the Director of Finance is clear and comprehensive, outlining the extensive financial management responsibilities of this position.

The process for budget development at the area agency involves all agency managers. Minutes from management team meetings document discussions about regional and statewide budgets, and members of the team are in regular contact with the Bureau Liaison. Discussions with the Liaison reflect a close working relationship regarding contract modifications, reallocation of resources, crisis situations and wait list needs.

During their interviews, area agency and subcontract agency managers described budget development in the region as a process involving everyone from individual service coordinators to department directors. Each individual who receives services has his or her own budget and these are available to individuals and guardians upon request. Service coordinators review each new or revised budget and provide any needed clarification before a final version is sent to the Director of Finance. Additionally, budgets for Consumer Directed Services include monthly tracking reports on expenditures. All subcontract agencies submit quarterly financial reports to the area agency as well as annual budgets and financial audits. In addition to these, subcontract agencies submit signed contract adjustment letters to track changes. Meeting a goal identified in the area agency's 2007 strategic plan, finances are now included in the subcontract agency review process. The Family Support Council, in its redesignation interview, reported that the Council receives monthly updates on its budget and that the Director of Finance is available at meetings or over the phone to answer any budget-related questions. ESS subcontract agencies also reported that the agency intake coordinator and subcontract agency staff discuss insurance coverage with families. All staff involved in these discussions are trained regarding their responsibilities in this area.

Management of agency resources to address waiting list needs is a critical concern for those who do not yet have funds allocated for their services. Minutes of both the Board and management team at One Sky reflect discussions of wait list needs and the use of all available resources to address those needs. The Executive Director provides the Board with an overview of regional and statewide wait lists, as well as legislative efforts to address the needs. The Director of Service Coordination, who chairs the agency's Wait List Committee, attends Board meetings at least twice a year to present

detailed information about the wait list. When funding is allocated, the Board reviews timelines for service provision. The management team reported that it exhausts all possible options and strategies prior to placing someone on a waiting list, including public housing, home health agencies, enhanced respite services and Vocational Rehabilitation services. Those who are on the wait list are assigned a service coordinator who checks in with them at least monthly. The Wait List Committee meets at least twice each quarter to review the list, and identify any community resources that might be available to address individual needs. Young adults transitioning from high school to adult services are assisted by the area agency's transition coordinator to develop a plan for when services are funded as well as a back up plan in the event that funding is not available at age 21.

In an effort to enhance its financial resources, One Sky has developed close collaborative relationships with school districts in the region to provide services to high school students who have a developmental disability. This allows the agency not only to assist students in transitioning to adult services, but also to access new revenue sources. The area agency also works to supplement its resources by obtaining grants from various groups such as the Lion's Club and the Harry Allen Gregg Foundation. These resources fund recreation activities and specialized dental care. On a regional level, local businesses and organizations partner with the agency for the annual picnic and regatta. In order to assist more families in recent years, the Family Support Council has received additional funding from the agency. The Council distributes these funds discretely and insures that each proposal is specific to an individual's disability. Families are referred to other community resources if appropriate.

The area agency is in good financial standing, having a strong current ratio of 1.8:1. For the past several years the days of cash on hand has remained steady and was a healthy 33 days as of June 30, 2009, without use of the available line of credit. Medicaid days in accounts receivable have also remained steady at 32. Monthly financial statements submitted to the Bureau of Developmental Services by the area agency were compared to the year-end audit and revealed no adjustments prepared by the independent auditor. The agency's Board of Directors and management team minutes document ongoing discussions and close oversight of the area agency budget and current financial status. In their redesignation self-assessment survey, Board members agreed that the Board leadership takes steps to ensure that fiscal reports are thoroughly understood by all Board members. Board members also commented that the Director of Finances at the agency does an excellent job of explaining the data and highlighting any changes since the previous month. Included in its monthly packet of information regarding area agency revenues and expenses there are details regarding monthly cash flow. The management team underscored the benefits of its semi-annual meetings with subcontractor agencies that include discussions about their financial status and a review of quarterly financial reports and annual audits. During their redesignation interviews, subcontract agencies in the region detailed their own oversight of revenues and expenses citing ways they have tried to economize, including bulk purchases for staffed services, consolidation of office space and utilizing volunteers.

One Sky is to be commended for its sound fiscal practices. Its Board of Directors provides leadership and oversight on an ongoing basis. The management team has put into place monthly, quarterly and yearly reviews and discussions at all levels of the organization, with a view to maximizing resources and maintaining cost effective approaches. Finally, the agency is diligent in managing its wait list and finding ways to provide support to individuals while they are on the wait list. The area agency is given high marks in this redesignation review of Budget Development and Fiscal Health.

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.

The Bureau of Developmental Services routinely conducts reviews at area agencies and requires information related to their compliance with state and federal regulations. During the 2009 redesignation review, data were examined for a five-year period.

The area agency has complied with regulation pertaining to the eligibility and provision of services within the DD and ABD waivers (He-M 503 and He-M 522). Service agreements include detailed personal profiles, the services to be provided, and measurable goals. The eight records reviewed during redesignation were also in compliance with requirements for eligibility determinations and wait list information.

The Bureau's Medication Committee provides oversight of area agency compliance with He-M 1201. Correspondence between the Committee and One Sky documents the area agency's full compliance with the regulation. Committee members often comment on the area agency's "stellar reports" that include excellent detail and conscientious oversight. When recommendations are made regarding subcontract agencies, there is prompt follow-up by the area agency.

Certification data compiled by the Bureau of Health Care Facilities for FY 04- FY 08 reveals that the average number of deficiencies in the region is consistent with the statewide average. Applications for the Medicaid Community Care Waiver (He-M 517) and the In-Home Support Waiver (He-M 524) are timely and complete.

The composition of the Board of Directors meets the minimum requirement outlined in He-M 505 of nine members. Membership on the Family Support Council is in accordance with He-M 519.

The two Early Supports and Services programs in the region demonstrate full compliance with He-M 510 and federal regulations. They meet the 45-day time line for development and approval of the Individual Family Support Plan. Equally important, meetings for transitions to preschool special education occur at least 90 days prior to a child's third birthday. And, although there had been some problems in past years with timely initiation of services, this has since been resolved and in FY 09, both ESS subcontract agencies had 100% compliance. Quarterly ESS reports are accurate and submitted as required.

Routine submissions of financial information, consumer employment data, biennial plans and quarterly wait list information are timely and in the correct format. The area agency is noted for being very responsive, answering email and returning phone calls immediately.

The area agency has demonstrated excellent overall compliance with all state and federal regulations. It has a commendable reputation for being highly responsive to any requests and it has good working relationships with DHHS agencies.

SUMMARY

One Sky has a mission statement that is clearly understood by everyone at the area agency, that is embraced by the Board of Directors and Family Support Council, and that is viewed positively by the broader community. It is a mission based on the value of full community participation for all people who have a developmental disability or acquired brain disorder and who receive services from the area agency.

The area agency in region 8 has many systems in place to provide safeguards for individuals and families who receive services. A very high percentage of service recipients in the region, as well as area agency and subcontract agency staff and providers, feel that individuals are safe and that their health care needs are being met.

It is also evident that the area agency has been working diligently over the past five years to assist individuals and families in having greater control over their services. The policies and practices that have been put into place to encourage participation in Consumer Directed Services demonstrate the area agency's commitment to expanding these services to anyone in the region who wishes to choose this option.

Since their last redesignation review in 2004, the area agency has significantly increased family participation in regional planning activities, on the Board of Directors and on agency committees. As noted in this report, further efforts are needed to involve individuals who have a developmental disability or acquired brain disorder in similar area agency activities.

In its quality improvement efforts, One Sky has involved staff at all levels of the organization, as well as family representatives and subcontract agencies. The agency reviews data from multiple sources to gauge progress, and individual and family satisfaction is assessed continually. There are indications that a more collaborative effort is needed with subcontract agencies, and possibly additional training for service coordinators.

The Board of Directors in region 8 is very actively involved in reviewing the agency's ongoing financial status and quality improvement activities. During the redesignation review, the Board referred to its own need to have a greater understanding of service delivery, demonstrating its commitment to fulfilling all of its responsibilities to individuals and families. It is this type of self-assessment from Board members that leads to ongoing improvements in a region. The area agency management team has worked together for a long time and is well respected both within the region and statewide. It has been effective in its efforts to administer a well organized agency that has a good working relationship with its Family Support Council and community agencies in the region. Based on the redesignation staff surveys, staff at all levels of the organization feel well supported to do their jobs. This was most evident for those who provide direct supports to individuals and families.

Over the redesignation review period, One Sky has had in place sound fiscal practices, is in good financial standing and sound management. The agency has good overall compliance with state and federal regulations, and it is noted as being highly responsive.

This redesignation review has served to highlight the many strengths of the area agency responsible for services in region 8. It is commended for its hard work on behalf of individuals and families in the region. Also included in this report are suggestions for consideration and several recommendations. The Bureau of Developmental Services has no doubt that, given its history, One Sky will respond to the challenges identified.