

Audrain Developmental Disability Services



Targeted Case Management Program Participant Handbook

TCM Directory

308 East Jackson Street, Mexico, Missouri, 65265

Staff:

ADDS Executive Director

Targeted Case Management Supervisor

Director of Quality Assurance

Support Coordinator

Support Coordinator

Support Coordinator

Tim Crews

Mark McDowell

Kara Clovis, MPH

Denise Hill

Emily Terry

Michelle Copeland

Important Phone Numbers:

TCM Office (Business Hours)

Mark McDowell

Kara Clovis

Michelle Copeland

Denise Hill

Emily Terry

573-581-3953

ext. 14

ext. 19

ext. 16

ext. 17

ext. 18

TCM After Hours/ Emergency After Hours:

573-473-0789

TCM Fax

573-581-2413

ADDS Administration

573-581-8210

Emergency

911

Poison Control Center

800-222-1222

Ameren UE (electric/gas)

800-681-7911

Missouri American Water Co.

866-430-0820

City of Mexico (Sewer)

573-581-2100

Webber Pharmacy

573-581-6930

After Hours:

573-473-4090 / 473-8960

Department of Mental Health

800-364-9687 / TT 573-526-1201

Hannibal Satellite Office

573-248-2400

ADDS Website

www.audraindevelopmental.org

ADDS email

info@audraindds.com

Missouri Protection and Advocacy (MO P&A)

800-392-8667

(Missouri Adult Abuse and Neglect Hotline)

Program Description & Philosophy

Everyone has the right to lead the life they choose in the most independent manner possible. The Targeted Case Management Program connects individuals with the support services they require. By working closely with individuals and their families, Service Coordinators assess, plan, and implement necessary supports to meet individual needs and goals.

Program Content

The TCM program offers advocacy, assessment, planning, communication, education and resource referral, and management services. TCM Support Coordinators work closely with individuals and families to assess, plan, and implement the necessary supports needed for individuals served to reach their goals. TCM Support Coordinators also monitor and evaluate all programs in which individuals participate in order to ensure high quality and effective supports.

Criteria for TCM Admission

1. Applicants are referred to the Hannibal Satellite Office (HSO) to complete an application for services.
 2. The HSO Intake/Eligibility Coordinator then completes an assessment for eligibility determination.
 3. To be determined eligible an applicant shall be an individual with a developmental disability.
 4. There shall be no restrictions on the person served due to race, creed, color, age, religion, gender, sex, sexual orientation, gender identity or expression, national origin, veteran status, disability, or gender information.
 5. If the individual is determined eligible for services, the Targeted Case Management (TCM) office of Audrain Developmental Disability Services (ADDS) will receive notification, generally by email, from the HSO Intake/Eligibility Coordinator of eligible individuals within Audrain County and will receive notification from HSO regional area from the county sending the individual into the ADDS service area.
 6. TCM has 72 business hours to contact the person determined eligible for services and assign a service coordinator.
 7. An Individual Support Plan (ISP) meeting will be held to determine services to be provided to the individual. TCM must have an Individual Support Plan completed and implemented within 30 days of the initial eligibility of services.
 8. ***Deadline for scheduling and completion of ISP content:***
 - (1) Level of Care (LOC): Completed within 90 days of ISP due date.
 - (2) Scheduling of ISP: Scheduled within 60 to 90 days of ISP due date.
 - (3) ISP meeting: Held within 60 to 90 days of ISP due date.
 - (4) ISP signatures: Completed before 30 days of ISP due date.
 - (5) ISP submission to ADDS Target Case Management Supervisor: Completed before 30 days of ISP due date.
 - (6) ISP submission to ADDS QA: Completed before 30 days of ISP due date.
 9. ***Schedule of assessments:***
 - (1) MOCABI: Completed every two (2) years by the due date.
 - (2) Vinland: Completed every three (3) years by the due date.
 - (3) MAAS (Previously SIS Assessment): Completed every three (3) years by the due date.
 - (4) HRST: Completed annually for individuals served with a Medicaid Waiver only.
 - (5) Level of Care (LOC): Completed annually by the due date.
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Criteria for ADDS Admission

When a person is initially presented to ADDS, an Initial Contact Form will be completed by the staff member contacted. The staff member contacted will also complete an ADDS Referral Form to effect referrals to internal programs or other agencies.

Eligibility Determination

Persons requesting services offered by ADDS are required to be determined eligible for Department of Mental Health services. Prospective applicants who have not been assessed by the Department of Mental Health are given the Hannibal Satellite Office's (HSO) Intake Coordinator's name, phone number and address. Department of Mental Health eligible persons are admitted into appropriate programs on a space available basis. Ineligible persons are referred to appropriate agencies for services. The Executive Director, may, in cases of emergency or dire need, admit persons who are on a temporary basis pending outcome of above cited eligibility determination.

Referrals to Human Services Agencies

Persons that are not eligible for services, or who are requesting services not offered by ADDS, are referred to the appropriate human services agency in this area. The list of agencies and services they provide is located in the Directory of Human Services.

Assessment Procedure

1. Persons referred to Audrain Developmental Disability Services (ADDS) for residential or personal social adjustment services who have not been assessed for eligibility for Department of Mental Health services, are to be referred to the HSO.
 2. The HSO Intake/Eligibility Coordinator will conduct psychological, medical, and social testing to determine eligibility.
 3. Persons found ineligible for services by the HSO will be evaluated by ADDS to determine the appropriateness of placement in our services. Alternate services will be recommended to persons determined ineligible for ADDS programs.
 4. The Intake/Eligibility Coordinator with HSO will make the referral (generally via email) to the designated Targeted Case Management Office/Agency with new referral or, if the individual is a transfer with the HSO region, a referral will come from the sending county.
 5. When an individual is determined eligible by the HSO, the designated TCM Agency has 72 business hours to contact the new referral.
 6. Individual Support Plan (ISP) meetings will be conducted for persons eligible for HSO services. The diagnosis, needs, and desires of the person will be discussed. The ISP team, composed of HSO staff (as needed), ADDS staff, designated support coordinator, the person served, family/guardian, and other concerned persons, determines the appropriate services which should be pursued.
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The availability of space in the programs determines the date of placement. Within 30 days of placement, ISP objectives and other identified services will be developed to enhance strengths and improve weaknesses. Amendments will be made to the ISP when analysis of data collected per daily programs is deemed necessary. These will be made by the ISP team during monthly or quarterly reviews.

Exit/Discharge Criteria

A person served by ADDS may exit from TCM, or be discharged from TCM, in the following ways:

1. A request for exit from services is made by person served and/or their guardian/family.
2. HSO reevaluates and finds the person served ineligible for services; or
3. The person served relocates to another county within the state.
4. The ADDS Support Coordinator will transfer services to a Support Coordinator providing services in the county of relocation if so desired by the person served and/or their guardian/family.
5. ADDS will continue to support the person served for 30 days after the official transfer (when the new county or regional office accepts the transfer).
6. If the ISP of the person served is due within 60 days of the transfer, ADDS will be responsible for writing the plan.
7. At least one or more transition planning meetings will be scheduled by ADDS with the new county to discuss the needs of the person served or changes to the existing ISP in order to secure a smooth transition.

Transition Follow-Up Procedures

Program Coordinators, **if appropriate**, shall conduct a follow-up procedure on persons served who are discharged from the program, transferred from the program to a supportive service, or placed on inactive status. This procedure shall include the following actions:

1. A letter, phone call, or personal contact with the person served/parent/ guardian/ case manager or service agency to whom the person served was referred, to obtain the current status of the individual **at least annually for a period of two years**. The first follow-up shall be conducted within **45 days** of the discharge date.
 2. Written documentation of the contact, including date, contact person served, and narrative status report to be filed in the case record follow-up section. Written comments should include a statement regarding the degree to which services received have impacted the success of the follow-up placement and whether there are recommended changes to our service delivery.
 3. Follow-up data shall be subject to review by the Case Records Review/Safety Committee.
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Individual Support Plans (ISP)

ISP Team Members

The Individual Support Plan (ISP) will be developed by a cooperative team, including the person served and his/her family members or guardians. ISP team members will include ADDS staff (Program Director as appropriate), designated Support Coordinator, Hannibal Satellite Office staff (as appropriate), Division of Vocational Rehabilitation staff (as appropriate), and other interested parties.

ISP Meeting Schedule

ISP meetings will be scheduled annually within 60 to 90 days of the due date and reviewed monthly. The team will establish the date, time, and location of the meetings and prepare the agenda. **The ISP meeting will be held within 60 to 90 days of the ISP due date.** Written notices will be sent to all designated participants for the annual ISP meetings. **All ISP signatures should be completed no later than 30 days before the ISP due date.**

Level of Care (LOC)

The LOC will be completed within 60 to 90 days of the ISP due date.

MAAS

MAAS will be completed every two years.

The Missouri Adaptive Ability Scale (MAAS) is a norm-referenced assessment tool administered by a certified assessor with the Division of Developmental Disabilities (DD). The MAAS is a standardized assessment that determines an individual's degree of functional limitation, priority of need score (PON), and rate allocation score (RAS) for DD and waived services. The MAAS assessment is required for all individuals requesting and/or receiving services from the Division of Developmental Disabilities. The MAAS assessment is administered at least every two (2) years for individuals currently eligible and receiving services.

Content

The diagnosis, guardianship needs, risks, medical issues, needs for assistive technology, and functional limitations of the person served will be addressed during the ISP meeting. Goals and objectives will be developed to promote a more independent level of functioning or to maintain a least restrictive level. The desired level of functioning and services to be provided will be established by the team based on the person's expressed needs and preferences and input from knowledgeable team members. The services and objectives will be relevant to achieving appropriate community integration for the person receiving services. The Home and Community Based Services (HCBS) Standards will be followed as well as the Missouri Quality Outcome guidelines will be reviewed in developing the ISP. Anticipated times for completion of services and methods for completion of services and objectives may be adjusted at review meetings when deemed necessary by the team. The changes will reflect input into the plan by the person served. Appropriate action persons will be assigned to each service or objective for assurance of

completion.

Responsibility

Individuals will work with a team of professionals, family members, guardians, and case management to ensure that the ISP plan is implemented annually, and that the ISP plan is appropriate, goal-directed, and accurately supports the individual served. Case management will meet with the individual served on a scheduled basis and review progress of person-centered goals in the ISP plan.

Referral Policies

Referrals for Guardian/Conservator

Persons served are assessed annually during their ISP meeting to determine the need for a guardian and/or conservator. When the team feels there is a need for a guardian/conservator, the person is referred to the Audrain County Probate Court. ADDS staff is available to provide support for the person served and to provide input into the case when requested.

Referrals for Employment Services Eligibility

Persons served requesting supported employment services in the community are referred to the Division of Vocational Rehabilitation (DVR) for eligibility determination. Those determined ineligible are referred to the Employment Security Division. Persons served seeking employment at the sheltered workshop are referred to the Handi-Shop, Inc. or to the Pike County Workshop. Those eligible for sheltered workshop employment must be certified by DVR.

Referrals for Financial Support

Persons served needing financial support are referred to the Division of Family Services to apply for Social Security and other benefits for which they may be eligible. Persons served having problems with their Social Security benefits are referred to the Columbia Social Security Office. Those seeking SSI benefits are given a toll-free phone number to call to request SSI. ADDS will provide as much assistance as possible.

Persons served requesting assistance with medical expenses are assisted with accessing the Department of Social Services to apply for Medicaid. If services cannot be obtained through Medicaid, persons served are referred to other appropriate sources, such as the Hannibal Satellite Regional Office (HSRO), University Extension, Rural Community Services Coordinator, Children and Youth with Special Health Care Needs Program and the First Steps program for children under the age of three.

Referrals for Self-Help and Advocacy Services

Persons served needing more extensive self-help and/or advocacy services than are offered through this ADDS, are referred to Missouri Protection and Advocacy Services.

Referrals for Educational Opportunities

Families requesting educational services for their school-aged children are referred to the public school district in which they reside. The school system is required to provide services or contract for services for intellectually disabled/developmentally disabled children from ages three to age 21. Persons served over the age of 18 who are eligible for Department of Mental Health services may be offered developmental and vocational training through the ADDS Developmental Training Center. Persons served who are no longer in school may enroll in Adult Basic Education classes through the Hart Career Center if any are available. The Hart Career Center may also offer other adult education courses that persons with disabilities may choose to attend.

Referrals for Early Childhood Services

Families requesting services for their infant and toddler children are referred to the Children's Therapy and Early Education School. The school offers early childhood special education, physical, speech, occupational therapies, and infant stimulation as well as behavioral supports. The following is a list of some other agencies that parents may be referred to for further assistance: United Cerebral Palsy Heartland, Easter Seals Midwest, Children and Youth with Special Health Care Needs, First Steps of Missouri, Thompson Center for Autism, and Missouri Department of Mental Health Office of Autism.

Referrals for Medical Services

Referrals for all medical services will be documented and placed in the master file of the person served and in their working file when necessary. The report must contain no less than the following information: the name of the person receiving services, place, date, and reason for referral, a report of the outcome, and recommendations. The Program Director is responsible for ensuring that proper documentation is made of each service provided and that the reports are placed in the persons served' record.

Persons served participating in any program offered by ADDS are required to be seen by a physician annually and screenings for communicable diseases are to be done. Appropriate forms will be completed and signed by the physician and returned to the Program Director to be placed in the individual's case record. Any recommendations and referrals for further testing/screening made by the physician will be followed up on by the responsible party (such as parent, home operator, guardian, etc.) Appropriate documentation of the testing/screening completed will be released to the program head for placement in the individual's case record.

Persons served residing in ADDS' residential facilities are required to have annual dental, visual, and audiological examinations unless a waiver is signed by the guardian and discussed at the ISP meeting, or unless the examiner recommends a different schedule. Appropriate forms will be completed and signed by the respective physicians and returned to the program manager to be placed in the case record.

When the person served is ill or injured and requires medical attention, they will be referred to their physician or preferred hospital. Appropriate documentation will be completed and signed by the attending physician indicating the treatment needed. Copies of all hospital reports will be acquired by the individual's Program Director. All documentation will be placed in the individual's case record.

Referrals may be made for evaluations for therapies. Results of the evaluations will be documented. Documentation will be made of each session when a therapy is recommended. All documentation will be filed in the individual's case record.

Persons served needing psychological counseling will be referred to a properly licensed psychiatrist or psychologist. Consultation reports giving a brief summary of the session will be completed for each session. The reports will be placed in the person's case record.

Persons served who have Medicaid will, whenever possible, be referred to a vendor who accepts Medicaid. Persons served ineligible for Medicaid are urged to see vendors who accept Medicaid in the event that the person becomes eligible at a later date. If a person served who has Medicaid chooses to see a physician

who does not accept Medicaid, he/she will be responsible for the payment of the services if other arrangements have not been made.

Persons without Fee Sponsorship

Every effort will be made to establish full funding from appropriate sources for all persons served by ADDS. From time to time, it may be necessary to start services before full funding can be established due to the length of the process involved or funding shortfalls from other government entities. In these cases, the Executive Director may authorize a program to begin providing services before funding is established. Every effort will be utilized to get the service funded as soon as possible and to collect retroactive funding when and if the sponsoring agency's funding picture improves.

For Audrain County residents only, services may occasionally be provided to persons who have been denied fee sponsorships from other government units. These instances will be reported to the Board at its next regular meeting. Such placements will be limited in light of agency fiscal constraints. Appeals to denying funding sources will be pursued and new sources will be sought. Out-of-county individuals will not be accepted under this clause. In all cases, the person's unearned income and a designated amount of earned income (the same scale as it applies to everyone else) will be payable to ADDS as partial compensation for the services provided.

Layoff from Job or Day Program

In the event of a layoff of a Person Served from a job or day program (when the Person Served resides in a residential facility operated by ADDS), day supervision at the home shall be provided by ADDS. Day supervision will continue until funding for the supports can be obtained or another appropriate placement can be found, unless that individual's ISP specifically states the individual can stay at the facility without supervision or funding is provided/approved through the Hannibal Satellite Office (HSO).

Special Policy on Input from Persons Served

ADDs values the opinions, priorities, and desires of the persons we serve. Whenever possible, a key component in all decision-making in regard to an individual and his/her program will reflect what that individual or their representative wants. Here are some the ways ADDs receives input from persons served:

1. Persons served and/or their family members/guardians are an integral part of the ISP meetings. During the ISP, their input is encouraged and solicited. They have a voice in who attends the meeting and specific topics they would like to have brought up at the meeting.
 2. Each residential program and the Developmental Training Center have regularly scheduled house/program meetings during which time individuals served get to plan activities and express opinions about the content of their daily lives. Minutes are kept of these meetings.
 3. The Executive Director maintains an open-door policy wherein persons served by ADDs can come in or call to discuss their present situation or future aspirations. Program Directors maintain a similar open-door at program sites.
 4. As a part of the Agency's Outcomes Management and Quality Assurance processes, a system of questionnaires and interviews are utilized to gather objective data on the satisfaction of persons served, family members and guardians in order to inject those results into future program emphasis and design, as reflected in the ISP.
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Audrain Developmental Disability Services (ADDs) Home and Community Based Services (HCBS) For Participants

If you receive Medicaid Home and Community Based (HCBS) waiver services, you have the right to make choices about your life. You may make decisions about how, when and where you get your services. You may come and go when and where you want. You should have the choice to work and be involved in your community.

ADDs Objectives and Mission Statement:

ADDs will make sure you have choice and full access to be part of your community.

ADDs' Program Handbooks are documents that explain how your services will be carried out. ADDs will make sure your services meet the HCBS requirements.

ADDs' Mission Statement: **Creating a Better Life for Audrain County Citizens**

HCBS Requirements:

1. **Access to the Community:** The setting is integrated in and supports full access to the greater community and engagement in community life – *ADDs will make sure you have choices about event and have full access to your community. If you want to go to an event, ADDs staff will help you see if you have enough money and transportation. ADDs will help you find local events, parades, etc. and provide options for you to choose from. You will be encouraged to go to public events, such as clubs, groups, parades, or fairs, etc.*
 2. **Employment:** The setting provides the opportunity to seek employment and work in competitive integrated settings – *If you want a job, you may talk with your support coordinator or program coordinator and/or ask for a meeting to talk about your employment options. Your planning team will help you with your employment service options.*
 3. **Money Management/Personal Resources:** The setting supports control of personal resources - *ADDs will work with you and those who help manage your money. You may have access to your money, but you may also ask to have ADDs help take care of funds. ADDs can help pay your bills, make deposits, budget for more costly items and work through how to manage money. You will have your own account and can ask for help and information about your money.*
 4. **Community Resources:** The setting supports individuals to receive services in the community to the same degree of access as person's not receiving Medicaid HCB services – *ADDs will talk to you about what you like and your choices in accessing services in your community, such as, medical, social, and recreational activities, or those services that apply.*
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5. **Choice of Settings:** The setting is selected by the individual from among setting options including non-disability specific settings – *ADDS will work with you to learn about your likes and dislikes. This means you have choice of where you live, work and the things you do in your community, including doing things with people without disabilities.*
 6. **Restrictions/Modifications:** The setting options identified for an individual are supported by an assessed need and documented in the person-centered service plans based on the individual's needs and preferences – *You will not have your rights limited unless it is in your individual support plan. Any limits must be approved by you, your guardian, and your team. It must also be reviewed by the Due Process committee.*
 7. **Privacy:** The residential setting provides the individuals with the option for a private bedroom and the setting ensures the individual's rights of privacy – *You can talk with your friends/family privately. You can have privacy in your bedroom. You have the right to privacy in your home. Staff will knock before entering your home or room. You will have a choice about with whom you live. If an issue comes up between housemates, ADDS will meet with you to solve it. If you want new housemates, ADDS will help you make changes.*
 8. **Housing Opportunities:** The person-centered service plan documents the options based on the individual's resources available for room and board – *ADDS will give you a choice of housing options. ADDS will work with you to find the best home for you and one you can afford. You may express your wants with ADDS and your Support Coordinator during your meetings.*
 9. **Code of Conduct:** The setting ensures the individual's rights of dignity and respect – *ADDS and all staff will treat you with "dignity and respect." You should be treated the way you want and talked with in a nice manner and helped in a positive way.*
 10. **Grievance Policy:** The setting ensures freedom from coercion and/or restraint – *You can speak with staff any time you are unhappy with your services and ADDS will try to fix the issue. ADDS' staff will help you contact your guardian or your Support Coordinator, if needed. If the issues have not been fixed, you and/or your guardian can file a verbal or written complaint. Please see the Grievance Procedure on pages 25 and 26. The Division's Constituent Services Office phone number is 1-800-364-9687 and you or your guardian/family can call them with complaints without giving your name.*
 11. **Freedom of Choice:** The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices – *ADDS will make sure you have choices in your life. You can make choices about how you spend your free time. You can do things you like at your home such as play video games, watch TV, or listen to the radio. You may do your laundry & household activities at times you choose.*
 12. **Visitors:** The setting optimizes autonomy and independence in making choices regarding with whom the individual interacts – *You may invite family and friends to your home at any time.*
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13. **Services and Supports:** The setting facilitates choice regarding services and support and who provides them – *You get to choose your services and who you want to provide them. ADDS will ask you about what you want, or which staff are the best fit. ADDS will offer options so you and your guardian may make a choice.*
 14. **Person-Centered Planning Process and Individual Support Plan (ISP):** *This plan process should include people that you choose. The plan needs to be easy for you to understand. The process should take place at times and locations that work for you and your family. Your plan should identify your needs and necessary supports.*
 15. **Missouri law gives individuals who receive Department of Mental Health Division of Developmental Disabilities rights without limitation – please see the following pages for a full description of rights.**
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Missouri Quality Outcomes

The Missouri Quality Outcomes were created by people with disabilities, their families, and professionals. Here are the six (6) outcome areas and what they mean.

1. Daily Life and Employment

You participate in meaningful daily activities of your choice.

2. Community Living

You live in a community that you choose; with people you choose and in places designed to meet your needs.

3. Social and Spiritual

You are an active member of your community, and you get to decide your values, roles, and relationships through self-determination.

4. Healthy Living

You can choose how you get your own health/mental health taken care of. You are supported to make informed choices regarding your health and well-being.

5. Safety and Security

You know your rights and you do things to promote your safety and security.

6. Advocacy and Engagement

You can advocate for yourself and others. You can advocate about causes you believe in, like your personal goals and dreams.

Human Rights and Dignity of Person Served

It is an essential role of the Mission of ADDS to guard the rights and to ensure the dignity of treatment for individuals with intellectual disabilities and developmental disabilities in Audrain County and elsewhere. It is recognized that individuals with disabilities are entitled to the same rights as other citizens. A copy of the rights of individuals served and their HIPAA information will be provided to them at the beginning of services and annually. These rights include, but are not limited to the following:

1. To be treated with respect and dignity.
 2. To have the same legal rights and responsibilities as any other person unless otherwise limited by law.
 3. To have the right to due process review when any limitation to rights is proposed or is alleged to have taken place.
 4. To receive services regardless of gender, race, creed, marital status, national origin, disability, or age.
 5. To be free from physical, verbal, mental and sexual abuse, neglect, financial exploitation, and retaliation.
 6. To receive appropriate humane and high-quality services and supports as determined by the support team of the individual served, which may include, but not be limited to, the individual, parents, guardian, or authorized representative.
 7. To receive these services and supports in the most integrated setting appropriate for the particular needs of the individual served.
 8. To have access to Support Coordination rules, policies and procedures pertaining to services and supports.
 9. To have access to personal records and have the records of the individual served maintained confidentially.
 10. To easily understand services, supports and personal records. An individual served and his/her parents, guardian or authorized representative shall be informed of the rights of the individual served in language that is easily understood.
 - At the time of enrollment and whenever changes are made to the description of individual rights, the Support Coordinator shall provide to the individual served and his/her parents, guardian, or legal representation a written description of the rights of the individual served and how to exercise them.
 - A representative of Support Coordination shall read and explain the description of rights to individuals who require assistance because they are unable to read or unable to understand the written description.
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Contact

If an individual served has complaints of abuse, neglect or violation or limitation of rights, the individual, the individual's parents, guardian, or authorized representative may contact the Hannibal Satellite Office, or they may contact the Department of Mental Health's client rights monitor at **800-364-9687** or **TT 573-526-1201** for assistance.

Support Coordinators shall have policies and procedures that enhance and protect the human, civil and statutory rights of all individuals served. Support Coordinators and each service provider shall have policies and procedures for providing positive supports to individuals served. Those policies and procedures shall be consistent with the enhancement and protection of human rights.

Support Coordinators shall report abuse and neglect as mandated by law. Any violation of rights shall constitute, at a minimum, inadequate care, and treatment.

Services and Support

- You have the right to receive your services and supports in the most integrated setting and in a way that best meets your needs. To determine those services, these people may be involved: you, your parents, your guardian, or any other person of your choice.
 - You have the right to know what the Hannibal Satellite Office and habilitation center rules are for the services and supports you receive.
 - You have the right to have your services, supports and personal records explained to you, so you understand them.
 - You have the right to receive and read your personal records.
 - You have the right to receive and sign a copy of your personal plan.
 - You have the right to have your records kept private.
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Abuse and Neglect

You have the right not to be abused or neglected. Abuse can be physical, verbal, mental, sexual, or financial. Neglect is not getting the things you need to be healthy and safe. If you think you are being abused, neglected, or your rights taken away, you, your parents, your guardian, or any other person you choose can contact the Hannibal Satellite Regional Office or habilitation center for help. You can also call the Person served Rights monitor (Constituent Services) in Jefferson City at **1-800-364-9687** or **TT 573-526-1201** for help.

People who work for ADDS must report any abuse or neglect they see or that is reported.

Grievance Procedure

The steps listed below are to be followed by the individual receiving services, parents, guardians, or other parties when they are dissatisfied with any aspect of ADDS programs.

1. Talk to the Supervisor of Target Case Management or Director of Quality Assurance concerning the grievance.
 2. If a satisfactory solution is not reached within fourteen (14) days, speak with the Executive Director.
 3. If still not satisfied, ask to be placed on the ADDS Board meeting agenda and attend the next regularly scheduled ADDS Board meeting and explain the grievance to the Board Members. The Board typically meets on the third Thursday of the month at Noon (12 at the main office at 222 East Jackson Street in Mexico, MO).
 4. If still not satisfied, you may seek legal counsel. You may also call the office of the Director of Hannibal Satellite Office. If you feel you need more help or advice before seeking legal counsel you may call Missouri Protection and Advocacy at **573-893-3333**. If the individual who is being served needs help with these steps ADDS staff will provide assistance.
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ADDs GRIEVANCE PROCEDURE FLOWCHART

STEP 1

ADDs PROGRAM COORDINATOR

Program Coordinator will receive and review the complaint and complete a Grievance Form.

Program Coordinator will attempt to resolve the grievance immediately or within 14 business days.

STEP 2

ADDs EXECUTIVE DIRECTOR

Executive Director will receive and review the complaint and gather and review evidence.

Executive Director will attempt to resolve the grievance immediately or within 7 business days.

STEP 3

ADDs BOARD OF DIRECTORS

You may request to be placed on the next Board Meeting Agenda.

The ADDs Board typically meets every 3rd Thursday of the month.

The Board will investigate the grievance and make a decision in a timely manner.

STEP 4

HANNIBAL REGIONAL OFFICE

At anytime in the process, you can contact the Hannibal Regional Office at 573-248-2400.

You may also contact the Missouri Protection and Advocacy Office at 573-893-3333.

The ADDs Target Case Management (TCM) staff if available to assist with this process.

Individuals served and their guardians retain the right to seek legal representation at their own expense and discretion.

Navigating the DD System

A Step-By-Step Guide

1

Contact Regional Office

1. Check the state map and contact your DD Regional Office.



DD Regional Office
State Map

2

Initial Interview

2. Meet with Intake; demographics, nature of disability, and names of individuals who have info about disability, Medicaid status, applicant screening.

OR

If screened and appears eligible, move to step 3.
If screened and appears ineligible, referred to other agencies.

3

Application

3. Complete application for services and release of information.

4

Eligibility & Assessment

4. Records will be requested and reviewed. Various assessments may be completed.

5

Eligibility Determination

5. Determination of eligibility for DD services will be made. Notified in writing and verbally.

6

Referral

6. If determined eligible, referral will be made for Support Coordination or Information Specialist.

OR

If determined ineligible, will be provided the right to appeal and will be referred to other agencies.



Missouri Department of Mental Health
DIVISION OF DEVELOPMENTAL DISABILITIES

Developmental Disabilities | dmh.mo.gov

Home and Community Based Services Policy's

HCBS is designed to provide services that meet unmet needs for adults with disabilities allow the individual to remain in their least restrictive environment. This includes the following:

- Access to the Community: ADDS will ensure all individuals served know about their community and will be supported in making choices related to accessing the community.



- Employment: ADDS will ensure that all individuals served who wish to work are supported in doing so.



- Money Management/ Personal Resources: ADDS will assist and support individuals served in managing their own money and personal resources, whether they have a payee or are managing their own money.



- Community Resources: ADDS will assist in educating and encouraging individuals served in providing their input on choices regarding the ways in which their needs are met, as well as accessing community services.



- Choice of Settings: ADDS will help educate individuals served and their families/guardians.



- Restrictions/ Modifications: No individual will have their rights restricted by ADDS except if detailed in their ISP or BSP and approved by the planning team.



- Due Process

- Privacy: All individuals served will have privacy in their bedrooms; if individuals share a bedroom, individuals can request private space to meet with a visitor during the day.



- Housing Opportunities: ADDS will work with individuals served who have the desirer to live in the least restrictive environment and will receive information on affordable housing.



- Code of Conduct: ADDS and all staff recognize the importance of treating individuals served with "dignity and respect"



- Grievance Policy: Individuals served can talk to staff any time they are unhappy with staff or the services being provided and ADDS will try to resolve the issue.



- Freedom of Choice: ADDS will support individuals served in their independent choices they make in their daily activities, how they speak their free time.



- Visitors: Individuals served are encouraged to invite family and friends to visit trhe individuals home any time.



- Accessibility: ADDS will ensure that all individuals served have access to their home and community.



- Services and Supports: ADDS will seek input on the individual served preferences in staff and/supports or the type of staff that are the best fit.



- Rental Agreement: ADDS individuals served that live in a home that is owned by ADDS but has a legally enforceable agreement or lease that offers the same protection from eviction that tenant have under landlord-tenant law of the state, county, city, or other designated entity have available.





HIPPA POLICY



WHAT IS HIPAA? Health Insurance Portability and Accountability Act of 1966 is a Federal Law

WHAT DOES IT MEAN?

HIPPA protects the confidentiality and security of health information and information that would be used to identify a person.

WHAT NEEDS TO BE KEPT PRIVATE?



- Name
- Date of Birth
- Address
- Social Security Number
- Telephone Number
- Account Number
- Diagnosis
- Occupation
- Employer
- Names of Relatives
- Treatment Services

ORGANIZED HEALTH CARE ARRANGEMENT
Facilities and Providers of services can share important information about people without violating privacy.

Authorizations

- you have to give permission to certain people in order for them to see the information
- Be specific as to who can have access, what information can be shared, and the purpose of knowing the information.

NO AUTHORIZATION IS REQUIRED WHEN:

- child abuse or neglect report
- A court orders the Agency to share
- Police need certain information
- IF it is needed to keep someone else safe.

The Agency requesting information must provide verification as to who they are.

COMPLAINT PROCEDURE: IF YOU BELIEVE WE HAVE IMPROPERLY USED OR DISCLOSED OUR HEALTH INFORMATION. YOU CAN FILE A COMPLAINT WITH THE PROGRAM COORDINATOR.

HUMAN RIGHTS AND DIGNITY OF THOSE SERVED



To be treated with respect and dignity as a human being



To have the same legal rights and responsibilities as any other person unless otherwise limited by law



To have the right to due process review when any limitation to rights is proposed or is alleged to have taken place



To receive services regardless of race, creed, color, age, religion, gender, sex, sexually orientation, gender identity, or expression, national origin, veteran status, disability, or gender information



To be free for physical, verbal, mental, and sexual abuse, neglect, financial exploitation, and retaliation



To receive appropriate humane and high-quality services and support as determined by the support team of the person served. which may include but no limited to the individual, parent, guardian, or authorized representative



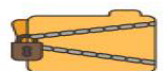
To receive these services and support in the most integrated setting appropriate for the needs of the person served



To have access to Targeted Case Management rules, policies, and procedures pertaining to Services and Supports



To have access to personal records which are maintained confidentially



To easily understand services, support, and personal records. A person served and his/her parents, guardian, or authorized representative shall be informed of the rights of the individual served in language that is easily explained.

ADDS ORGANIZATIONAL CHART

ADDS BOARD DIRECTORS

Tim Crews, Executive Director

Kayla Deimeke Financial Manager	April Dunwoody Organizational Payee Coordinator	Courtney Ragland Financial Manager Assistant	Cheryl Woodward Administrative Assistant
Megan Schafer Human Resources, Finance Operations			
Melissa Brumagin Director of Training			
Kara Clovis Director of Quality Assurance, Community			
Mark McDowell Target Case Management Supervisor	Denise Hill Service Coordinator	Emily Terry Service Coordinator, Director of Arts for All Abilities	Michelle Copeland Service Coordinator
Justin Bauman IT Specialist			
Valarie Haller Director of Health Services	Gracie Hamilton Health Services Assistant		
Colleen Davis ISL and Natural Home Coordinator			
Elaina Knipfel Harvey House Supervisor			
Lisa Harrison Residential Services Coordinator	Meri Kuda Breckenridge Heights Manager	Sierra Beasley CT Loyd Apartments Manager	
Barry Dalton Director of DTC	Kayla Cragen DTC Assistant		
John Wilholt Director of Maintenance	Jeff Scarborough Maintenance	Tom Davis Maintenance Assistant	

AUDRAIN DEVELOPMENTAL DISABILITY SERVICES



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For additional information or referral please do not hesitate to contact us by phone.
