

Report Filters:

Reviewer Role: "Case Manager"

Service: "CTH","FAM" Active Indicator? "Yes"

CI Consumer Interview

- 1. **CI 1** Are you happy with where you live? Individual
 If you don't like where you live, what don't you like about it?
- 2. **CI 56** Are you happy with the people who provide help and assistance to you at home or at your job? Individual
 This indicator relates to the service type being reviewed. For example, for a day service, ask about daytime activity; at a work service, ask about happiness at work; at a residential setting, ask about happiness at home. An open, general question such as "Tell me what it's like to get help from the people who help you here.", is suggested to avoid a yes or no response.
- 3. **CI 22** Do you choose the activities that you participate in? Individual
 Do you go shopping? Do you go out for entertainment? Do you go to meetings in the community?
- 4. **CI 58** Do you have ways to express your ethnicity, cultural heritage, and religious preference if you want? Individual
 Tell me the things you like to do. Suggested question: "What holidays do you celebrate"?

 Observe the individual in his or her environment and review their IP for expressions of cultural heritage and/or ethnic or religious preference, then ask the individual about those things. (e.g., native language, nationality flags, religious statues, artwork that reflects heritage and culture, etc.).
- 5. **CI 41** Are you working on things that you identified at your planning meeting? What things are you working on now? Individual
- 6. **CI 60** Do you know how to ask for help if somebody is hurting you or someone else? Individual
 Do you express your concerns to others regarding abuse and neglect if you need to? Do you know how to report abuse and neglect if you need to?

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O Observation

7. O 1 The individual likes others he or she spends time with. Individual
The individual is at ease, may smile ... others are friendly, speak respectfully (no harsh words) ... during the course of experiences observed.
The individual's visit at the Family Respite Center is with others with whom he or she is compatible.
The individual's visit includes planned activities occurring at DMR Family Respite Center.
8. O 2 The individual is treated by staff in a respectful and dignified manner. Individual
If immediate jeopardy situation refer to: J1 Abuse or neglect observed or reported.
Refer to DMR CTH Licensing Regulation: 30b6, 30c1, 30c2
9. O 3 The individual has privacy when he or she wants or needs it. Individual
Privacy may involve having locks on doors, personal access to a phone, access to own mail, personal space for possessions, visits with friends and family in private, etc. The individual's confidential information is not posted in view. Support persons discuss health care needs with the individual privately.
Refer to DMR CLA Licensing Regulation: 15a2
Refer to DMR CTH Licensing Regulation: 29b6, 30b1
10. O 15 Adaptive equipment and assistive technology, if needed, is used by the individual to increase his or her independent participation in daily activities. Individual
Review the Individual Plan for documentation of the need for adaptive equipment and assistive technology. Includes switch plates, communication boards and devices, dining equipment, etc. Look for physician's orders to identify needed equipment, technology. Observe if identified equipment, technology is used.
Refer to DMR CTH Licensing Regulation: 30a9, 30a12, 30f6
11. O 4 The individual is supported to make choices in all areas observed. Individual
Personal choice of activities, food and beverages, privacy, entertainment, etc.
Refer to DMR CTH Licensing Regulation: 30d2
12. O 10 Support persons communicate in effective ways the individual can understand and takes the time to listen to the individual and are responsive when the individual communicates. Individual
Support persons use speech, signing, gestures, question cues, communicate in the individual's native language, offer clear choices and acknowledge the individual's responses, etc.
Refer to DMR CTH Licensing Regulation: 30a6D, 30f8
13. O 13 The individual is supported to accomplish outcomes as identified in his or her plan. Individual
The supports and services identified in the individual's plan are coordinated and integrated in observed settings.
The supports and services identified in the DMR Family Respite Center visit forms are coordinated and integrated as necessary.
Refer to DMR CTH Licensing Regulation: 30f2, 30f6
14. O 7 Sufficient support persons are available to meet the individual's support and service needs identified in his or her Plan. Individual
"Sufficient support persons" is defined in the person's Individual Plan (e.g., two person transfer required: one person on duty; a requirement for a support person to be within visual sight of an individual at all times).
If immediate jeopardy situation refer to: J18 Inadequate number of staff (supervision, implementation of behavioral interventions, evacuation).
Refer to DMR CLA Licensing Regulation: 13b
Refer to DMR CTH Licensing Regulation: 30a6A, 30a6B, 30a6C, 30a6D, 30a6E, 30a6F, 30a6G, 30a6H, 30a6I, 30f6

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D Documentation

15. D 40 Individual's incidents and accidents are reported, investigated and followed-up as appropriate. Individual

Incidents and accidents are documented on DMR 255 Incident Report Forms. Investigation recommendations have been followed-up. Incidents reported from own home and family homes are documented on DMR 255 OH/FM forms.

Review copies of incident reports completed by the provider. The provider log may indicate if or when incidents occur.

Documentation may be found in the family home for people who hire their own staff. The reviewer should ask the individual or personal representative if there is any documentation kept in these areas. Otherwise, documentation will be maintained in the case management record and with the FI record.

Refer to DMR CLA Licensing Regulation: 15a4B, 15a4D

Refer to DMR CTH Licensing Regulation: 30c2, 30c3, 30c4, 30c5, 30c6