



Consumer Services

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TARGETED CASE MANAGEMENT

Requirements for Case Management Eligibility

Adair County SB40 provides Targeted Case Management ('TCM') services to individuals with developmental disabilities in Adair, Putnam, Schuyler, Scotland and Sullivan counties. To qualify for TCM, a person must be determined to be eligible for the services through the State Division of Developmental Disabilities as defined in Missouri Statute RSMo 630.005, represented locally by the Kirksville Regional Office.

RSMO 630.005:

(9) "Developmental disability", a disability:

- e. Which is attributable to:
 - c. Intellectual disability, cerebral palsy, epilepsy, head injury or autism, or a learning disability related to a brain dysfunction; or
 - d. Any other mental or physical impairment or combination of mental or physical impairments; and
- f. Is manifested before the person attains age twenty-two; and
- g. Is likely to continue indefinitely; and
- h. Results in substantial functional limitations in two or more of the following areas of major life activities:
 - g. Self-care;
 - h. Receptive and expressive language development and use;
 - i. Learning;
 - j. Self-direction;
 - k. Capacity for independent living or economic self-sufficiency;
 - l. Mobility; and

(e) Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, habilitation or other services which may be of lifelong or extended duration and are individually planned and coordinated;

Adair County SB40 shall meet the requirements specified in the Targeted Case Management Contract with the Missouri Department of Mental Health, State Division of Developmental Disabilities.

If the person has Medicaid, the service coordinators' time spent providing TCM services will be billed to his or her Medicaid; if the person does not have Medicaid, no charges for TCM shall be billed.

Intake/Application Process

Individuals with disabilities and their families who believe that they meet the eligibility criteria for receiving Adair County SB40 Support Coordination services must first be determined eligible for those services by the Intake Coordinator of the Kirksville Regional Office ('KRO'), the local office of the Missouri Department of Mental Health, Division of Developmental Disabilities. Once eligibility is confirmed, the KRO Intake Coordinator will electronically transmit the completed referral packet to Adair County SB40. Upon Agency acceptance, Adair County SB40 will assign a Support Coordinator within five (5) business days.

Each person eligible to receive TCM services through Adair County SB40 will be assigned a Support Coordinator. The Director of Service Coordination, or designee, will determine assignment of the Support Coordinator to each individual based upon individualized criteria that best meets the needs of each person and the knowledge, experience or background of each Service Coordinator. Disputes over assignment of the Service Coordinator will be reported to the Executive Director. All disputes will be reviewed within five (5) business days. Upon review of the dispute, the Executive Director shall make final determination of the assignment.

Consumer Rights

Support Coordinators will ensure that each individual and their family members, as appropriate, are informed of and understand their rights to the best of our ability. This includes but is not limited to:

- The right to due process for before any rights and services can be limited or taken away.
- The right to be treated with respect at all times, to be treated as a person like everyone else under the law.
- The right to be free from abuse and/or neglect.
- The right to lead the planning process.
- The right to confidentiality with regard to all contact and interaction with the Agency and Agency Staff.
- The right to privacy, spending time alone and interacting with others privately.
- The right to have a safe, clean home; to choose where to live, whom to live and associate with, have meals that are healthy and the right to accessible, equitable medical care.
- The right to free and appropriate public education.
- The right to have maximum independence and the least restrictive environment, including access to the community, participation in community organizations of choice and access to media.
- The right to choose someone to assist with making decisions and/or act on individual's behalf.
- The right to have a job and make money.
- The right to control your personal money, pay your bills and manage your money.
- The right to keep and control personal possessions.
- The right to see files, data, information in a way that the individual can understand and kept private.
- To understand how to make a complaint and be helped without fear of repercussions.

Furthermore, Adair County SB40 Service Coordinators are committed to advocating for the protection of the rights of individuals by:

- Ensuring individuals served are free from abuse, neglect, and exploitation; reporting suspected abuse or neglect in accordance with specified procedures; and providing follow-up as necessary.
- Ensuring that incidents are reported in a timely manner in accordance with policy and follow-up Responsibilities are identified and completed.
- Notifying the individual, planning team, and service provider and revising the ISP whenever services are changed, reduced, or services are terminated.
- Reporting any suspected violations of contract, certification or monitoring/licensing requirements to the Director of Service Coordination and the State Division as required.
- Entering required information into the electronic health records in an accurate and timely manner.
- Ensuring that individuals/families are offered informed choice of service provider.

TCM Management Review Process

Agency Service Coordinators (SCs) will submit all Individual Plans, Addendums to the plans, Utilization Review requests and Due Process documentation to Agency's review email (reviews@sb40life.org). All submissions will be reviewed by the Director of Service Coordination or the Assistant Director of Service Coordination, or their designee. The submission will be returned for corrections and updates as needed. Submissions are to be filed by the DSC or designee.

On-Call, 24/7 Access

The Agency will provide the individuals/guardians information regarding how to contact the Support Coordinator/TCM office for assistance, including what to do in cases of emergencies and/or after hours. The afterhours contact number will be for the Kirksville Regional Office, who will be provided emergency contact information for the Agency for use in emergency situations requiring immediate information or assistance from the Agency.

Residency Requirements for Targeted Case Management (TCM) Intakes and Transfers:

As self-advocates say “Nothing about us without us” and “The mission of the Adair County SB40 is to engage in ADVOCACY, promote INCLUSION, and provide essential RESOURCES to assist people with developmental disabilities to live self-determined lives.”

Adair County SB40 resolves people with developmental disabilities are best able to advocate for themselves, be included in their communities, and be connected to resources in their communities with the aid of Service Coordinators who have a strong connection to their same communities.

Furthermore, as it is required per the Department of Mental Health Division of Developmental Disabilities (DMH-DD) to conduct assessments and Individual Support Plan meetings in-person except when DMH-DD has modified requirements due to health emergencies; and

As “Individual Support Plan Monitoring and Review includes interaction with individuals in services. This monitoring and review include talking with the individual, observation, and review of documentation.” (Individual Support Plan Monitoring and Review, Division Directive Number 3.020); and

As DMH-DD has established a minimum frequency of in person visits/contacts except when DMH-DD has modified requirements due to health emergencies and stated “It is expected that Support Coordinators exercise professional judgement and increase visits according to the individual needs of people. Unannounced visits may occur.” (Individual Support Plan Monitoring and Review, Division Directive Number 3.020, p. 3),

Therefore; Adair County SB40 will accept intake and transfers for Service Coordination only for those people with intellectual/developmental disabilities who reside in Adair, Putnam, Schuyler, Scotland, or Sullivan Counties. For the purposes of this policy, the term ‘reside in’ is defined as ‘the place of domicile; meaning living in that locality with the intent to make it a fixed and permanent home.’

Exception: Adair County SB40 will provide Courtesy Service Coordination for people who have documented plans to move to Adair, Putnam, Schuyler, Scotland, or Sullivan Counties within thirty (30) calendar days and will begin providing Service Coordination after the person has completed the DMH-DD Transfer Process as allowed per the current TCM Contract.

The Agency reserves the right to reject services if the transfer packet is incomplete upon audit review or if the individual does not plan to permanently reside in the Agency’s service area.

Waiver Requirements:

The Board may waive the eligibility requirements as set forth above for the applicants on a case-by-case basis, if the Board finds:

The person to be served has a unique or unusual relationship to a particular county which warrants such waiver;

or

Orderly operation of a Board administered or funded program warrants the waiver of residency requirements for such person.

At the discretion of Agency management, individuals transferring out of the Agency service area may remain in our services for a reasonable period of time to assure the transition is successful for the individual involved.

Residency Requirements for Individual Funding Requests

With regard to Individual Funding requests which are submitted in accordance with the Board's funding policy and where the funding is provided through either the Adair County SB40 Tax Levy or DMH payments received for TCM services delivered, the residency qualifications are:

For Board funding generated through revenue from the *Adair County SB40 tax levy* or TCM services delivered to residents of Adair County, the person with developmental disabilities must reside in Adair County.

For Board funding generated through revenue from *TCM services* delivered by the Board to residents of Putman, Schuyler, Scotland, or Sullivan County, the person with developmental disabilities must reside in Putman, Schuyler, Scotland, or Sullivan County.

For the purposes of this policy, the term '*reside in*' is defined as 'the place of domicile; meaning living in that locality with the intent to make it a fixed and permanent home.'

Waiver Requirements:

The Board may waive the eligibility requirements as set forth above for the applicants on a case-by-case basis, if the Board finds:

The person to be served has a unique or unusual relationship to a particular county which warrants such waiver;

or

Orderly operation of a Board administered or funded program warrants the waiver of residency requirements for such person.

At the discretion of Agency management, individuals transferring out of the Agency service area may remain in our services for a reasonable period of time to assure the transition is successful for the individual involved.

Role and Responsibilities of Support Coordinator

Adair County SB40 Support Coordinators shall provide TCM services to Medicaid eligible participants as follows:

- a. Assessment - identifying the need for medical, social or other services and completing related documentation, and gathering information from other sources.
- b. Development of an individual support plan - Based on information collected through the assessment, develop service goals and identify a course of action to address the medical, social, and other services the eligible individual needs, with active participation of the eligible individual (or authorized healthcare decision makers) and others to respond to assessed needs.
- c. Referral and related activities to help eligible individuals obtain needed services - This includes activities that help link with medical, social or educational providers or other programs that are capable of providing needed services to address identified needs and achieve goals in the individual support plan.
- d. Monitoring and follow-up activities, including activities and contacts that are necessary to ensure that the individual support plan is effectively implemented and is adequately addressing the individual's needs, which may include contacting the individual's family members or service providers, or other entities or individuals to help determine whether:
 1. Services are being furnished in accordance with the individual support plan;
 2. The services in the individual support plan are adequate;
 3. Changes in the individual's needs or status exist;
 4. Proper documentation is maintained;
 5. Individual's rights are protected.

Adair County SB40 Support Coordinators will also provide Service Coordination services to non-Medicaid eligible persons as follows:

- a. Assessment - identifying the need for specific services, including through Parent Advisory Council (PAC) and/or General Revenue (GR) funding.
- b. Development of an Individual Support Plan (ISP) based on information collected through the assessment, develop service goals and identify a course of action to initiate and maintain identified services through PAC and/or GR funding.
 1. ISPs for individuals receiving Service Coordination only will not require UR Review or submission of documentation of service need, may be held by phone or in person, and consent may be obtained via email, phone, electronic signature, or written signature.
- c. Referral and related activities to initiate and maintain identified services through PAC and/or GR funding.
- d. Monitoring and follow-up activities, including activities and contacts that are necessary to ensure that the identified funded services are effectively implemented and adequately addressing the individual's needs.

Selection and Assignment of Support Coordination

Adair County SB40 Support Coordinators who provide Targeted Case Management Contract ('TCM') services shall meet qualifications and competencies as described in the TCM Agency contract with the Missouri Division of Developmental Disabilities.

Upon referral of an eligible individual, the Director of Service Coordination, or designee, will identify a Support Coordinator within its agency. The individual can inform the Agency of any preference they may have in Support Coordinator, but there is no guarantee that the Support Coordination Agency will be able to assign the preferred Support Coordinator to the individual.

Once assigned, the Support Coordinator will contact the individual to be served within five (5) business days of the agency's receipt of a complete referral packet. The assigned Support Coordinator will introduce him/herself and begin the planning process. The initial individual support plan will be completed within thirty (30) calendar days of the agency's receipt of a complete referral packet. The individual support plan shall be updated at least annually and submitted to Utilization Review at least 30 days prior to the implementation date or when warranted by changes in the waiver participant needs.

Changing Support Coordinator

If an individual wishes to change Support Coordinators, he/she may request a change in Support Coordinator by contacting the Director of Service Coordination, designee, or the Executive Director of the Agency. The Agency will make every effort to accommodate the request and assign a new Support Coordinator to the individual, but is not obligated to do so.

Typically, Support Coordination reassignments are conducted on the 1st of the month. As soon as the new Support Coordinator is assigned, information already gathered and developed – including contact and demographic information, planning documents such as the Individual Support Plan ('ISP'), monitoring tools, etc. – will become available to the newly assigned Support Coordinator through the electronic records maintained by the Agency.

In the event that a Support Coordinator leaves the Agency's employment, the DSC, or designee, will assign a new Support Coordinator within five (5) business days.

Every effort will be made to assign the most appropriate and qualified Service Coordinator to meet the person-centered needs of each individual. The DSC, or designee, will notify the individual and their families once the new Support Coordinator is assigned. Any conflicts or complaints arising from the assignment of Support Coordinator to individuals will be resolved by the Executive Director, who is assigned full and final authority.

Planning Meetings

The Support Coordinator assigned to each individual is responsible for scheduling and facilitating planning meetings when developing each Individualized Support Plan. These planning meetings will take place no less than annually, and as frequently as necessary in order to meet the changing needs of the individual served. Planning supports involves:

- Interviewing the individual and ensuring he/she is at the center of the planning process and in determining the outcomes, services, supports, etc. that he/she desires.
- Also interviewing, if appropriate, the family or other involved individuals/agency staff; reviewing/compiling various assessments or evaluations to make sure this information is understandable and useful for the planning team to assist in identifying needed supports; and facilitating completion of discovery tools, if applicable.
- Scheduling and facilitating planning team meetings in collaboration with the individual; informing the individual and parent/guardian that the service provider(s) can be part of the planning team, asking the individual and parent/guardian if they would like to include the service provider(s) at the ISP meeting, and inviting the service provider(s) to the ISP meeting; writing the ISP; and distributing the ISP to the individual, all team members, and the identified service providers; and reviewing the ISP through monitoring conducted at specified intervals.
- Ensuring that there has been a discussion regarding a behavior plan for individuals with behavioral concerns and that a positive behavior plan is in place as needed, particularly when the individual is assigned acuity due to behavior. This shall be documented in the individual's ISP.
- Ensuring that there has been a discussion regarding the medical needs of the individual and that these needs are documented in the ISP. This is to include the need for data collection of bowel movements, urine output, seizure activity, etc. Should the planning team agree that such data collection is medically necessary, and the individual's primary care physician provides a prescription for it, this shall also be documented in the ISP along with the responsible party who will record and store the information.
- Monitoring and following up to ensure delivery of quality services, and ensuring that services are provided in a safe manner, in full consideration of the individual's rights. This includes ensuring that for individuals residing in provider-owned or controlled residential settings (i.e., ISLs, Host Homes, etc.) and/or attending day habilitation programs, pre-vocational programs and group supported employment programs.
- Following the rights to due process with any program that implements any restrictions (Examples include, but are not limited to: Inability to access food at any time due to a medical disorder; Inability to have access to items due to PICA). That the due process review is supported by a specific assessed need and justified in the person-centered service plan.

Resolving Differences of Opinion among Planning Team Members

It is the intent of the Agency to resolve disputes in the most conciliatory manner possible, consistent with the best interests of recipients, the organization and the community it serves. In the event of the development of any dispute regarding the individual planning process for any person served, any and all parties are encouraged to contact the Director of Services Coordination ('the DSC'), or designee, for mediation.

Should the issue remain unresolved after it has been addressed by the DSC, any and all parties involved are encouraged to contact the Executive Director of the Agency. The Executive Director of the Agency is

responsible for ensuring that all stakeholders are engaged in solution planning, including referral(s) to an advocacy group or individual from outside of the organization to assist with the mediation process.

The Executive Director is assigned full and final authority for resolution. Nothing in this policy shall conflict with the right to due process before any rights and services can be limited or taken away.

Changes to the Service Plan

It is the expectation that Service Coordinators will engage in continuous person-centered planning processes that result in integrated and comprehensive annual plans that are reflective of and responsive to the strengths, interests, needs, and desired outcomes of the individuals served. The Service Coordinator will work collaboratively with the individual and all stakeholders to assure this process.

The Service Coordinator will encourage and respond to any suggestions for updates and necessary changes to the Service Plan. In other words, individuals will *never* need to wait until the annual planning process is scheduled in order to respond changes in the needs or identification of unmet needs of individuals. Through monthly and quarterly service monitoring, each Service Coordinator is expected to understand the needs of individuals and the appropriateness of the current plan for those individuals. Changes to that plan can be requested at any time and should be responded to by the Service Coordinator in a timely manner.

The specific procedures to be followed to request and implement changes to the Service Plan will be determined by the Director of Service Coordination (the DSC), or designee. These procedures may be adapted as necessary, and as approved by the DSC, or designee, due to agency or regulatory evolving requirements.

Discharge from Case Management Services

Discharge from TCM Services, ('Case closure'), involves terminating a person from the service delivery system. The assigned Support Coordinator ('SC') will complete discharge summaries or other forms for recording the individual's removal from the services delivery system. Sometimes this is done as a result of the individual's death. The required documentation, including the discharge summary, will be submitted to TCM Management by the SC. The Director of Service Coordination, or designee, shall forward the required documentation to the appropriate Division staff for case closure. Although case closure services provided after the date of death should be logged, the SC should prevent the service being billed to MO HealthNet by logging as a non-billable activity. Documentation will include a case note, the discharge summary, quality assurance review and all relevant communications (email, written notices, etc.), in the individual's file

Remote Monitoring – Pandemic Response

Adair County SB40 services and programs play an integral part in the community's health care system, including supporting people during viral or infectious disease. However, we know that isolation, lack of service monitoring and loss of essential supports also harms the individuals that we serve, including during an infectious disease outbreak. Therefore, Adair County SB40 essential programs and services will be continued to the maximal extent possible with appropriate modifications to assure the safety and security of all involved.

Service Coordinators are expected to take all necessary precautions to keep themselves safe while still providing quality service monitoring which ensures the health and well-being of everyone that we serve. For more information, please refer to the Infectious Disease or Pandemic plan in the Agency's current *Emergency & Disaster Plan*.

Provider Relations

Provider Choice

Persons receiving services from the Agency shall be offered fully informed choice of providers of services and supports identified in the individual planning process. An up to list of providers for each type of service and support shall be maintained by the Agency and presented to the individual during the planning process. The Service Coordinator will support maximum control and the self-determination of each person during planning.

The choice of the persons served in service providers will at all times be respected and, whenever possible, accommodated. When choice of providers cannot be accommodated, mutually acceptable alternatives will be negotiated. All requests and rationale for accommodating the request shall be documented in the file of the person served. Potential alternatives, choice of alternative or reason for not accepting the alternate provider shall also be identified and documented.

If an acceptable alternative cannot be negotiated, the Service Coordinator will inform the person of their right to contact the Director of Service Coordination (the DSC), or designee. The DSC may consult, mediate and/or intervene as necessary. The Executive Director will render the final determination on all disputes of provider choice.

Service Monitoring

Service Coordinators (the SC) will conduct monitoring of services and supports offered by providers in accordance with the plan. The SC shall assess services delivered by the provider and problem solve any identified issues regarding service provision in collaboration with the person served, guardians/authorized representatives, provider representatives and other stakeholders. The SC will facilitate the sharing of information between providers of medical services, behavioral health services, social, educational, vocational, housing and community services as needed. The SC is responsible for adhering to the established procedures for service monitoring and documentation of such monitoring as determined by the Agency's DSC, or designee, in accordance with the TCM Contract and Medicaid requirements.

In the event of an unresolved issue between a Service Provider and individual, the SC will report the situation to the DSC. The DSC, or designee, will direct the SC in responding to the situation. All communications will be documented by the SC. All contact with the Service Provider is expected to be conducted in a positive and professional manner.

Service Provider / Agency Communications

The DSC will assure ongoing communications between Agency staff and Service Provider staff. In addition, the DSC, and/or designee, will meet with Service Provider Management as needed and on a routine basis to address any and all unresolved issues arising out of the provision of the Agency's TCM services and service monitoring.

It is the intent of the Agency to maintain positive and professional working relationships with all individuals outside of the organization who are involved with the delivery of services and supports to persons served.

QUALITY ASSURANCE MONITORING

Adair Count SB40 services are founded upon a value of Excellence. The staff of this organization have committed to go *beyond compliance* in delivery of services, to meet current needs and anticipate future needs, of the people we support.

Performance & Outcome Measures

Adair County SB40 (the Agency), in compliance with the TCM Contract with the State Division, shall ensure that

- Individuals that are Medicaid eligible are provided due process and an opportunity for a fair hearing.
- Services support of each individual's Individualized Service Plan (ISP) based on a person-centered planning process.
- Support Coordinators sign a Confidentiality Statement to safeguard the use or disclosure of information concerning applicants and eligible individuals and county and state records and information.
- Fully cooperate with the State Division and share all information related to abuse/neglect investigations at the time when they are initiated, quality assurance, and enhancement plans and any other information necessary for the Agency to properly carry out its TCM service responsibilities.
- Support Coordinators employed by the Agency **are mandated reporters of suspected abuse or neglect under State law** and shall report to the Kirksville Regional Office such suspected abuse/neglect as occur in Department contracted settings as required by State law and regulation.
- When the Agency determines that services are not being furnished in accordance with the plan of care or that services provided are inadequate in terms of quality, the Agency shall intervene to address the problem. The Agency shall submit findings into the State Department's approved electronic systems as required so that the Agency and the Department may jointly address issues through the Quality Enhancement process.
- The Agency shall participate in the collection and evaluation of outcomes data, including consumer satisfaction survey data, performance measure trend reports, and annual TAC review reports, as required by the State Department.
 - If requested by the State, the agency shall establish, implement, and monitor a plan of action to improve outcomes and consumer satisfaction.
- In accordance with Health, Safety and Rights assurances set forth by the Centers for Medicaid and Medicare Services (CMS) for 1915c waivers operated by the Division of Developmental Disabilities, TCM Support Coordinators shall ensure completion of health risk screenings using the Department's approved computerized systems as required.
 - The TCM Support Coordinator shall ensure that needed supports identified through the health risk screening process are incorporated into the Individual Support Plan (ISP) and monitored accordingly.
 - The TCM Support Coordinator shall ensure that identified areas through the HRST process requiring a plan of action are developed and issues remediated.
- The TCM support coordinator shall ensure that identified services and support needs are incorporated into the individual support plan and shall monitor progress to ensure identified needs are being addressed through support monitoring.
- The TCM support coordinator shall ensure that any identified need for nursing services and supports are requested through Utilization Review (UR).

- The Agency shall ensure that the TCM support coordinator reviews the provider's monthly documentation, to include reviewing the Community RN (Registered Nurse Oversight) Monthly Health Summary in the Department's approved electronic system utilized for health risk screenings for individuals receiving DD residential placement services, as required.
- The Agency shall comply with and meet performance requirements in accordance with the Centers for Medicare and Medicaid Services (CMS) 1915 (c) Waiver Sub-Assurances as listed in Attachment C of the TCM Contract between the Agency and DMH/Division of DD.
- The Agency shall provide the Division a report of provider outcomes and continuous quality improvement efforts at the end of each fiscal year quarter.

Performance Measures

Performance Measures in accordance with the TCM Contract between the Agency and DMH/Division of DD require that:

1. The Agency assign a Support Coordinator for the individual to be served within five (5) business days.
2. The Agency shall develop an initial, individual support plan within thirty (30) calendar days of the contractor's receipt of a complete referral packet.
3. The Agency update the individual's support plan on, at least, an annual basis.
4. That the Agency maintain a written performance measure report which shall be available for review or submitted to the Department upon request. Performance measures are:
 - a. Upon acceptance of an eligible individual, a Support Coordinator shall be assigned for the individual to be served within five (5) business days.
 - b. An initial individual support plan shall be developed within thirty (30) calendar days of the contractor's acceptance of the referral.
 - c. For plans that must be submitted for Utilization Review, the individual support plan shall be updated at least annually and submitted to the UR Committee at least 30 days prior to the implementation date, or when warranted by changes in the waiver participant needs.
5. Information from the quarterly waiver performance measure reports will be communicated to the Agency when applicable in relation to the Agency's role. The information shared supports remediation of identified areas for improvement to meet the established CMS waiver assurances.
6. Adair County SB40 shall meet CMS assurance requirements related to the TCM Contract between the Agency and DMH/Division of DD (Attachment C).

BEST PRACTICES

Adair County SB40 is committed to assuring the greatest possible positive outcomes for individuals served through implementation of Best Practices in the provision of TCM services. Staff will be provided the training and resources necessary to grow their knowledge and understanding of the following practices. The responsibility for implementation of these Best Practices fall to every employee of the Agency, with the primary oversight of the Director of Service Coordination, Assistant Director of Service Coordination and the Quality Assurance Specialist.

Motivational Interviewing

Motivational interviewing is a method of interviewing which will be used in the Agency's TCM Services to help people change challenging behaviors that have become barriers to making positive life decisions. It is a practical, short-term, person-centered process in which the Support Coordinator recognizes individual strengths and brings them to the forefront whenever possible. Support Coordinators demonstrate strategies that:

1. Express empathy for each individual, using reflective listening skills.
2. Help individuals to identify gaps between their goals and values and their current behaviors.
3. Avoid direct confrontation, arguments, persuasion, manipulation or coercion.
4. Grow each individual's belief in their capacity to act in the ways necessary to reach specific goals.
5. Incorporate Positive Behavior Supports into the individual plans which will increase the quality of life, teach new skills and lead people to achieving their goals.
6. Resolve ambivalence and develop internal motivation to change behavior.

Person Centered Planning

Adair County SB40 Support Coordination Services are committed to the principals of Person-Centered Planning with all individuals served. In designing the plan, the planning team should consider the unique characteristics and needs of the individual as expressed by the individual and others who know the person, such as family, friends, service providers, etc. Outcomes, services, and providers identified in the plan should:

- Recognize and respect each individual's rights;
- Encourage independence;
- Recognize and value competence and dignity;
- Respect cultural/religious needs and preferences;
- Promote employment and social inclusion;
- Preserve integrity;
- Support strengths;
- Maintain the quality of life;
- Enhance all domains/areas of development;
- Promote safety and economic security;

Support Coordinators and approved service providers must include the individual in problem-solving and decision-making, and ensure that services are provided in a non-intrusive manner. Thus,

1. Service plans address all participants' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.
2. The Agency monitors service plan development in accordance with its policies and procedures.
3. Service plans are updated/revised at least annually or when warranted by changes in the waiver participant needs.
4. Services are delivered in accordance with the service plan, including the type, scope, amount, duration, and frequency specified in the service plan.
5. Participants are afforded choice between waiver services, between/among waiver services and between/among service providers.

Self Determination

A core value of the Agency's services is to advocate for each individual's right to Self-Determination.

Self-Determination promotes people choosing and setting their own goals, being involved in making life decisions, self-advocating, and working to reach their goals. Self-Determination is about people taking action in their life to get the things they want and need.

People with intellectual and developmental disabilities have the same right to Self-Determination as all people and are entitled to the freedom, authority, and supports to exercise control over their lives.

Support Coordinators will work to assure that

- Individuals receiving agency services have opportunities, respectful support, and the authority to exert control in their own life, with decisions that are honored and the opportunity to succeed or learn from failure.
- Services will include information and education that assists those served to understand that they direct and influence circumstances that are important to them.
- Self-Determination contributes to positive outcomes in areas like employment, education, community living, and an improved quality of life.

Trauma Informed Approach

A Trauma Informed Approach seeks to serve a person based on a kind and compassionate 'What happened to you?' rather than the 'What's wrong with you?' approach. All staff will be supported in a manner that prevents and/or addresses secondary trauma to the maximum extent possible. The agency will promote self-care and the well-being of staff. In addition, all Agency services will be provided to individuals using a trauma-informed approach. All staff of the agency will be trained and informed on the key elements of a trauma-informed approach based upon the following principles:

1. Safety – providing services and supports that foster a sense of physical, emotional and spiritual safety through healthy boundaries and communication.
2. Trustworthiness and transparency – all communications are consistent, have clarity, and reflect positive and professional collaboration.
3. Peer Support – Peer support throughout the Agency staff and management is strongly encouraged and enhance interventions such as advocacy, crisis response and recovery, education and resource development.
4. Collaboration and mutuality – Individuals served, staff and stakeholders are encouraged to participate in the shaping of agency policy and programs.
5. Empowerment, voice and choice – staff and management build an agency culture that appreciates the knowledge and expertise of everyone involved, listening to each individual voice and encouraging all individuals served to make their own choices.
6. Cultural, historical and gender issues – staff and management of the agency will receive appropriate tools and training necessary to provide culturally competent and gender responsive services.

Support Coordinators will incorporate these elements into the TCM services of all individuals served, and:

1. Realize the prevalence of trauma in individuals with Intellectual and Developmental Disabilities;
2. Recognize how trauma affects all individuals involved with the program, organization, or system, including its own workforce; and
3. Respond by putting this knowledge into practice, including
 - a. All individuals served will be screened for trauma as early in the intake process as possible, taking measures so that program participants minimize the need to retell their trauma story.
 - b. Respecting individuality by using the person's preference of person-first or identity-first language.
 - c. Minimizing practices that may trigger emotions due to past traumas.
 - d. Respecting that each person's experience is unique.
 - e. Offering choice with regard to services and supports.
 - f. Providing multiple and diverse opportunities for individuals to provide feedback about services received.

Least Restrictive Approach

Least restrictive approach is a principle that guides the services of Adair County SB40. All staff of the agency are expected to perform duties in a way that demonstrates a commitment to providing life settings and services in the least restrictive way.

The Least Restrictive Approach for each person may look different because people are unique. In agreement with Federal Law, (IDEA, 1975), the Agency maintains the right of every individual to be educated, to live, work and play, to the maximum extent appropriate, in settings that are inclusive alongside individuals without disabilities in their own communities.

In the delivery of Support Coordination services and Agency programming, the Agency will take every measure available to assure that services are provided only be as restrictive as the individual's needs require.

Employment

Adair County SB40 is committed to promoting the employment of individuals with intellectual and developmental disabilities in competitive and integrated employment settings in their communities.

Individuals will be supported and encouraged to seek opportunities which offer transition planning, skill development and career exploration which keeps them on an ever-progressing pathway to vocational success.

All policies, procedures and practices of the Agency will support this vision and promote this vision with the communities served.

Assistive Technology

The Agency recognizes the independence and cost efficiencies that advancements in Assistive Technology provides for persons served. All activities of the Agency will endeavor to promote the use of Assistive Technology through individual planning processes whenever possible.

The Agency will maintain updated information about Assistive Technology, funding mechanisms and AT Service Providers to be shared with Service Coordinators, individuals served and other stakeholders involved in the planning processes.

Transition Planning

The Agency will be proactive in approaching the transitional planning needs of individuals served and is committed to begin planning transitions of persons starting at an early age.

The Agency will assure that Service Coordinators are trained in various transition planning strategies to be implemented during the person-centered planning process.

The Agency is committed to collaborating with schools and other service providers to support students with intellectual and developmental disabilities to be productive citizens of their community, work-force ready and able to live as independently as possible when they graduate out of the Public School System.

Positive Behavioral Supports

The Agency will remain in full support and compliance of the Positive Behavioral Support planning process as outlined by the Missouri Department of Mental Health, Division of Developmental Disabilities, including:

- Support Coordinators will approach the coordination of supports for an individual with a positive, person-centered focus and will facilitate the individual's support team to understand and utilize this approach when supporting all persons.
- Support Coordinators will work with families, the individual and contracted providers to develop and maintain adequate and appropriate methods of observation and evaluation of the plan and strategies to ensure objectives are being met.
- Support Coordinators will ensure a plan for restrictive supports, is limited to health and safety reasons, and a functional plan is in place to remove restrictions and restore rights when such restrictions are no longer necessary.
- Support Coordinators will understand the process for securing additional supports and services including behavior analysis, counseling, consultation with other professionals to develop a comprehensive individual support plan with positive, person-centered strategies.

Inclusion

The Agency will design their services and supports to be congruent with the norms of the community. Whenever possible, first consideration will be given to linking to established conventional resources before attempting to develop new ones that exclusively or predominantly serve only people with developmental disabilities.

The Agency will promote inclusion by establishing processes that assure that

- a. All persons served will be treated with dignity and respect.
- b. Assure that all recipients, including those who have advocates or guardians, have genuine opportunities for client choice and self-determination.
- c. Provide for a review of recipient outcomes
- d. Provide opportunities for representation on planning committees, work groups and agency service evaluation committees.
- e. Invite and encourage persons served to participate in community events and activities of their choice.

All policies and procedures of the Agency will

- support the principle of normalization through delivery of services and supports that address the social, cultural, and ethnic aspects of the life experience of the persons served.
- be trauma-informed
- ensure people are assisted to gain social integration skills
- support people to become more self-reliant and to maintain competitive, integrated employment in the labor markets of their communities, irrespective of their disabilities.
- support people to maintain permanent homes in residential neighborhoods in their communities
- develop informal and interpersonal community-based networks which promotes stable, permanent family and unpaid relationships.

Consumer Satisfaction Measures

The Agency will maintain a TCM satisfaction survey process for the individuals it serves to determine the individuals' level of satisfaction with the services provided. At least 30% of individuals, randomly chosen, receiving TCM services shall receive an annual satisfaction survey. The survey results shall be shared with the staff, management, Board of Directors and Kirksville Regional Office on an annual basis.

Crisis Response - Stop Light Report

To manage the collective caseload of the Agency, the management of the Targeted Case Management services will maintain a weekly Stop Light Report which prioritizes individuals at-risk in the following areas:

- Placement Status
- Family Supports
- Behavioral Supports
- Medical Status
- Provider Services
- Law Enforcement Involvement as a Victim or Alleged Perpetrator
- Sexual Misconduct as a Victim or Alleged Perpetrator
- Abuse/Neglect Concerns
- Psychiatric Treatment
- Hotlines with Children's Division, DHSS or others

Each week the Director of Service Coordination or designee will work with the Service Coordinators to designate the risk level of each individual served in each of the above areas. Tier 1 risk, or green light status, is an indicator of no concerns. Tier 2 risk, or yellow light status, is an indicator that there are some concerns which management should be aware of for future planning. Tier 3 risk, or red-light status, indicates that the individual is in crisis within the identified area and requires immediate crisis response attention from management.

Any individual deemed at Tier 2 or Tier 3 level of risk will have a comment included on the report with an overview of the situation. The report will be updated weekly and forwarded confidentially to the Kirksville Regional Office (KRO). The TCM Management Team will review the report with the staff of KRO in regularly scheduled monthly meetings to discuss potential resolution to the issues.

The TCM Management Team will utilize the weekly report to prioritize approaches to working with individuals identified at-risk.

Peer Reviews

On a regular basis, no less than monthly, the Director of Service Coordination or designee will facilitate an internal inter-professional peer review meeting with TCM staff of the Agency to address at-risk situations of any individuals who have been determined at-risk for more than 90 days.

Selected members of the staff may be asked to participate in these meetings based upon their individual knowledge, experience or background regarding the issues at-risk. The intent of the review meetings is to offer the Support Coordinators solutions and support with problem solving on behalf of the individual served.

Community Resources

The staff of the agency are expected to have universal knowledge and understanding of supports and resources available in the community at large.

The Agency will have representation at the System of Care interagency meetings held monthly. The participant will share information obtained in that meeting with the applicable staff of the Agency.

The Agency will maintain an online directory of available community supports and resources for staff to refer to while providing person-centered planning services and program planning.

The Agency will proactively collaborate with other community support groups and organizations to advocate in the best interests of the people that we serve, to promote inclusion of people with developmental disabilities within that collaboration and to link individuals within and outside of the Agency for assurance of best outcomes.

Work- Life Balance

Having a clear and separate work-life balance will facilitate the restoration staff needs from managing workloads, experiencing secondary trauma and other work-related stressors. Management will encourage staff to practice methods of self-care, such as limiting work hours and managing expectations of the organization. A healthy, balanced routine, both at work and in staff personal lives, will help to build resilience and positivity in working with others.

- Staff are expected to inform management if work-related stressors are interfering daily functioning.
- Staff will work a regular work week schedule, except on rare occasions, to meet the needs of individuals and families served. This includes evenings, weekends and holiday time periods off.
- Staff will adjust their work schedules to assure minimal hours of overtime worked.
- Staff will take regular paid time off (PTO) as earned through employee benefits.
- Staff will not work during PTO or leave.
 - Staff will not take computers or paperwork home or with them during PTO or leave.
 - Staff will not accept phone calls or read emails during PTO leave, except in emergencies when approved the management.

Technical Assistance – Audit Compliance

With regard to TCM Services provided in accordance with the Agency's contract with the State of Missouri Department of Mental Health, the Agency will work to assure full compliance with all contractual obligations of those services. Each employee is expected to have full knowledge and understanding of the terms of the contract for those services. Each employee is assigned their responsibilities associated with that compliance through their written job description. TCM Management staff and the Quality Assurance Specialist will assure all relevant staff are adequately trained. It is the goal of the Agency to demonstrate excellence in the delivery of those services, as evidenced by positive outcomes of DMH, MMAC or any other independent audits of the Agency's work. The Agency TCM Management staff will participate in the monthly Technical Assistance calls with the State to remain informed of current policy. The Agency will comply with the requirements of each quarterly and annual audit requests, coordinated by the Quality Assurance Specialist under the oversight of the Director of Service Coordination. The Executive Director will be immediately advised of any identified discrepancies, along with the plan for remediation. The TCM Management Team, including the Executive Director, will participate in the annual Audit Review meetings with the State representatives.

COMMUNITY LEARNING CENTER

Program Planning

Program Planning of the Community Learning Center will be based upon assessed of needs of citizens with intellectual and developmental disabilities and their families living in Adair County. Approaches to the assessment of needs will include

- Annual Assessment Survey
- Consumer advisement and participation, including from Self-Advocates and family work groups
- Community leadership input from work groups such as System of Care and other interagency groups
- Legislative input and collaboration with community Government & Legislative Affairs work groups
- Priorities of the Board of Directors as identified through the Agency's Strategic Planning process

The Executive Director of the Agency will oversee an annual community needs assessment process and share the outcomes of those surveys with the Community Engagement Specialist (CES). Working with the CES, programming needs will be identified and prioritized, to be shared during the Strategic Planning process with the Board. The Executive Director will oversee the development of the annual Strategic Plan each year prior to budget preparation for the coming Fiscal Year.

Following Board approval of the annual Strategic Plan, the CES will be tasked with the responsibility to coordinate and schedule specific programs to be offered through the Community Learning Center. The CES will coordinate and schedule needed programming, determining which program content will be provided by Agency staff and which programs require support from outside sources.

Monthly program calendars will be broadly distributed to Adair County citizens through USPS, email, mass media, social media and presentations to the community. The CES will develop data tracking systems to determine level of participation and level of satisfaction for the programs offered, to be reviewed by the Executive Director and Board periodically.

Community Engagement & Outreach

The Executive Director, the Community Engagement Specialist and the Community Engagement Board Committee will work together to identify strategies for Community Engagement and Outreach efforts of the Agency. The goals of this effort will be to

- To advocate for the citizens of Adair County with intellectual and developmental disabilities and assure their representation in community planning processes.
- To raise awareness of issues impacting people with developmental disabilities among the leadership of the community.
- To promote inclusion of citizens of Adair County throughout their community so that they may live, work and play with the same rights and opportunities as the general population.
- To advocate for equitable health care, education, employment and other community supports and services for citizens of Adair County with disabilities.

Specific methodologies to address these goals will be contained within the annual Strategic Plan of the Agency and may include event planning, interagency collaboratives, community work groups and inter-professional education.

Mandt Training

The Mandt System Copyright Agreement specifically states that certified instructors are authorized to share and teach the material to individuals covered by the agreement, and that certified instructors are not authorized to instruct this course, or any part of this course to anyone not covered by the liability insurance of the organization which sponsored the instructors' certification or their organization without prior written approval of the Mandt System.

It is the intention of the ACSDDDB to provide Mandt System training through the Learning Center to its own employees (permanent and temporary) and to the qualified staff of any DMH contracted provider of services to persons with developmental disabilities operating in Adair County.

Any other professionals or provider employees applying to be trained in Mandt through the Learning Center will need to be approved for the training by the Executive Director of ACSDDDB, and will need to provide payment for the training as required by the Mandt System, along with proof of liability insurance coverage and verified results of a current (within past 30 days) screening through the Missouri Family Safety Registry showing no convictions or pending actions related to abuse, neglect, or other crimes against persons. Costs of MOFCSR screenings are the responsibility of the applicants or their employers.

Parents and caretakers of persons with developmental disabilities served by the ACSDDDB may apply to be trained in the relational (first three chapters) portion of the Mandt System curriculum, as per the recommendation of the Mandt System Trainer Information and Guidelines. Parents of children with developmental disabilities may be trained in the skills involving physical restraint **ONLY** with the unanimous approval of the certified Learning Center Mandt trainers and the Executive Director.

The following stipulations must be met before a parent or caretaker relative may receive any level of Mandt System training through the Learning Center: The person to be trained

- is the parent or caretaker relative of an individual receiving service coordination through the ACSDDDB;
- has completed and provided results of a screening through the Missouri Family Safety Care Registry within the 30 days preceding the training date;
- has never been convicted of severe neglect, abuse (physical, sexual, or emotional), or any other physical crime against a person, and is not currently the subject of court proceedings and/or any allegations or investigations of possible abuse (physical, sexual or emotional), neglect or any other physical crime against a person;
- has been recommended for the specified level of Mandt System training by the support planning team of the individual served by the ACSDDDB, and the recommendation is documented in the individual's current Individual Support Plan.

The cost of the MOFCSR screening may be paid by the Adair County SB40 if approved as a support need for the individual by the ACSDDDB Utilization Review committee.