

# Support Monitoring Guidelines

ENVIRONMENT / SAFETY	EXAMPLES
<p><b>Comfort:</b> Cleanliness Home Adaptations Home Maintenance Odor of Home</p>	<p><b>Cleanliness:</b> There is no dirt, insects, rodents, pests, or improperly stored trash. *Unclean is defined as anything that may represent a health or safety threat for the people living there. The person appears comfortable in their environment. Soap, towels, &amp; toilet paper are present in the bathroom(s) and kitchen for use by people served and staff.</p> <p><b>Home Adaptations:</b> The home/facility is adapted for the person, no hazardous surfaces. Necessary and required adaptations/modifications for people's safety are in the home. The person can get out in case of an emergency.</p> <p><b>Home Maintenance:</b> The home/facility is in good repair indoors and out. No broken windows, doors, walls, plumbing, electrical, etc. All appliances are in working order; all steps and railings are in good condition; all furniture is clean and in good repair, with no sharp corners. Yard is neat and clean.</p> <p><b>Odor of Home:</b> Home is free of unusual odors (i.e., urine, feces, spoiled food, natural gas, etc).</p>
<p><b>Security - Facilities</b> Emergency Equipment Fire Safety Temperature – Water Toxic Chemicals Vehicle Safety</p>	<p><b>Emergency Equipment:</b> Are all smoke detectors in the home present and operational? Fire extinguishers are located on each floor of the home with current tags? Check for last inspection date. If there is a need for a CO detector, is it present and operational? If there is a need for adapted alarms, are they working? Is there a basic first aid kit in the home? Smoke detectors, fire extinguishers and carbon monoxide detectors are present.</p> <p><b>Fire safety:</b> Can the people served safely evacuate the home in case of an emergency such as a fire? Have any individualized supports been identified for the person in order to evacuate the home?</p> <p><b>Temperature-Water:</b> Room temperature is at a comfortable range of 68-78 degrees. What is temperature on thermostat? Water temperatures are not to exceed 120 degrees Fahrenheit at the point of use unless otherwise stated in individual support plans of everyone in the home. Tub/Shower(s) ____; Kitchen sink(s)____; Bathroom sink(s)_____.</p> <p><b>Toxic chemicals:</b> Are household chemicals stored appropriately?</p> <p><b>Vehicle Safety:</b> The agency vehicle appears to be in good repair and has current plates.</p>
<p><b>Security -Processes:</b> Documentation Emergency Drills Policy/Procedures Staff Training</p>	<p><b>Documentation:</b> Review drills completed and the outcomes.</p> <p><b>Emergency Drills:</b> What are the emergency procedures for the home? Drills have been completed on all shifts (daytime, evening, and nighttime). Check drill documentation and observe for items in working order.</p> <p><b>Policy/Procedure:</b> What is the procedure for after-hours emergencies (number available 24/7/365)?</p> <p><b>Staff Training:</b> Does staff know what to do in case of an emergency?</p>

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HEALTH	EXAMPLES
<p><b>Health - Attaining Wellness</b>                      Appearance/Hygiene                      Follow-up Care                      Nutrition                      Weight</p>	<p><b><u>Appearance/Hygiene:</u></b> The person is clean and well kept; clothes and shoes clean, in good condition, and in the correct sizes. No evidence of bruising or unattended skin conditions. General well-being: Talk to the person and staff; ask how the person is feeling today. Any recent injuries or illness? Has the person been to the physician and if so, review the documentation.</p> <p><b><u>Follow-up Care:</u></b> Have follow-up treatments or health care needs been completed and/or scheduled?</p> <p><b><u>Nutrition:</u></b> The staff and the person are aware of any special dietary needs. If so, are there physician's orders? Is staff trained on the diet? Review documentation. Ask the person what s/he had for lunch, dinner, etc.; ask about grocery shopping. Is the person eating a well balanced diet for their individual needs? What are the contents of the refrigerator and /or pantry? Is there evidence of adequate food present? Is food stored properly? Are the cabinets and refrigerator clean?</p> <p><b><u>Weight:</u></b> Observe and ask questions if there seems to be a weight change. Review documentation as needed.</p>
<p><b>Health - Preventive Practices</b>                      Annual Exams                      Dental Care                      Documentation                      Immunizations                      Labs Screenings</p>	<p><b><u>Annual Exams:</u></b> When did the person have his/her last physical? What specialists does the person see? When? How often? Any hospitalizations?</p> <p><b><u>Dental Care:</u></b> Group Homes/ISL's - there is evidence of regular checkups and cleaning, at least on an annual basis, as well as follow-up visits as determined by the dentist.</p> <p><b><u>Documentation:</u></b> Health information is located in records.</p> <p><b><u>Immunizations:</u></b> Are immunizations complete for the person's situation and age?</p> <p><b><u>Lab Screenings:</u></b> Is lab work current? What about dental care? Vision care? Has s/he seen the physician as recommended (per consults, physician order, etc)? Physician's orders are present, signed and current. Documentation is available verifying that the recommendations and orders of the physician are being followed; special labs &amp;/or exams have been completed. Group Homes/ISLs - have an annual TB test, unless otherwise contraindicated, and Hepatitis B vaccination.</p>
<p><b>Health - Procedures</b>                      Adaptive Equipment                      Documentation                      Health Policy/Procedure                      Medication                      Staff Training</p>	<p><b><u>Adaptive Equipment:</u></b> All adaptive, corrective, mobility, orthotic, and/or prosthetic equipment needed by the person is in the home. If there is an identified need for an alternative communication system, is it present? Are supports needed for communication with person available at all times? Equipment is clean, in good repair and is being used as prescribed. The person and staff know how to use the equipment and it is the right equipment. The physician orders are current for the equipment.</p> <p><b><u>Documentation:</u></b> Community RN reports are current; review &amp; sign CRN monthly notes during each onsite visit.</p> <p><b><u>Health Policy/Procedure:</u></b> Is there a system in place to ensure medical appointments are made, kept, and followed through with? Are MD's orders signed and dated according to residential agency's policy?</p> <p><b><u>Medication:</u></b> MARs are signed and properly documented /no blanks as well as</p>

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	<p>matches physician orders (does not apply to day supports if no medication is given/MD's orders). All MARs for each individual are reviewed for the past 30 days/since the last visit. Medications are present. Look at packaging; assure no pills have been missed. The medications are locked &amp; secure. If narcotic medications are present, are they appropriately stored and counted? Any changes in medications? Does staff know what medications the person is currently taking? Is there information about medications and their side effects located in the home? Does the person self medicate? If so, how is this monitored? Does staff utilize the proper procedures when administering medications? If at all possible, observe staff administering medications.</p> <p><b>Staff training:</b> Through interaction with staff, determine if knowledgeable about CPR, First Aid, Med Aide, CRN delegated tasks, etc.</p>
<b>MONEY</b>	<b>EXAMPLES</b> ( <i>applies to settings where providers have responsibility of safeguarding personal funds</i> )
<p><b>Money - Access to Funds</b> NAFS/Personal Account Policy/Procedures Property Spending Money</p>	<p><b>NAFS/Personal Account:</b> If any purchases were made from the NAFS account, the person or staff can show where the item is and that prior approval was given for purchases over \$100. Are receipts available?</p> <p><b>Policy/Procedures:</b> What is the procedure for person accessing their funds? Who has access to the person's funds besides the person?</p> <p><b>Property:</b> The person, or staff, can show where recently purchased items are located.</p> <p><b>Spending Money:</b> Person and staff know where the money is kept. Person knows, or has a sense of, how much money s/he has access to. How does the person have input into how their money is spent?</p>
<p><b>Money - Accounting Practices</b> Documentation of Receipts Payment of Bills</p>	<p><b>Documentation of Receipts:</b> The balance is appropriate for the point in the month when monitoring is conducted. The money is safeguarded. Financial records on personal spending accounts are in the home available for review. Expenditures from the personal spending accounts are itemized showing the date, description of items purchased, and amount spent.</p> <p><b>Payment of Bills:</b> If financial records are available in the home is there evidence bills are being paid on time?</p>
<b>RIGHTS</b>	<b>EXAMPLES</b>
<p><b>Rights - Decision Making</b> Choice Control Rules/Restrictions Staff Training</p>	<p><b>Choice/Control:</b> Observe. The person feels as if this is his/her home. The home is reflective of person's personality. Prompts only: Does the person answer his/her own door and/or telephone (if ability is present)? Have access to all areas of his/her home? Have choice in when, where, and what s/he eats on a daily basis? Choose who visits in their home? Acknowledge that they understand they have the right to talk with others in private? Have privacy for daily activities that are typically private (dressing, bathroom, etc.)? Choose what to buy with own money? Decide what to do every day? Frequently ask staff for permission?</p> <p><b>Rules/Restrictions:</b> If there is evidence of, or reports of, any "house "rules? Assure that the rules were made by the person served or that they represent appropriate safety practices. If there are any restrictions, they are documented in the plans of everyone affected. Examples of restrictions would include places in the home that are off-limits (other than bedrooms); i.e., refrigerator; alarms on doors, etc. If there have been any rights restricted, were they approved by the agency's human rights process? If there are restrictions in the person's plan, the person gives</p>

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	<p>evidence of knowing what it would take to have the right restored. What is in evidence that efforts are being made to teach the person how to have their rights restored?</p> <p><b>Staff Training:</b> How do staff ensure rights are protected (right to privacy, free speech, decision making, etc)? How do staff ensure the people have input into their daily routine, schedule, and activities.</p>
<p><b>Rights - Documentation</b> Annual Rights Notification</p>	<p><b>Documentation:</b> Signed notification form located in person’s file.</p>
<p><b>Rights - Self Advocacy</b> Policy/Procedures Reporting Incidents of Complaints Response to Communication</p>	<p><b>Policy/Procedures:</b> Are staff teaching the person self-advocacy skills? Do individuals feel they have the same rights as everyone else? Ask people what process is in place if they feel that their rights have been violated?</p> <p><b>Reporting Incidents of Complaints:</b> Do people understand what is meant by “inappropriate touching”? How do people know to whom to report incidents that upset or disturb them?</p> <p><b>Response to Communication:</b> Does the person receive a response when talking/gesturing/signing/dynovox etc., to staff? How is the person supported to use their preferred means of communication?</p>
<p><b>SERVICES or STAFF</b></p>	<p><b>EXAMPLES</b></p>
<p><b>Services or Staff - Individual Support Plan (ISP) Implementation</b> Action Plan Documentation of Progress Functional Assessment ISP Present Legal Issues Personal Profile Required Reports Services Authorized Staff Back-Up Plan</p>	<p><b>Action Plan:</b> Staff are teaching and mentoring people according to the individual support plan. The supports authorized in the plan are being provided and the plan is present. When, where and by whom is documented. Is the current support plan in the person’s record? Is there evidence in the home that outcomes are being implemented?</p> <p><b>Documentation of Progress:</b> The documentation is present and meaningful. Daily activity records are thorough; completely describe the activities &amp; supports the person participated in. Is the person being supported to participate in a variety of activities outside the home?</p> <p><b>Functional Assessment:</b> Available in the person’s record and followed.</p> <p><b>ISP Present:</b> Is the ISP present at the site of support delivery? Is the ISP signed?</p> <p><b>Legal Issues:</b> If the person has a guardian, has a signature for authorization been obtained prior to implementation of supports? Does guardianship need to be explored?</p> <p><b>Personal Profile:</b> The profile is complete, up-to-date, and available.</p> <p><b>Required Reports</b> monthly reviews, as described in the provider contract, are submitted monthly. Other reports necessary are complete and accurate.</p> <p><b>Services Authorized:</b> Is there evidence/reason to believe that supports were received in accordance with funding provided as demonstrated on the budget? Observation/staff/daily log notes are reviewed for each individual a minimum of five (5) days and a review of more days based on support coordinator professional judgment. Is there evidence of adequate professional supervision and community RN involvement and oversight?</p>

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	<p><b>Staff Back-Up Plan:</b> Is a back-up plan in place in case there is a disruption in supports? Is the back-up plan realistic?</p>
<p><b>Services or Staff - Management</b>          Designated Rep. Issues          Log Note          Management Issues          Policy/Procedures          Quality Assurance</p>	<p><b>Designated Representative Issues:</b> Designated Representative not completing expected duties of position. Are timelines being met? Is the person available to the family?</p> <p><b>Log Note:</b> Log notes are in place, accurate, and representative of supports taking place relative to the person's needs.</p> <p><b>Management Issues:</b> Staffing is appropriate for the setting and there is available staff coverage when needed. Degreed professional management/QDDP and CRN is available. EMTs, as described in <b>4.070 - Event Report Processing</b>, and staff are focused on their jobs.</p> <p><b>Policy/Procedures:</b> How is staffing ratio met if someone calls in? Director, degreed professional management/QDDP and CRN availability for questions and emergencies. SDS – written emergency backup plan posted for employees.</p> <p><b>Quality Assurance:</b> Systems are in place and enacted to assure procedures are completed as indicated and/or needed.</p>
<p><b>Services or Staff - Qualified Staff</b>          Missouri Quality Outcomes          Positive Behavior Support          Training on ISP</p>	<p><b>Missouri Quality Outcomes:</b> The use of Missouri Quality Outcomes is evident.</p> <ol style="list-style-type: none"> <li>1. Outcomes for People             <ul style="list-style-type: none"> <li>• People belong to their community</li> <li>• People have a variety of personal relationships</li> <li>• People have valued roles in their family and in their community</li> <li>• People are connected with their past</li> <li>• People's communication is understood and receives a response</li> <li>• People are provided behavioral supports in positive ways</li> <li>• People are provided support in a manner that creates a positive image</li> <li>• People express their own personal identity</li> <li>• People have control of their daily lives</li> <li>• People have the opportunity to advocate for themselves, for others, and for causes they believe in</li> <li>• People's plans reflect how they want to live in their lives, the supports they want, and how they want them provided</li> <li>• People live and die with dignity</li> <li>• People feel safe and experience emotional well being</li> <li>• People are supported to attain physical wellness</li> <li>• People are actively supported throughout the process of making major lifestyle changes</li> <li>• People are supported in managing their home</li> </ul> </li> <li>2. Outcomes for Agencies             <ul style="list-style-type: none"> <li>• Action at all levels of the organization is consistent with a shared mission which is developed in response to the goals and aspirations of the people supported</li> <li>• The agency initiates and maintains positive working relationships with other organizations within and outside the support delivery system</li> <li>• The agency empowers staff to meet people's needs</li> </ul> </li> </ol>

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	<ul style="list-style-type: none"> <li>• The agency regularly evaluates its success in meeting people's needs</li> </ul> <p><b>Positive Behavior Support:</b> The use of Positive Behavior Supports is evident. Individuals are given valid choices. There is no evidence of punishment being used.</p> <p><b>Training on ISP:</b> Staff is knowledgeable of the ISP and there is no evidence of the ISP being implemented incorrectly.</p>
<p><b>Services or Staff - Staff Empowerment</b>            Staff Communication            Staffing Ratio            Staff Sensitivity/Interaction</p>	<p><b>Staff Communication:</b> Staff demonstrates they understand and respond to the person's communication style. Has staff been trained on how to communicate with people?</p> <p><b>Staffing Ratio:</b> Is the home staffed according to the individual's needs and current budget? How was the home staffed during monitoring appt.? Are staffing ratios being met?</p> <p><b>Staff Sensitivity/Interaction:</b> Observe! Staff interactions are respectful, attentive and positive. Was the person engaged in meaningful activities during time of visit? Staff are not taking care of personal business while at work (errands, children at work, phone calls, etc.)</p>