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September 2019  
 Volume 10, Issue 5

## Missouri as a Model Employer Initiative

On September 9, 2019, Governor Mike Parson signed Executive Order 19-16 announcing the commencement of the Missouri as a Model Employer initiative.

The Model Employer classification is an emerging trend supported by the federal Department of Labor’s Office of Disability Employment Policy (ODEP) to help more people with disabilities obtain competitive, integrated employment. The Department of Mental Health has received assistance from ODEP to assist with implementing this initiative in Missouri.

“Being a Model Employer is critical to developing and maintaining a talented state workforce that reflects the rich diversity of Missourians,” Governor Parson said. “We are committed to doing everything we can, both through this initiative and other efforts, to eliminate barriers to employment and expand job offers to individuals of all abilities.”

To view Executive Order 19-16, [click here](#). The press release announcing the executive order can be viewed at: [Missouri as a Model Employer](#).



### MISSOURI AS A MODEL EMPLOYER

\*\*\* Governor of Missouri \*\*\*  
 MICHAEL L. PARSON

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# MISSOURI *as a* MODEL EMPLOYER TALENT SHOWCASE



WHEN: **OCTOBER 10, 2019**

WHERE: **MISSOURI STATE CAPITOL  
201 W. CAPITOL AVENUE  
3RD FLOOR ROTUNDA  
JEFFERSON CITY, MO 65101**

JOB SEEKERS

CHECK-IN TIME: **10:00 A.M. - 12:30 P.M.**

SHOWCASE TIME: **1:00 P.M. - 3:00 P.M.**

TO REGISTER: <https://marf.cc/missouri-talent-showcase-career-fair/>

The Missouri as a Model Employer Talent Showcase is a reverse career fair that provides individuals with a physical, mental health, or cognitive disability an opportunity to showcase their achievements and talents to potential employers through display or presentation. Showcasing samples of work often leads to richer conversations between job seekers with disabilities and employers. State agencies and community employers will have an opportunity to circulate among the booths, introduce themselves, and learn about the skills and abilities that may meet their hiring needs.

For More Information: [talentshowcase@oa.mo.gov](mailto:talentshowcase@oa.mo.gov)

## ICAN Missouri Foundation

ICAN Missouri Foundation is an agency located in Moberly, MO. I have had the privilege and honor of working with this agency for a year now and the level of growth and commitment they have to providing the highest quality of care to their individuals is admirable. This

is a team of people who show they care in not just their words and policies, but through their actions as well. ICAN consistently provides their clients with activities and choices to help improve their quality of life. It is remarkable to work with an agency such as ICAN that actively teaches their clients skills such as functional communication training, cooking, community safety, and the arts. This is an agency that greets you with a warm smile in an open, inviting environment, every time you walk through the door.

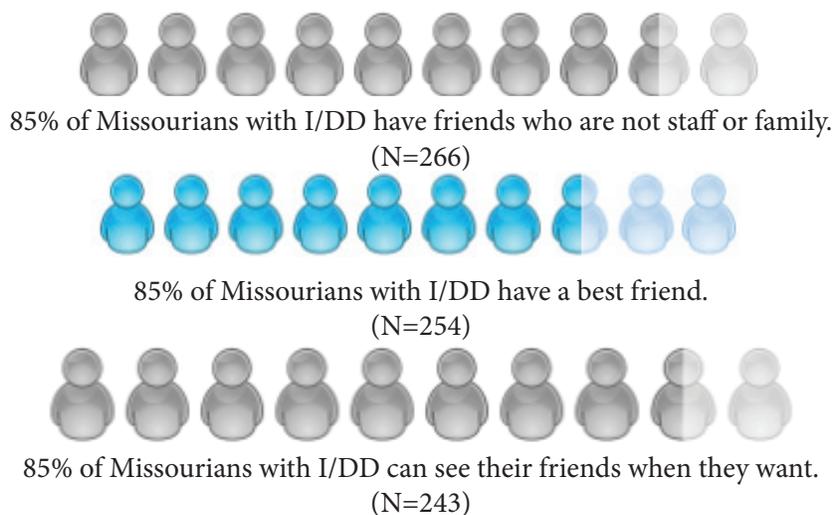
I wanted to take this opportunity to give this agency recognition for the all-around stellar work they do and to highlight the hard work they invest in the Tiered Supports process. Being a Tiered Agency is a commitment, and it is a commitment that this agency has not shied away from even when it was difficult. In less than four months, this agency has made incredible strides with their agency systems. For instance, they have recommitted themselves to data collection in such a way that they have been surpassing their data collection goals. ICAN has even developed and implemented an agency wide staff reinforcement system based on their agency life values. I am immensely proud of their progress and cannot wait to see what the future holds for this gold star agency!

–Submitted by Kalen Crawford, Agency Tiered Supports Consultant



Pictured left to right: Hayley Dubbert, Enola Bell, Dawn Perkins, Stephanie Reische, Robin Stockdall, and Brittany Esry

### Missouri Data on Relationships (from the 2017-2018 NCI Adult In-Person Survey)



The infographic above is based on relationship data from the 2017-2018 National Core Indicators Adult In-Person Survey, which is a face-to-face interview with adults (age 18+) who receive services from the Division of Developmental Disabilities.

To view the full report, please visit: <https://www.nationalcoreindicators.org/resources/reports/>.



## HEALTHY LIVING OBSERVE! DECIDE! ACT!

### MEDICATION ERRORS

Medication Errors: by definition, the National Coordinating Council for Medication Error Reporting and Prevention (NCCMERP) says that “a medication error is any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer. Such events may be related to professional practice, health care products, procedures, and systems, including prescribing, order communication, product labeling, packaging, and nomenclature, compounding, dispensing, distribution, administration, education, monitoring, and use.” Simply put, a medication error is when a medication is not given to the person whom it was intended, how it was intended.

### OBSERVE!

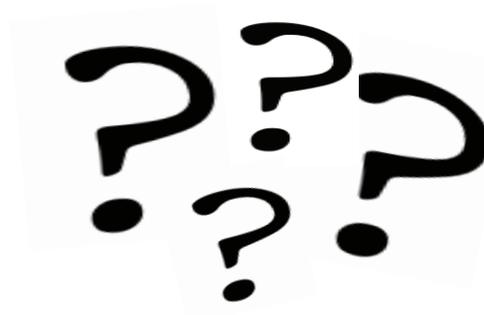
Of the medication errors reported into the Event Management Tracking system (CIMOR EMT) used by the Department of Mental Health, Division of Developmental Disabilities, during Fiscal Year 2019 (July 1, 2018 to June 30, 2019), the most common Medication Error Type was Administration at 97%, the most common Error Category was Failure to Administer at 73%, and the most common Error Reason was Forgot to Give at 52%.

The most frequent Error Severity was Minimal at 98% of the reported errors. The definition of each Error Severity are on the Event report forms and covered in training and are: Minimal: No treatment or intervention other than monitoring or observation. Moderate: Treatment and/or interventions in addition to monitoring or observation. (When an intervention is initiated to change the outcome.) Serious: Life threatening and/or permanent adverse consequences.

### DECIDE! What is causing the error?

Asking these questions can help figure out the cause of the med error:

1. What was the medication error?
2. Why did it happen?
3. What can be done to decrease the likelihood of reoccurrence?



Examples of medication error causes include:

- Unclear or incorrect physician orders making it difficult for the caregiver to correctly follow
- Lack of individual assessment and planning to identify safeguards and measures to decrease risk associated with medication administration
- Caregiver is distracted, feels rushed, and/or is interrupted during the med administration process
- Caregiver does not follow a reliable procedure for administering meds
- No medication resources available, such as pharmacy drug information, that comes with the medication or a drug reference book
- Individual who is prescribed the medication may not have knowledge about their medications including medication administration frequency (times)

## ACT!

One way to decrease medication errors is to create individualized strategies to increase a person's involvement and independence with medication administration. This can be part of the person's Individual Support Planning process.

There are Self-Administration of Medication assessments that can be completed to determine the person's ability to participate in the administration of their meds and support the identification of services and supports to promote increased independence and involvement with their medication process.

Assistive technology is available to promote increased independence with medication administration such as for medication packaging and automated medication dispensers based on individual needs. Individuals and their caregivers can talk to a pharmacy representative to find out options for packaging their medications. Some options are blister packs or pouches and strip packs. In these systems, more than one medication can be packaged together. Some automated medication dispensers, have alerts for the individual and/or caregiver if the medication has not been removed for administration.

Other options for assistive technology to promote independence are phone applications that will send you a text, call, or beeps and lights on your mobile phone or other mobile device and even games that can serve as a reminder. For more information about Assistive Technology you may visit this website <https://dmh.mo.gov/dev-disabilities/technology-first>.



Medication home delivery is an option offered by many pharmacies. Some pharmacies provide applications for your mobile phone that will enable the individual to reorder medications and be notified of medication delivery status, driver routes, and payment details. This can help ensure that the individual receives their medication refills on time and with less effort.

Medication Review - have the primary care provider or pharmacist review medications currently used in order to identify any potential adverse effects and drug reactions, including drug therapy, significant side effects, significant drug interactions, duplicate drug therapy, and noncompliance with drug therapy. Sharing identified information pertaining to medication errors also, to seek assistance with identifying preventative measures.

## ADvancing States 2019 Home and Community Based Services Conference

The 2019 Home and Community Based Services (HCBS) Conference, held in Baltimore, Maryland, was the 35th annual HCBS Conference. From August 26-29, more than 1,500 attendees from 50+ U.S. States and Territories took part in over 130 sessions focused on issues across the spectrum of aging and disability policy.

Department of Mental Health team members, Angie Brenner, Donna Siebeneck, Shelly Summers, Kim Stock, and Wendy Witcig attended the conference and participated in the Centers for Medicare & Medicaid (CMS) Intensives track and CMS tracks on Electronic Visit Verification (EVV) Implementation, HCBS Regulation Implementation, Promoting Health and Welfare for People Receiving HCBS, and Medicaid 101.

Angie Brenner—Director of Federal Programs, along with Jessica Bax—Director of Missouri State Unit on Aging, and Kevin Hancock—Deputy Secretary, Pennsylvania Department of Human Services, presented on State Experiences with HCBS Rate Setting. In addition, Angie and Jessica joined colleagues from Louisiana and Minnesota to provide a presentation on Value-Based Payment for HCBS.



MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

Improving lives THROUGH supports and services THAT FOSTER self-determination.

DIVISION OF DEVELOPMENTAL DISABILITIES

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MISSOURI DEPARTMENT OF MENTAL HEALTH