

**WRIGHT COUNTY CASE MANAGEMENT  
ANNUAL PROGRAM PLAN  
January 2009**

**Agency Director:** \_\_\_\_\_

**TCM Supervisor:** \_\_\_\_\_

**Case Manager:** \_\_\_\_\_

**Case Manager:** \_\_\_\_\_

**Case Manager:** \_\_\_\_\_

**PLANNED FREQUENCY OF CONTACT WITH ADVISORY BOARD:**

TCM Advisory Board will plan to meet four times per year. The performance improvement information will be reviewed with the board as needed. Minutes will be maintained and provided to board members at the following quarterly meeting. Case Management Director will have contact with Governing Board / Board of Supervisors as needed for issues related to the Targeted Case Management Program.

**PLANNED FREQUENCY OF STAFF MEETINGS:**

It is currently planned that an open door policy will continue to be maintained by supervisor and director. It is felt that this continues to be manageable to facilitate timely, effective management of concerns as they arise. It is also felt that this helps to reduce stress during challenging situations. Case Managers and supervisor will continue to meet twice a month to review system changes, funding issues, new requirements, training information, general issues and cases, as was developed and established during the past year. On occasion schedules and work demands don't allow for meetings twice a month, so the staff will meet as frequently as possible when these things occur.

**PROGRAM'S STAFF TRAINING PLAN:**

Wright County will continue to provide ongoing training to staff of the Wright County Case Management Program. Staff will continue to participate in mandatory reporter training for dependent adult and child abuse to continue to be in compliance with regulatory expectations. The department decided that it may be best for the Case Management Supervisor to attend the meetings that are geared toward regulation updates, service system changes and navigation, and performance expectations and then dispense this information to the staff at a office meeting. The Case Managers would like to have the option of determining what trainings they will attend without the assumption from the administration that all parties will attend. The administration would like for the Case Manager's job to be manageable so that time can be comfortably spent attending meetings and trainings based on the need for the information, rather than not attending based on concern for their workload.

**BACKGROUND:**

In regard to performance improvement, the primary concern of the Case Management program is to develop means to improve the lives of the people we serve. It is strongly felt by our agency that this is done by assisting individuals achieving lives of high purpose, deeply embedded in their communities, engaged in meaningful relationships, and pursuing both economic and spiritual goals. Through the assessment process the department determined that to best achieve this goal, we currently need to make sure the services are driven by the desires and aspirations of the consumers through client driven goals on the ICP. For too long, the process has tended to be reflective of what is determined to be a person's need or what is in their best interest, all based on the value system of those providing the services. The system has also been geared toward consumers having to prove themselves by graduating through various milestones of the system, as an example proving a person can be successful in the workshop before trying community employment. In the past the consumer were referred to a provider, who assessed the needs and then asked for funding accordingly. It is the goal of our agency to change this perspective to individualized budgets. In this model the Case Manager assessing the need, then requests the needed funding and then the consumer hires who they want to provide the services with the funds

made available to them. Secondly, the department felt that in order to keep the case managers focused on what really matters to the clients, they need to have adequate time to follow up on issues, be creative in service options and providers, and break down barriers that may exist. Therefore future efforts will be made to lighten the load on the Case Managers to afford them the time to provide a more intense and productive Case Management service. We have been moving in this direction the last 6 months, as an additional Case Manager was hired, but shortly thereafter, the senior case manager resigned and hiring and training the new replacement has just occurred in the last few months. Lastly, over the last several years Wright County Community Services has been striving to improve the quality of life for those served. In order to continue in the direction the department felt it was important to assess the impact we have had thus far and further assess the best courses of action for the future.

**AREA FOCUSED UPON:**

- X Case Review
- Demographic Data
- X Consumer Satisfaction
- Parent/Guardian Satisfaction
- Provider Satisfaction

- Level of Functioning**
- X Consumer Quality of Life
  - Complaints
  - Other \_\_\_\_\_
  - (Specify) \_\_\_\_\_

<b>PROGRAM GOAL #1:</b> The Wright County's Case Management program has the purpose and most noble goal of assisting individuals to achieve lives of high purpose, deeply embedded in their communities, engaged in meaningful relationships, and pursuing both economic and spiritual goal.			
<b>OBJECTIVE #1:</b> Complete steps identified to assist with writing individualized client directed goals by 12-31-09.			
<b>ACTION STEPS:</b>	<b>RESPONSIBLE PERSON</b>	<b>INITIATION DATE</b>	<b>COMPLETION DATE</b>
Schedule agency goal training through ISAC.	Supervisor	1-1-09	1-31-09
Complete training as scheduled.	Case Managers / Supervisor	2-1-09	3-31-09
Review annual review priorities.	Case Managers / Supervisor	1-1-09	12-31-09
Review ICP goals as written.	Case Managers / Supervisor	1-1-09	12-31-09
Review quarterly reports.	Case Managers / Supervisor	1-1-09	12-31-09
Provide feedback / suggestions regarding goals.	Case Managers / Supervisor	2-1-09	12-31-09
Develop tracking methods to determine if goals are being met and if not, why.	Director/Supervisor	2-1-09	6-30-09

<b>OBJECTIVE #2:</b> Determine level of success with improving quality of life for persons served by 12-31-09.			
<b>ACTION STEPS:</b>	<b>RESPONSIBLE PERSON</b>	<b>INITIATION DATE</b>	<b>COMPLETION DATE</b>
Develop an assessment/survey tool.	Director / Supervisor	1-1-09	3-31-09
Hold departmental meetings and determine the best way to implement the tool.	TCM Dept.	4-1-09	4-30-09
Implement tool.	Case Managers / Supervisor	5-1-09	6-30-09
Tabulate results.	Supervisor	7-1-09	7-30-09
Review results with all staff.	TCM Dept.	8-1-09	8-30-09
Meet with CPC to determine service options to meet unidentified needs.	Supervisor	9-1-09	11-30-09
Use information to determine areas of need and course of action for the next program plan.	Supervisor	12-1-09	12-31-09
Review all steps and information with Advisory Board for input.	Supervisor	1-1-09	12-31-09

**OBJECTIVE #23** Improve the Case Managers workload so that it is more manageable by 12-31-09.

ACTION STEPS:	RESPONSIBLE PERSON	INITIATION DATE	COMPLETION DATE
Revise training expectations.	Director / Supervisor	1-1-09	1-31-09
Case Management Supervisor will attend meetings geared toward rules, regulations, systems process etc and convey needed info to Case Managers.	Supervisor	1-1-09	12-31-09
Transition cases to new Case Manager to reduce caseload sizes.	Case Managers / Supervisor	1-1-09	3-31-09
Merge time study data base and TCM Helper.	Director	1-1-09	6-30-09
Discuss improvement opportunities for tracking database with TCM staff.	TCM Dept.	1-1-09	12-31-09
Participate on a state wide committee to develop a county system to streamline the Case Managers documentation activities.	Director / Supervisor	1-1-09	12-31-09

**WRIGHT COUNTY CASE MANAGEMENT  
PROGRAM ASSESSMENT  
January 2009**

**CURRENT SITUATION:**

Wright County Case Management currently serves 60 individuals in the Targeted Case Management program. Of these consumers 13 are children and 47 are adults. Of the children cases, 3 are BI and 10 are MR. Of the adult consumers 1 is BI, 2 are DD, 41 are MR, 3 are CMI. Of the overall consumer served, 43 consumers live in their own homes or parental homes with support services, 5 live in RCF facilities, and 12 live in HCBS waiver homes. Currently, 36 of the clients served by the program reside within Wright County and 24 reside outside of the county. There have been 5 individuals accepted into services during the past year, 4 individuals to receive services under the MR waiver and one to receive services under through county funding. There were 8 discharges from the program during the past year. Of these 8, one was diagnosed with Mental Retardation and died from medical complications. There were 4 individuals who chose to no longer receive services. Of these four, 2 were adults one with MR and one who was CMI, both were not compliant with the services rendered and expressed an interest in being discharged. The other 2 were children and the parents did not feel that the services were producing any outcomes. There were 3 individuals that needed a higher level of care, thus 2 moved into nursing homes and 1 moved into an ICF/MR.

During the past year, there have been several changes in the staff within the Wright County Case Management Program. The CPC continues to serve as administrator / director of the program and has been with Wright County Community Services for 11 years. The case management supervisor has been with the program for 11 years, first as a case manager for 2 years and then the supervisor for 9 years. For several years the program has operated with 3 case managers, one being full time, one being three quarter time and one being half time. There has been difficulty in these workers being able to maintain the workload, which seems to be ever increasing. As a result the administration with the involvement of the departmental staff, decided it was time to hire another case manager to disperse the workload. In July 2008 another full time case manager was hired. The program currently employs 2 three quarter time case managers and 2 full time case managers. The programs senior case manager resigned in September after 9 years with the agency to work with the Money Follows the Person Grant. The two three quarter time case managers have been on staff for 3 and 4 years. One of the full time staff was hired 7/1/08 and the other on today's date, 11/17/08.

Changes at the state level have continued to have a significant impact on the program during the past year, as a number of changes have occurred with TCM as well as the service programs utilized by the clients. The TCM authorization process has become more routine for the Case Managers during the past year, however, these requests are being looked at more closely and changes have occurred with provision of additional information when requesting authorization for DD clients or MR clients not accessing HCBS waiver services. There continue to be concerns with HCBS Pre Vocational Services. Within the last year, Wright County Community services embraced the literal definition of Pre-Vocational services. As a result many of the consumers that have accessed workshop services for decades are no longer being able to do so. The Wright County CPC has embraced the same definition as the state, thus county funding is not available for workshop services either. This has added a great deal of additional work to the case managers as they meet with families and persons served to explain the situation and research or develop alternatives. This has been met with challenges from the providers, which has increase the burden on the case managers as well. Case managers have felt pressure to keep up on paperwork and to balance this with the need to have more frequent contact to more closely monitor services and goal progress.

**PROGRAM PLAN PROGRESS:**

The program goal for Wright County last year was to assist individuals to achieve lives of high purpose, deeply embedded in their communities, engaged in meaningful relationships, and pursuing both economic and spiritual goals. The objective to implement this goal was to facilitate the Consumer Choices Options in Wright County. Wright County Case Management met this objective and goal.

Wright County has become a leader in the state of Iowa in the implementation and use of individual budgets and Medicaid's Consumer Choice Option. As a result, Wright County has developed and maintained a support pool that allows clients the opportunity to interview and hire their own support staff. In addition applicants are able to use their individual budget dollars in most any way they choose in that they decide the wage of the support person, how many hours of supports they receive, the types of support as well as when and where the support is delivered. As a result many applicants are using their "employees" as transit providers and as companions to help them access community events. This has begun a change for disabled persons in Wright County in that they are not just "in" Wright County Communities but are now active "with" their communities. This has allowed community members and applicants to develop and expend "social capital". Over the last two years, a total of 25 consumers have been enrolled onto CCO and many purchase have been made. They include: vibrating watch, science center pass, 2 swing set seats, 1 swing set frame, 6 three wheeled bikes, communication materials, bathroom remodel, PT training for CCO employee, thermometer, ear washer, weight watchers membership, fitness center membership, ramp to front door of home, leather chair for incontinence, bath chair, bike trailer, and a toilet seat.

Henry was once living in a residential care facility for the mentally retarded. Henry had many documented behaviors such as damage to property, verbal threats and physical assaults. In 2006 Henry was given an individual budget, hired his own support persons and moved into his own apartment. Today Henry has developed close relationships to his community. He has become close friends with a prominent figure in his community, has begun attending a local church and has developed many close relationships within the congregation and now is employed. Henry is the most independent he has ever been and has the greatest quality of life he has experienced since becoming an adult.

Samantha lived in an Intermediate Care Facility for the Mentally Retarded with a staff ratio of one staff person for every six disabled persons being served. Samantha also had behaviors within the facility and was often on some form of restriction as a result. In 2007 Samantha was given an individual budget and allowed to hire four support employees of her own choosing. She interviewed the staff and, with the assistance of her guardian, chose the hours, shifts and wages of her staff. She moved to a two bedroom apartment and began receiving one on one 24 hour care in her own apartment in a local community at the same cost of the Intermediate Care Facility she lived in prior to her move. Samantha has seen a huge reduction in her need for psychotropic medications and has had little if any behavior problems. Her health has improved as well. Samantha has a heart condition and high blood pressure. Prior to her move she was taking three blood pressure medications. After her move, her pressure has stabilized and her medications have been decreased significantly. In addition Samantha is a regular volunteer at the local movie theater, library and video store. Unfortunately the community has not included her as an employed member of the community, yet Samantha continues to strive for employment.

Tina rotated through case managers and providers on a regular basis. Tina regularly fired her providers, was involved in harmful relationships with her family and men in the community. Tina was banned from receiving medical services at many medical providers in her community due to her exorbitant and unnecessary use of their services. In 2006, Tina was given an individual budget and allowed to interview and hire her own staff. She negotiated their wages and what supports she would receive as well as when and where. After two years Tina continues to have a challenging personality but has stabilized a great deal. She has remained with the same staff since their hiring and has only moved once since 2006. Her abuse of medical services has diminished and she has been reduced from 17 medications to 8. Tina has been involved in camping trips, birthday parties and other social events in her community that she did not have access to in the past. Tina has indicated that her satisfaction with her supports has greatly increased with the use of individual budgeting.

Sarah was living in a Home and Community Based Waiver Home with three other roommates. Sarah was and is employed by Hy-Vee. Sarah and her mother consistently expressed discontentment with the supports she received in her home as she was not allowed to choose who her roommates were, who her staff were or what

activities she could participate in the evening due to staff having to serve the needs of all three persons in the home. In early 2008 Sarah was given an individual budget and allowed to interview and hire her own support staff. Sarah then moved to her own apartment. Since then both Sarah and her mother have expressed delight in the person centered flexible services within the congregation and now is employed. Sarah regularly participates in community events and has even gone on double dates with her support staff.

Zoey is a young child who received supports through the Mental Retardation Waiver. After receiving supports from a local provider Zoey's mother terminated the service due to staff turnover, consistent schedule conflicts lack of staff knowledge or skills among other concerns. In early 2008 Zoey was offered an individual budget and her mother was allowed to interview and hire Zoey's support staff. Since then Zoey, her mother and grandmother have expressed excitement in the progress they have experienced.

Currently the case management program serves 60 individuals. Out of the total persons served of those individuals 39% have an individual budget and direct their own services.

### **INCIDENT REPORTS:**

During the past year, incident reports for Targeted Case Management consumers continued to be received and maintained in each consumer's file, with a copy of each also being placed in the master file for incident reports. In looking at reports broken down by individuals there were no patterns noted. Combined, 39 incident reports were filed. Of the 39 reports, 25 involved treatment for medical conditions or injuries, 1 incident involved a client needing emergency mental health treatment, 2 involved incidents that were false allegations of abuse, 2 were self injurious behavior, 3 were related to mediations, 3 were due to behavior issues, 2 was the result of criminal activity and 1 was the death of a client served by the program. Staff reviewed incidents for trending and there were no indications that there were any patterns according to providers or service settings. Reports related to 22 clients were included in this years review.

In reviewing trends among providers, it was noted that 7 providers had incident reports. Of these were: Krysilis who had 8, Opportunity Village with 12, Humboldt Workshop with 9, North Iowa Transition Center with 4, Comprehensive Systems with 1, Northstar with 1, Exceptional Persons with 1, and 4 completed by our own TCM staff. These numbers fall in line with the number of consumers served by each provider, as Krysilis serves the largest number of our consumers, followed by Opportunity Village, Humboldt Workshop, North Iowa Transition Center and the others. Case Management has been completing more incident reports as several of the consumers are using Consumer Choices Options to hire their own staff and these people are noting completing incident reports. The majority of incidents were related to medical conditions or injuries. There weren't any concerns with this as three of the consumer discharged this year were a result of needing a higher level of care due to medical needs.

There are no incidents where lack of or ineffective response by TCM program was identified. Case Managers continue to review incidents / significant problems as they occur.

### **PUBLIC EDUCATION:**

During the past year, The Case Management Supervisor has become greatly involved in implementing the Consumer Choices Options services available through the Home and Community Based Waivers. Due to the passion for this program, great efforts were made by Wright County Community Services to utilize this program to the best of our abilities. This resulted in our agency becoming pioneers for the program, and eventually the states "poster child" for the program. This led to the case management program, the Wright County CPC, the local Independent Support Broker, CCO employees, a family members and case management consumers traveling to share our experiences, ideas and wisdom in efforts of promoting the program and the role of case management in accessing it. The group presented at a regional CPC meeting in Council Bluffs Iowa, at a county office in Sac City, Iowa, and the County Case Management Annual Conference located in Des Moines, Iowa. The audience reached during these presentations included CPC's, case managers, persons with disabilities, family members, Department

