

CLEARWATER CURRENTS

Clearwater Council of Governments

Autumn 2010



FROM THE DESK OF THE EXECUTIVE DIRECTOR

I would like to take this opportunity to welcome a few people to the Clearwater COG. Lisa Guliano has been hired as the new Superintendent of the Erie County Board of Developmental Disabilities effective August 9, 2010. We are also pleased to have Deb Yenrick returning to the COG. She has come out of retirement to return as the Superintendent of the Sandusky County Board of DD. Later in this newsletter you will find a spotlight articles on them. Please join us in welcoming them.

The Clearwater COG Board has met to review the status of this last years goals and to develop goals for the coming year. One of the major achievements over the last year has to increase our efforts on training and education for independent providers. COG staff have regular sessions to work with people wanting to become providers. Check out our web-site for dates and times.

Over the next year, we have plans to implement the National Core Indicators in our nine member counties. Other goals include assisting counties and providers with the upcoming changes that will result from the DODD cost projection tools, revising our quality assurance survey process, increase training opportunities for county boards and providers, and beginning to provide payeeship services to name a few.

I hope you find useful information enclosed in this issue of Clearwater Currents. As always, please pass the newsletter along to your staff.

Think about it...

**WHAT YOU LEAVE BEHIND IS NOT
WHAT IS ENGRAVED IN STONE
MONUMENTS, BUT WHAT IS WOVEN
INTO THE LIVES OF OTHERS.**

--PERICLES

UPCOMING TRAININGS...

PATHS

**BE SURE TO CHECK THE COG'S
WEBPAGE FOR TRAINING TOPICS AND
DATES AS THEY BECOME AVAILABLE.**

www.clearwatercog.org

**WE WILL E-MAIL THE BROCHURES AS
WE GET TRAINING DETAILS
ORGANIZED.**

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Clearwater Council of Governments is committed to persons with developmental disabilities, enabling them to shape their own lives through community living choices.

TWO COG COUNTIES WELCOME NEW SUPERINTENDENTS



ERIE COUNTY BOARD OF DD has a new leader at their helm. Lisa Guliano earned her bachelor's degree in nursing from the University of Akron and a master's degree in BA, Executive Management, from Ashland University. She completed her superintendent's certification from the Ohio Department of Developmental Disabilities in 2006. Lisa comes to Erie County from Richland County, where she served as their Director of Finance.

"I didn't start out seeking a career in the developmental disabilities field, but my passion for the work developed after I began working at Richland County," Guliano said. "Now, I can hardly imagine working in any other field." Welcome Lisa!



Deb Yenrick has returned to oversee operations at the SANDUSKY COUNTY BOARD OF DD. Deb formerly served as Superintendent of SCBDD from January 2001 through June 2005, when she retired to care for her elderly grandmother. Welcome Back Deb!

OSDA HELPS TO NAME S.E.L.F. WAIVER

How do you name a waiver? DODD Director, John Martin, spearheaded the effort to name the new waiver at the 2010 Ohio Self Determination (OSDA) conference by encouraging all participants to brainstorm, discuss, refine and then vote on a name that would accurately and appropriately identify the waiver—and be meaningful to those for whom it has been developed. That is precisely what was accomplished.

The conference was a perfect time to educate participants about the waiver; consequently empowering and energizing their advocacy efforts.

Out of 164 name ideas initially brainstormed, the list was narrowed down to eight names. Then, following a "sales pitch" by self-advocates and other supporters of each of the eight ideas, a final vote was taken, yielding the selected name (suggested by our very own Ottawa County Group):

Self Empowered Life Funding
(SELF)

According to Amy Cantu, "The whole process was very interesting and exciting. Through many discussions and telling the group why, and what led to our suggestion, there was a vote to narrow the pool to eight suggestions. We were then given stickers and voted for our favorite two. As we sat in the back of the room it was very exciting to see many people choosing our suggestion."

The waiver will offer participant-direction of services and supports, and will embrace an individualized planning and budgeting approach.

The name could not have been more appropriate or descriptive.

This democratic involvement provided ample opportunities for individuals to express themselves, have fun, air questions and concerns, show enthusiasm for what the waiver might do for them personally, and be a part of something that had never been done before in Ohio's developmental disabilities community...take some of the bureaucracy out of waiver development, and empower the individuals ultimately to be served.

We are very proud of the people who represented Clearwater COG counties at the OSDA conference, which was a total of 105 people!

History was made that day!

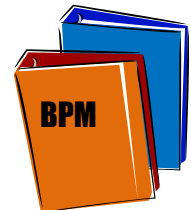
For more information about the waiver, visit the DODD website at <http://www.dodd.ohio.gov>

Many thanks to Amy Cantu for this mostly plagiarized article!

BEST PRACTICE MANUAL

In order to keep up with ever-changing technology, be cost efficient, and save a few trees, the Clearwater COG is offering the **Best Practice Manual** on our website. There is a link directly to it on our home page: www.clearwatercog.org. This manual is a great resource for SSAs and providers. It will always be kept up-to-date, which will eliminate hard copies having to be updated. The following is a list of the chapters included in the manual:

1. Initial Services
2. Who goes on a Waiver?
3. Initial Waiver enrollment
4. Choosing a Provider
5. Becoming a Provider
6. Assessments
7. Level of Care
8. Payment Authorization for Waiver Services (PAWS)
9. Ohio DODD Administrative Rules



10. Ohio DODD Contact Information
11. Developing the ISP and Making Revisions
12. Skill Developments
13. Adaptive and Assistive
Equipment/Environmental Modifications
14. Individual's Rights
15. Monitoring
16. Unusual Incidents/Major Unusual Incidents
(UI/MUI)
17. Behavior Supports
18. Notification of Individual Change in Status
(NICS)
19. Provider Billing
20. Room and Board
21. Adult Day Services Array
22. Glossary of Acronyms
23. Quality Assurance for Medication
Administration and Health Related Activities
24. Money Management

Check it out. We hope it is helpful.

WHO'S DRIVING?



One of the biggest ways that a Service and Support Administrator (SSA) can ensure that a person feels that they are driving their Individual Service Plan (ISP), is to let them be a part of organizing their annual meeting. This includes letting the individual choose where their meeting is held and who attends the meetings.

Some people may want to have the meeting at their favorite restaurant, while others may feel more comfortable by having the meeting in their home. Others may choose to have the meetings at the County Board or workshop for convenience.

Also, remember that the individual is entitled to invite an advocate or friend(s) or any person(s) directly providing services or activities to him to participate in the development of the IP, per rule: 5123:2-3-17.

The SSA/Team should encourage individuals to "run" their meeting. If the person is in a comfortable environment and surrounded by familiar people they may be more inclined to speak up about what they want and what they don't want and may play a more active role in the development of their plan.

MSS & COGNOS REPORTS

With the implementation of the new Medicaid Services System (MSS), the Ohio Department of DD (DODD) is also updating their COGNOS reports. MSS is the system that will house the cost projection too. (CPT). There are going to be three sections of reports under the MSS reports:

1. **Waiver Funding and Rates Reports**
2. **Schedule Reports**
3. **Utilization Reports**

DODD is hoping to finalize these reports by the end of the year. Then, they hope to develop training on the COGNOS reports.

The **Waiver Funding and Rate Reports** will have a report that lists all waiver services codes and the rate for a specific county. Two reports that show the individual's ODDP and AAI scores, respectively. There will be another report that will list all individuals with their calendar year costs by service type (HPC, HPC Transportation, Day Services, Non-Medical Transportation, etc.) in a table format. I have requested the same type of report by fiscal year. Finally, there will be a report that lists individual's costs by fiscal year in a format similar to the current COGNOS reports.

The **Schedule Reports** will have a report for the HPC staffing pattern with a provider filter, a report for the Day Services calendar and a report showing the unscheduled time authorized.

The **Utilization Reports** will have a utilization report that will sort by provider and a report that will sort by county. There will be detail and summary type reports. These reports will be able to filter on the percentage through a span. For example, a report could show all individuals at least 50% through their spans or all individuals between 30% and 80% through their spans. These reports will also be able to filter on the percentage of overage. For example, a report could show all individuals that are projected to go over the authorized dollar amount if they continue to utilize their services as they have so far through their span. One of the best changes in these reports is that the billed claims will show up on the utilization reports, even if the provider has not been paid for them yet. This provides a more real time look at the utilization. The final report in this section is a provider service report. This report will show all individuals that use a provider X for ADL, for example.



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MONITORING TO ENSURE AN INDIVIDUAL RECEIVES ALL OF THEIR SERVICES

The Service & Support Administrator (SSA) has the responsibility of ensuring that all of the services identified in the assessments are addressed in the Individual Support Plan (ISP). The ISP should be one plan that encompasses all facets of the individual's life. Therefore, all of the services that the individual needs, including services at work, school, residential and nursing, are to be included in the ISP.

When developing the ISP, the individual, SSA, family, daily representative, guardian and provider, should all have input and work as a team. The plan should be written clearly and in such a way that anyone not knowing the individual would be able to pick up the ISP and deliver all of the services that are addressed therein. It is important to ensure that the tasks required to implement the plan are explained in sufficient detail, allowing paid staff to correctly assist the individual. The ISP is a roadmap for staff to follow in order to do their jobs when providing services and supports.

The Service and Support Administration Rule states that the SSA shall monitor the implementation of the individual's ISP. The purpose of monitoring is to verify:

- An individual's health, safety, and welfare
- Consistent implementation of services
- Achievement of the desired outcomes
- That services received are those reflected in the ISP
- Individual's satisfaction
- Identify whether changes are needed to the ISP

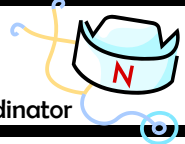
Monitoring creates the opportunity to ensure that the services identified in the ISP are being provided as written. Monitoring is to identify potential problem areas, work with providers to solve issues and ensure individuals are receiving needed services and supports.

Providers and SSA's should compare documentation sheets to the ISP to see if services are being provided at correct frequencies as stated in ISP.

NURSE'S CORNER

Lisa Arebaugh, RN

QA RN Coordinator



Helpful Ways to Maintain Your Medical Information

Your medical information is important to the professionals taking care of you in an emergency. It is important to be prepared ahead of time. The following are ways to keep your personal medical information handy for when you need it:

1. **USB Device** – there is a new product that helps you keep your medical information on a USB device that is attached to a key ring or chain. The device can be downloaded to a database online or the information can be accessed through an emergency section of the device.
2. **Medic Tag USB Device** – this USB device helps maintain your medical information but does not require the internet.
3. **Personal Medical Jewelry** – with information engraved on the jewelry this can alert medical personal to important conditions or allergies.
4. **Wallet Card** – this card can be kept in your purse or wallet. Information that should be included on the card is: name, birth date, drug or food allergies, prescription medications, medical conditions, and emergency contacts.
5. **Putting your Phone on ICE** – ICE stands for "In Case of Emergency" placing this by a number in your cell phone will alert medical or law enforcement personnel that there is an emergency contact.
6. **Vial of Life** – this provides a form to fill out your medical information. The form is then put in the baggie provided and then placed on the refrigerator. Other helpful information that can be placed in this baggie is a recent picture, DNR status and a Living Will.

PRESSURE SORES Causes, Symptoms, Diagnosis, Treatment, And Prevention

Pressure sores (also known as bedsores, decubitus ulcers, or pressure ulcers) are areas of skin damage, resulting from a lack of blood flow due to pressure. Pressure sores can occur in people of any age who are bedbound, chair bound, or unable to reposition themselves. However, the likelihood of pressure

sores is more common among older people. Pressure sores can be life threatening if they are untreated or if an underlying health condition prevents them from healing.

The causes that contribute to the development of pressure sores include pressure, friction, moisture, and inadequate nutrition. Pressure on skin causes a reduced or lack of blood flow to the skin. If the blood flow is cut off for more than 1 or 2 hours, the skin dies. Friction can lead to or worsen pressure sores. This usually occurs when someone is repeatedly pulled across a bed causing friction to the skin. Moisture, in the form of urine, feces, or perspiration can also lead to the development or worsening of pressure sores. Lastly, inadequate nutrition increases the risk of developing pressure sores due to the lack of body fat to pad the skin. Common sites for pressure sores include elbows, ankles, heels, buttocks, tailbone and lower back.

A diagnosis of pressure sores is usually given by a physical examination. During the examination, a medical professional measures the size and depth of the sore to determine its stage and to plan treatment. If the damage is severe, a bone scan is usually conducted to determine if the infection has spread from the sore to the bone.

The treatment of pressure sores is much more difficult than preventing one. The main goals of treatment include relieving the pressure, keeping the sores clean and infection-free, and providing adequate nutrition. In the earliest stage, a transparent film is used to cover the sore. In later stages, a physician may have to remove dead tissue with a scalpel or chemical solution. Deep pressure sores are very difficult to treat. Sometimes they require surgical skin grafts and antibiotic therapy.

Prevention is the best strategy for dealing with pressure sores. Common strategies include:

- Meticulous attention by caregivers
- Close, daily inspections of all areas of skin
- Frequent shifting or repositioning (at least every 2 hours)
- Ensuring clothes are dry and moisture free
- Frequent bed sheet changes
- Utilization of non-caking body powder
- Bony projections (heels and elbows) padded with soft material
- Appropriate mattresses and chair pads that reduce pressure

Remember, it is much easier to prevent pressure sores than to treat them. When working with people who are prone to develop pressure sores, monitor them closely for any signs of skin discoloration or breakdown. If either of these signs are noted, seek

medical treatment immediately as the condition will only worsen.

UNTIMELY MEDICAL ATTENTION EQUALS NEGLECT

Neglect often results when an individual does not get prompt medical attention for an injury. There have been several Major Unusual Incidents (MUI) filed for injuries that did not get timely medical care. One of the trends seen through investigation of MUI's, is that the provider did not see any evidence of an injury and medical attention was delayed. For example, an individual wakes up in the morning and complains of pain to the wrist. The individual reports that she is not sure what happened, but it hurts. The provider looks it over and sees no swelling, bruising, and/or redness. As a result, no treatment is given and the individual goes to day habilitation. The individual does not complain again until returning home and again complains of pain in the wrist. There is still no swelling, bruising or redness and the individual goes to bed. The next morning, the individual wakes up with significant swelling to the hand, wrist and arm. At that time, the individual is taken to the hospital for medical attention and it is discovered that the individual has a fractured wrist. It was also discovered that two days prior, the individual fell off her chair at day habilitation. There was an incident report but no follow up because the individual did not complain of any pain at that time.

There are several problems with this type of incident:

1. The individual made two complaints of pain to the provider and no medical attention was given.
2. The individual was also given no medical follow up after the fall at day habilitation.

An individual may not remember how or why something hurts. As a provider, we need to take time to look into complaints and incidents more carefully.

Communication is very important between day habilitation and residential providers. There may not always be an incident report to clue us in to the cause of an injury. An individual could fall or hurt themselves without anyone knowing. Often times, an individual is not able to express the level of pain due to a high tolerance or inability to communicate.

Our number one priority is to ensure health and safety. It is very important to take complaints and signs of pain and discomfort seriously. There are not always going to be immediate signs of an injury. If you are not sure of a possible injury, take the steps to give the individual medical attention. This may not

always mean taking the individual to a hospital. Contact a program nurse and have an assessment completed and/or contact the individual's physician and inquire of what steps to take.

When in doubt, always seek medical attention immediately. When an individual is hurt, it is a duty of ours as providers of service to ensure that prompt and timely medical attention is given. Waiting until the next day is not timely and will often be investigated for neglect.

VOCATIONAL HABILITATION

Goodwill Industries of Erie, Huron, Ottawa, and Sandusky Counties, Inc.

Looking for a vocational alternative to Day Services? The Sandusky Bay Area Goodwill Industries, Inc. (located in downtown Sandusky, OH) offers vocational habilitation services to adults from the following counties: Erie, Huron, Ottawa and Sandusky.



Their vocational services focus on the transition to employment. I was recently given a tour of their amazing facility by Denna Koser,

Workforce Development Coordinator. The Sandusky Bay Area Goodwill Industries, Inc. was quite impressive and offered more than just piece work to the individual's in attendance.

The following are just a sample of the different types of services that are offered on site: data entry, billing, making fire starters for campfires, assistance with interviewing and creating resumes for employment opportunities, computer training programs, running an e-bay shop, making rags from donated clothes for businesses and packaging donated clothes in preparation for sending off to third world countries. Next time you are in Sandusky you should stop by and check out this impressive operation!

WHAT'S COOKIN'?

No time to cook? Here are some easy and delicious recipes that will get you in and out of the kitchen in no time! Bon Appétit!

SOUPER SIMPLE MAC & CHEESE

Ingredients:

1 can Cheddar Cheese soup ½ soup can of water
1 cup corkscrew pasta ½ soup can of milk

Directions:

1. Heat the soup, milk and water in a 3-quart saucepan over medium heat to a boil.
2. Stir in the pasta, reduce heat to low. Cook for 20 minutes or until pasta is tender, stirring often.

Serves 4 and ready in 30 minutes. Tastes just like homemade!

3 CHEESE PASTA BAKE

Ingredients:

1 can of cream of mushroom soup
1 cup of milk
1 8oz pkg. of shredded , two-cheese blend
4 cups of cooked corkscrew pasta
1/3 cup of Parmesan cheese

Directions:

1. Mix soup, cheeses and milk in 1 ½ qt. casserole. Stir in pasta.
2. Bake at 400 degrees for 20 minutes.

Serves 4 and ready in 25 minutes. Great, hearty meal.



SWEET PARTY MIX

Ingredients:

1 pkg. crispy corn and rice cereal
¾ cup butter
5 oz. slivered almonds

¾ cup dark corn syrup
6 oz. toasted, chopped pecans

1 ½ cups light brown sugar

Directions:

1. Preheat oven to 250 degrees. Lightly grease a large roasting pan.
2. In a large bowl, mix cereal, almonds, and pecans.
3. In a medium saucepan over medium heat, melt the butter and mix corn syrup and brown sugar. Pour the mixture over the cereal and nuts.
4. Stir and shake to coat the nuts and the cereal.
5. Pour the mixture onto the roasting pan. Cook one hour, stirring every 15 minutes. Cool on wax paper and store in an airtight container.



SSA BASIC TRAINING HELD

Clearwater offers SSA Basic training to new SSAs at least once per year. Our most recent training was held on July 15th for eleven new SSAs. The basic training included:

- What is the COG?
- Role of the SSA
- Group Facilitation
- Supported Living vs. Waivers
- Waiver Reimbursement System
- Assessments
- ISP Development
- Appendix A & B
- Monitoring
- Due Process



Welcome to your SSA position and the Clearwater COG, to the following staff that attended:

Kelly Hlavin	Erie County
Jessica Smith	Erie County
Felicia Zendejas	Erie County
DeMar Moore	Erie County
Jessica Gedert	Sandusky County
Duana Coleman	Crawford County
Keith Bradley	Crawford County
Katie Bemis	Huron County
Rachel Chaffin	Huron County
Wes Pinney	Marion County
Jessica Clements	Marion County

What a great group we had at the training!

SO YOU'RE AN INDEPENDENT PROVIDER

Since January 1, 2010, Clearwater Council of Governments has trained and assisted 23 people in becoming Independent Providers for Home and Community Based Waiver Services. Independent Providers are often the provider of choice for individuals enrolled on Level One waivers. The following information is a basic guideline of what the Level I waiver is and what it offers.

Level One Waiver Benefits & Limitations

The following benefits, when combined, cannot exceed the maximum of \$5,000 in twelve month

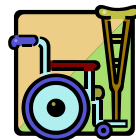
increments that begin with the individual's enrollment date.

- Homemaker / personal care-Routine
- Homemaker / personal care-On-site/on-call
- Institutional respite-ICFMR
- Institutional respite-ODMR/DD Licensed Facility
- Informal respite money
- Transportation



The following benefits are subject to a maximum of \$6,000 effective within a period of three years beginning with the individual's initial date of enrollment on the waiver:

- Environmental accessibility adaptations--\$2,000 (May exceed limit w/prior authorization)
- Personal emergency response systems--\$2,000
- Specialized medical adaptive / assistive equipment and supplies--\$2,000



Environmental accessibility adaptations may exceed the two thousand dollar limitation, provided that prior authorization is obtained, and the combined total of these three services does not exceed six thousand dollars. The individual's usage of this benefit shall be evaluated at least every 12 months through the ISP process in order to consider the remaining value of the benefit.

The following benefit is subject to a maximum of \$8,000 effective within a period of three years beginning with the individual's initial date of enrollment on the waiver and continuing during each subsequent three (3) year period. The individual's usage of this benefit shall be evaluated at least every 12 months through the ISP process in order to consider the remaining value of the benefit.

- Emergency assistance--\$8,000

*Adult Day Supports, Non-Medical Transportation, and Supported Employment benefits are not included in the \$5,000 limit of the Level One Waiver.

Level One Waiver ISP Development & Requirements

- The ISP must be developed with input from the individual and the SSA. The individual may request input or participation in the ISP meeting from others if they so choose.
- The ISP shall list the Level One waiver services and the non-waiver services, regardless of funding source, that are necessary to ensure the individual's health and welfare.

Service and Support Administrators should keep in mind that when enrolling an individual for informal respite on the Level One Waiver, there must be a family member that is able and willing to accept responsibility for training and monitoring health management activities, behavior support, major unusual incident reporting and other activities required to meet the needs identified in the ISP.



**THE CLEARWATER COG
WOULD LIKE TO TAKE
THIS OPPORTUNITY TO
WISH YOU A VERY HAPPY
HOLIDAY SEASON.**



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