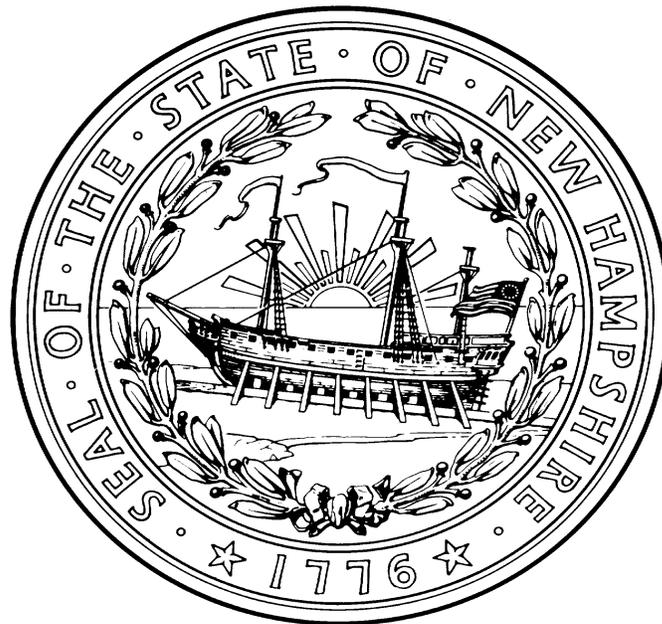


**REGION 2  
PATHWAYS OF THE RIVER VALLEY**

**REDESIGNATION REVIEW**



**CONDUCTED BY:**

**THE BUREAU OF DEVELOPMENTAL SERVICES**  
*Matthew Ertas, Bureau Administrator*

**THE DIVISION OF COMMUNITY BASED CARE SERVICES**  
*Nancy L. Rollins, Associate Commissioner*

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
*Nicholas A. Toumpas, Commissioner*

**FEBRUARY 2011**



**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES**

***BUREAU OF DEVELOPMENTAL SERVICES***

**Nicholas A. Toumpas  
Commissioner**

**Nancy L. Rollins  
Associate Commissioner**

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February 23, 2011

Daniel Damm, President, Board of Directors  
Mark Mills, Executive Director  
PathWays of the River Valley  
654 Main Street  
Claremont, NH 03743

Dear Daniel and Mark:

As you know, the Bureau of Developmental Services has recently concluded its redesignation review in Region II as required by the State Rule, He-M 505, Establishment and Operation of Area Agencies. The review focused on eight indicators of successful area agency operations: mission; rights, health and safety; choice, control and satisfaction; individual and family/guardian involvement; system of quality improvement; governance and administration; budget development and fiscal health; and compliance. I would like to thank all of the people associated with PathWays for their cooperation in assisting the Bureau in carrying out this important process. The redesignation team is particularly grateful for the assistance given by Allyn Girard who exceeded our expectations with her coordination of materials and scheduling meetings and forums.

It is my pleasure to inform you that PathWays of the River Valley has been approved for redesignation for the period of October 1, 2010 through September 30, 2015. The Bureau recognizes your agency's efforts on behalf of persons with developmental disabilities and acquired brain disorders and their families and is pleased that you are a part of New Hampshire's service delivery system.

The results of the redesignation review are contained in the attached narrative report. Please share it with the local stakeholders. Where recommendations have been made, please work with the appropriate parties regionally to consider how to improve the areas highlighted. If appropriate, please add areas of recommendation to your Regional Plan. Finally, if support from the Bureau could be helpful in addressing any of these areas, please let us know how we could be of assistance. [Note that we are also sending you an extensive attachment, which lists all of the specific findings of the redesignation team. We hope that you will find this as a useful source document.]

Daniel Damm, Board of Directors  
Mark Mills, Executive Director  
PathWays of the River Valley  
Page 2

Again, thank you for your contribution to New Hampshire's community-based service system and to the lives of persons with developmental disabilities and acquired brain disorders and their families.

Sincerely,

A handwritten signature in black ink that reads "Matthew Ertas". The signature is written in a cursive style with a large initial "M".

Matthew Ertas  
Bureau Administrator

Attachments

cc: Nicholas A. Toumpas, Commissioner  
Nancy L. Rollins, Associate Commissioner

## **Bureau of Developmental Services**

DATE: February 23, 2011

TO: Matthew Ertas, Bureau Administrator  
Bureau of Developmental Services

FROM: Lorene Reagan, RN  
Redesignation Team Leader for Region 2  
PathWays of the River Valley

RE: Redesignation Review, Region 2, 2010

In July, 2010, Region 2, PathWays of the River Valley, requested redesignation as the area agency that provides services to individuals with developmental disabilities and acquired brain disorders in Region 2.

During October and November of 2010, a team of Bureau staff reviewed the services provided by the area agency. The team was comprised of Kaarla Weston, Darlene Ferguson, Todd Ringelstein, Carolyn Stiles, Jan Skoby, Elizabeth Collins and me as team leader. Susan Covert conducted interviews with management staff of the agency's sub-contract agencies and Kimberly Maines entered survey data. Paula Bundy conducted phone interviews with cooperating agencies. The narrative report of our findings was written by Jeanne Cusson with input and final editing from the redesignation team.

Attached please find:

- ❖ A list of activities associated with the review process
- ❖ A source document containing bullets substantiating material used in reaching our conclusions
- ❖ A narrative report of our findings

The redesignation team wishes to recognize and thank Allyn Girard for her coordination of the team's activities. Ms. Girard's flexibility, organizational skills, and positive and helpful approach truly facilitated the work of the redesignation team. We would also like to thank the area agency managers for their prompt responses to the team's questions and inquires and their help in coordinating the Family Forum and Individuals' Forum. We also wish to thank the agency's Board of Directors, Family Support Council and the region's Self-Advocacy Group for sharing their valuable perspectives on the work of the agency.

If approved, the agency's redesignation would extend from October 1, 2010 through September 30, 2015 or, if conditionally approved, any time therein. The review team has agreed to meet with the Board of Directors, agency staff and other individuals or groups that the agency wishes to invite to discuss our findings and answer questions.

Please contact me or any other team member if you require additional information.

## Components of the 2010 Redesignation Review in Region 2

The redesignation review process in Region 2 included:

- Review of Region 2's Strategic Work Plan for fiscal years 2007-2010 and progress update of July, 2010.
- Review of the area agency mission statements, Bylaws, and organizational chart.
- Review of the rosters of the Board of Directors, Board Committees, Family Support Council, Self-Advocacy Group and area agency committees/workgroups.
- Review of the Area Agency's previous Redesignation Report dated March 2005
- Review of the Bureau's summary reports of the Adult Consumer Outcomes Surveys (ACOS) for fiscal years 2006, 2007, 2008, and 2009 and review of aggregate data for Adult Consumer Outcome Surveys collected from fiscal years 2006-2009.
- Review of Employment Data collected by the area agency and Bureau for fiscal years 2006-2009.
- Review of Bureau of Health Facilities Administration program certification data from 2005-2010.
- Review of 2009 Complaint Investigator Summary
- Review of Early Supports and Services Family Outcomes data collected in calendar years 2007, 2008, and 2009.
- Review of results of a written survey of parents and guardians conducted by the redesignation team in collaboration with the area agency in September 2010 (98 respondents).
- Review of New Hampshire Developmental Services Family Survey conducted by the Community Support Network, Inc. (CSNI) for the year 2007.
- Review of results of written surveys of the following:
  - ❖ Area Agency Service Coordinators (8 respondents)
  - ❖ Family Support Staff and Coordinators (7 respondents)
  - ❖ Direct Service Providers (39 respondents)
  - ❖ Home Providers (5 respondents)
  - ❖ Early Supports and Services direct service providers (9 respondents)
  - ❖ Area Agency Nurses (11 respondents)
- Review of results of a Board Self Assessment Survey (7 respondents)
- A review of financial audits of the area agency.
- A review of 10 records including service agreements at the Claremont office
- An interview conducted by the review team with the Region 2 Board of Directors on November 22, 2010.
- An interview conducted by the review team with the Region 2 Family Support Council on October 19, 2010.
- An interview conducted by the review team with the Region 2 Management Team on October 19, 2010.
- An interview conducted by the redesignation team with the region's two Self-Advocacy Groups on October 20, 2010 and October 22, 2010. Eleven members attended.
- Review of written questionnaire by the Management Team
- Review of written questionnaire by the Director of Service Coordination
- Review of written questionnaire by the Director of Family Support
- Review of written questionnaire by the Executive Director, regarding Quality Improvement.
- Review of written questionnaire by the Complaint Investigator.
- Review of written questionnaire by the Human Rights Committee Chairperson.
- Attendance at two forums for Individuals October 20, 2010 and October 22, 2010. Approximately 30 individuals attended.

- Attendance at two forums for Families and Guardians on October 20,2010 and October 21, 2010. Fifteen family members attended
- Phone interviews with management team staff of 12 sub-contract agencies.
- Phone interviews with 13 agencies identified to the redesignation team by Region 2 as Cooperating Agencies in providing supports and services.
- Review of the agency's Fiscal Policies
- Review of documentation, including:
  - ❖ Area agency policies and procedures
  - ❖ Job descriptions of key personnel
  - ❖ Board of Directors Orientation manual
  - ❖ Board of Directors meeting minutes
  - ❖ Human Rights Committee meeting minutes
  - ❖ Subcontract Agency meeting minutes
  - ❖ Data regarding complaint investigations
  - ❖ Data regarding medication administration occurrences
  - ❖ Human Rights information
  - ❖ Emergency Plan
  - ❖ Area agency Website

## **I. MISSION**

- I. The area agency demonstrates, through its services and supports, a commitment to a mission that embraces and emphasizes active community membership and inclusion for persons with disabilities.**

***Expectations:***

**The area agency is unequivocal in its mission: supporting people who have a disability in being valued members of their communities, and educating communities to recognize the value of individuals who have a disability. Individuals who receive services in the region and/or their families and guardians have a clear understanding of the mission and its implications. All staff members of the area agency and of its provider agencies are committed to this common mission and understand the purpose of their work.**

- I.1 The area agency mission articulates a commitment to community membership and inclusion for people with disabilities.**
- I.2 Individuals, families/guardians, and collaborating agencies are aware of the mission of community membership and inclusion for people with disabilities.**
- I.3 The area agency and its subcontract agencies staff, including all direct service providers, are aware of the mission of community membership and for people with disabilities, work to support individuals and their families in developing and maintaining relationships with family, friends, and community members.**
- I.4 The area agency focuses on providing inclusive opportunities in all service arrangements.**
- I.5 The area agency supports individuals to participate in paid employment, volunteering and being members of community organizations, as they choose.**

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## **II. RIGHTS, HEALTH AND SAFETY**

### **II. The area agency, through multiple means, demonstrates its commitment to individual rights, health and safety.**

#### ***Expectations:***

The area agency has systems in place to promote the health and well being of the individuals who receive services. It is proactive in its efforts to protect individuals from abuse, neglect, and exploitation; and, when there are rights violations or questionable injuries, these are thoroughly investigated and the information is used to prevent future occurrences. Individuals, families, guardians and service providers receive on-going training regarding rights, rights' protection, health promotion, and safety.

- II.1 The area agency has policies and processes to ensure that individual rights protection, health care needs, safety and emergency situations are addressed.**
- II.2 Individuals and families/guardians have been made aware of their rights, health care information, and safeguards and understand them.**
- II.3 The area agency supports the individual's right to engage in meaningful activities during day and residential services, as evidenced in service agreements and progress notes.**
- II.4 The area agency assures that trainings for staff, subcontract agencies, individuals, self-advocacy groups and families/guardians include information on rights protection, Basic Health Observation Guidelines, safety measures and emergency situations, and provides organizational support for self-advocacy groups.**
- II.5 The area agency uses an effective complaint process, which includes follow-up on an individual and system-wide basis.**
- II.6 Individuals and families express a feeling of safety and well-being.**
- II.7 The area agency has a Human Rights Committee that provides oversight regarding rights, health care needs, and safeguards.**

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### **III. CHOICE, CONTROL AND SATISFACTION**

**III The area agency provides individuals and families with information and supports to design and direct their services in accordance with their needs, preferences, and capacities and to decide who will provide them.**

***Expectations:***

The unique needs, strengths and preferences of individuals and families are acknowledged, respected and supported. Individuals and families/guardians have the knowledge, authority and support they need to direct and manage their supports and services and to decide who will provide them. Supports and services are designed to address the needs of individuals and their families, and to improve the quality of their lives.

**III.1 Individuals and families/guardians are given information to help them understand their rights and responsibilities to plan, direct and manage their services and resources.**

**III.2 Services and goals are customized and reflect individual and family/guardian choices.**

**III.3 Individuals and families are supported to reach their goals.**

**III.4 Individuals and families/guardians are satisfied with the type of service options offered to them and the quality of services provided.**

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## **IV. INDIVIDUAL AND FAMILY/GUARDIAN INVOLVEMENT**

### **IV. The area agency involves those who use its services in regional planning, system design and development.**

#### ***Expectations:***

The area agency believes that people who need and/or receive services have the greatest investment in and understanding of how those services should be designed and provided. Individuals and families/guardians are invited, welcomed, and supported as full participants in system planning and decision-making. The opinions of individuals and families/guardians are continuously sought to inform policy making and system improvement. Financial and other assistance is available to enable individuals and families/guardians to play leadership roles and participate in all activities that affect them.

- IV.1** Individuals and families/guardians are made aware of area agency activities and committees, including the ones related to regional planning and quality improvement. They are invited, supported and valued as participants.
- IV.2** Individuals and families/guardians receive information from the area agency regarding proposed or implemented changes in regional and/or statewide services.
- IV.3** Family Support Council members are invited and supported to participate in the agency's planning regarding overall availability, accessibility and quality of services, budget development, and waiting lists. Their participation is valued by the area agency.

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## V. SYSTEM OF QUALITY IMPROVEMENT

- V. The area agency continuously assesses and improves the quality of its services and ensures that the recipients of services are satisfied with the assistance that they receive.

*Expectations:*

There is a resolute and continuous commitment to excellence and quality improvement. The area agency is committed to assessing the quality of services on an ongoing basis and is accountable to individuals and families who receive services. Individuals, families, as well as others are active partners in evaluating system quality and provider performance. There is continuous evaluation and improvement of services and supports to achieve better outcomes for individuals and families.

- V.1 The area agency and its subcontract agencies have policies and processes related to ongoing quality assessment and improvement. Ongoing inquiry regarding individual and family/guardian satisfaction is a common practice of the area agency and its subcontract agencies.
- V.2 The area agency and its subcontract agencies share the results of quality assessments and utilize the information to improve services, operations, and personnel development.
- V.3 The area agency provides effective follow-up if there is no progress in service agreement implementation.

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## **VI. GOVERNANCE AND ADMINISTRATION**

**VI. The area agency Board of Directors and the Management Team demonstrate effective governance, administration and oversight of the area agency staff, providers, and if applicable, subcontract agencies.**

***Expectations:***

The area agency Board of Directors and Management Team play crucial leadership roles in administering an effective regional service system. A well informed and active Board and Management Team fulfill their responsibilities by engaging in and promoting effective communication with and among all stakeholders in the agency and region, achieving quality services, individual/family/guardian satisfaction, and employing a well trained, supported and supervised work force. The Board and Management Team engage in activities to enhance the area agency's association with the community at-large on behalf of individuals with disabilities.

- VI.1 The area agency policies, procedures, bylaws, organizational chart and job descriptions reflect current agency practices.**
- VI.2 The area agency Board of Directors and Management Team members receive orientation and ongoing training regarding their roles and responsibilities, as well as new regional and/or statewide initiatives.**
- VI.3 The Board of Directors and Management Team provide oversight and leadership to achieve individual safeguards, quality services and individual and family/guardian satisfaction.**
- VI.4 The management team provides effective communication, supervision and support to staff, providers and subcontract agencies.**
- VI.5 The area agency engages in community outreach and public education efforts regarding its services and mission.**
- VI.6 The area agency provides organizational supports for and has a collaborative relationship with the Family Support Council and the local self-advocacy group.**
- VI.7 The area agency and its subcontract agencies support staff orientation and ongoing training; and the area agency requires that subcontract agencies provide orientation and ongoing training consistent with area agency practices.**

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## **VII. BUDGET DEVELOPMENT AND FISCAL HEALTH**

**VII. The area agency is fiscally sound, manages resources effectively to support its mission and utilizes generic community resources and proactive supports in assisting people.**

***Expectations:***

The Management Team and Board of Directors provide leadership in achieving financial health in the pursuit of the area agency mission. The agency's resource allocation, budget oversight, and billing procedures reflect sound fiscal management. The development and management of the agency and individual budgets are achieved through the involvement of appropriate stakeholders. The agency reviews its fiscal status on an ongoing basis, maintains good financial health and considers cost effectiveness in resource allocation. In responding to requests from individuals and families/guardians for assistance, the area agency draws on generic community supports and services as key resources to enhance its own funding, including its efforts to address the needs of those who are on waiting lists.

- VII.1 The area agency has policies and procedures to ensure sound fiscal management and financial health.
- VII.2 The area agency Management Team members are involved in regional budget development.
- VII.3 The area agency and its subcontract agencies seek input from appropriate staff and providers in developing and managing budgets.
- VII.4 The area agency manages its resources to address waiting list needs.
- VII.5 The area agency seeks and utilizes other/generic sources of revenue to enhance its financial resources.
- VII.6 The area agency is financially sound and manages its fiscal resources effectively and efficiently.
- VII.7 The area agency demonstrates a commitment to proactive supports and services to reduce the need for or intensity of long-term services.

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## **VIII. COMPLIANCE**

### **VIII. The area agency complies, along with its subcontractors, if applicable, with state and federal requirements.**

#### ***Expectations:***

The area agency and its subcontract agencies are knowledgeable of and in compliance with the basic state and federal standards regarding services. The area agency and its subcontract agencies fulfill requirements regarding certification of day and residential services, medication administration, determination of eligibility for area agency services, establishment of service agreements for each person being served, authorization for Medicaid's Community Care Waiver funding stream, provision of Family Support and Early Supports and Services, and management of waiting lists. The area agency and its subcontract agencies also submit to the Division requested information and data regarding services provided under the contracts with the State.

**VIII.1 The area agency and its subcontract agencies comply with all applicable federal and state laws and regulations.**

**VIII.2 The area agency and its subcontract agencies comply with the Division of Developmental Services' requests for information and data that are accurate, timely and in correct format.**

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## MISSION

### **Expectations:**

*The area agency is unequivocal in its mission: supporting people who have a disability in being valued members of their communities, and educating communities to recognize the value of individuals who have a disability. Individuals who receive services in the region and/or their families and guardians have a clear understanding of the mission and its implications. All staff members of the area agency and of its provider agencies are committed to this common mission and understand the purpose of their work.*

PathWays of the River Valley, the Region 2 area agency mission statement:

*“PathWays is dedicated to expanding the opportunities that enrich the lives of people with disabilities. Our passion is working together with children, adults and their families to create their own desired future in their own community. We provide our services in the spirit of partnership and respect.”*

The PathWays’ mission, consistent with the mission of the Bureau of Developmental Services, focuses on the importance of an equal partnership between the area agency and the people who receive services. The mission statement sends a strong message that the area agency values the individuals and families it serves and works to provide the supports needed for them to experience a full life in their community. The statement is publicized on the PathWays website, prominently displayed in all of its offices and included in all area agency brochures that describe services.

Having a clear and inspiring mission statement is important to the people who work within an organization, serving as a guide, especially during difficult times. It also serves as a tool by which others are able to evaluate the organization. The redesignation family survey had a total of 98 respondents. Over eighty percent responded very positively and 10% responded somewhat positively when asked if their family member was supported to maintain and form relationships and to become an active member of the community. The Community Support Network, Inc (CSNI) survey of 2007 had similar positive results. PathWays supports two Self-Advocacy groups in the region: The Upper Valley Neighbors with 11 members, and the Upbeat group with 6 members. During their interview with the redesignation team, members cited ways that the area agency supported them to become involved in their communities. As members of the Self-Advocacy group, several had visited potential sites for the area agency’s new satellite offices and some are members of the area agency’s Transportation Committee. One self-advocate is currently a member of the PathWays’ Board of Directors and others have been members in the past. Members have also been involved in interviewing and hiring staff.

The Region 2 Family Support Council provided information about the ways in which they educate the community on the importance of inclusion. The Council spoke of a variety of trainings they sponsor for families, individuals who receive services and the community at large. These included educational advocacy through the Parent Information Center (PIC): CPR and home safety; community based art classes; and contracting with the Special Needs Support Center to provide individual and family recreational activities. The Director of Family Support, in a separate interview, reported that Family Support flexible funds were used to support individuals to participate in community dance and art classes, and with memberships to fitness centers. The area agency Board of Directors was also interviewed during the redesignation

review. Members described the ways that they as individuals promoted the mission by speaking about the agency in their workplaces and in their own communities. They also stated that they were involved in a number of other councils related to supporting individuals with disabilities.

In order to assess community awareness of the area agency mission and its services, thirteen community agencies and organizations that collaborate with PathWays were interviewed by phone during the redesignation review. When asked if the area agency has made it clear to them that its mission is to assist people who have a disability to actively participate in the life of their community, 100% responded affirmatively. Comments were highly positive about the area agency and its mission: “They have helped a great many people with disabilities in terms of community access...”

From 2006 to 2009, 45 individuals who receive services in the region participated in the BDS Adult Outcome Survey interviews. They responded to multiple questions about their services and the supports they received to maintain their relationships, form new ones and generally become involved in the life of their community. Over 80% responded positively about the supports they received to keep in touch with family and friends and to invite them to their homes to visit. They were equally positive about the support they received to attend religious services, their transportation supports in general and their health and dental care. Fewer responded positively about employment, voting, self-advocacy, club membership and volunteering. Since not everyone who participated in the survey answered every question, the totals differed in each category. Eleven of 42 individuals were working at the time they were interviewed; ten of 17 who were able to vote had voted in the previous election; five of 21 who were interested in being part of a self-advocacy group were members of this group; eleven of 26 belonged to a club or organization; and 17 of 42 were volunteering. Since these surveys provide information about a very small percentage of individuals who receive services in the region and they were done over a four-year period (on average 10 individuals per year), the results must be viewed together with other data.

Thirty-nine direct service staff in region 2 responded to the redesignation survey. Seventy-two percent (72%) responded positively when they were asked if they received the help they needed to assist individuals in maintaining community relationships. Fewer, however, reported that they received the help they needed to assist the people they supported to become involved in community organizations (62%). In their summary comments, direct service staff were generally very positive about the area agency’s support for their work on inclusion. Although only five home providers responded to the redesignation survey, four of the five responded positively when asked about the help they received from the area agency to support individuals to participate in community events and to develop and maintain relationships. In their redesignation surveys, service coordinators and Early Supports and Services (ESS) staff were very positive about the support they received from the area agency in this area, 88% and 95% respectively.

The majority of the twelve subcontract agencies that were interviewed during the redesignation review reported that they worked collaboratively with PathWays to achieve a common mission. One subcontract agency was less positive, indicating that the area agency tended to see itself in competition with this subcontract agency, rather than in a supportive role.

Ten service agreements were reviewed by the redesignation team to determine the degree to which individuals were involved in their communities. Seven of the ten provided good examples of inclusive opportunities: taking community classes; volunteering; going to the local gym; using library resources—all inclusive arrangements. Two of the ten records referred to many non-

inclusive group activities, and one service agreement for an individual living in a large agency-operated home, lacked evidence of any inclusive opportunities.

Among the most important ways that people connect with others in their communities is through their work and volunteering. As noted earlier in this report, only 11 of the individuals who participated in the Adult Outcomes Survey over a four-year period were employed at the time of their interview, and only 17 had volunteer positions. The employment data collected by the Bureau of Developmental Services provides a broader view of employment for individuals who receive area agency services. Based on this data from 2007-2010, the average pay per hour for individuals supported by PathWays, \$8.27, is currently significantly higher than the statewide average of \$7.33. It is, in fact, the highest in the state at this time. The average number of hours individuals worked per week (11) is also higher than the statewide average of nine. As part of the Medicaid Infrastructure Grant (MIG), the region embarked on the River Valley Employment Initiative and has had success in bringing their regional partners together. The region has not, however, seen a significant increase in the number of individuals employed over this four-year period. During this fiscal year, the area agency will become involved in Project Search, an employment initiative that provides education and training to individuals with disabilities. Project Search is currently in effect in other regions and other states, and where it has been implemented there has been a marked increase in employment.

**Consideration:** Having the highest rate of pay in the state for individuals that receive area agency employment services is a commendable achievement. Rate of pay is one of the indicators of better quality employment opportunities. Much work remains to be done, however, to open these opportunities to many more individuals in the region. The area agency's Board of Directors, Management Team, and Family Support Council could all play a role in advancing employment for individuals. The community contacts that they have would broaden the networking initiatives of the employment specialists at the agency. It will take an agency-wide effort to increase the number of individuals who find jobs in the coming year, having the same high standards for rate of pay and hours that is currently used in the region.

The Region 2 area agency has a clear mission, understood by individuals, families, providers and staff. With few exceptions, the staff and providers in the region feel supported by the area agency to accomplish their common mission. The results of individual and family surveys also gave evidence that the agency is providing the supports needed by most to become involved in their chosen communities. The area agency also supports two active and involved Self-Advocacy groups in the region. An agency wide effort to expand employment and volunteer opportunities for individuals who have a developmental disability or acquired brain disorder could enhance the positive gains made in this area over the past several years.

## RIGHTS; HEALTH AND SAFETY

### **Expectations:**

*The area agency has systems in place to promote the health and well being of the individuals who receive services. It is proactive in its efforts to protect individuals from abuse; neglect; and exploitation; and; when there are rights violations or questionable injuries; these are thoroughly investigated and the information is used to prevent future occurrences. Individuals; families; guardians and service providers receive on-going training regarding rights; rights' protection; health promotion; and safety.*

One of the fundamental rights of any person receiving human services is the right to be safe in the service system. Each area agency must have policies and protocols to protect individuals and provide services in a manner that promotes their health and welfare.

PathWays has policies and procedures in place for rights protection, health care, safety and emergency responses. In their online redesignation self-assessment survey, members of the area agency Board of Directors were unanimous in their support of PathWays' policies to address the health and safety of the individuals and families that receive services in the region. In 2009, the area agency completed a comprehensive review of its systems and reaffirmed its commitment to an independent complaint investigator and an on-call, crisis response system that involves several key departments, including Family Services and Nurse Trainers. Work continues on revising all area agency policies and aligning these with employee training and Internet availability. The area agency will be revising its emergency response plan, making it more inclusive.

Nine of the 12 subcontract agencies interviewed during the redesignation review reported that they had sought the assistance of the area agency in crisis situations. In their comments, seven found the agency to be very responsive, while one felt that PathWays was more critical than supportive in an emergency. In their redesignation survey, 100% of the nurse trainers reported that the area agency provided them with the assistance they needed to maintain individuals' health and safety. Ninety percent (90%) reported that systems were in place to assess and monitor the health supports for frail elders. Responses were less positive about the degree of involvement of nurse trainers in abuse and neglect allegations, and mortality/sentinel event reporting: 33% and 60% respectively.

**Consideration:** The agency should consider revising its procedures to include contact with nurse trainers for any reported abuse or neglect, and all mortality and sentinel event reports. These procedures should also be applicable to all subcontract agencies in the region.

In order to promote their own health and safety, people who receive services and their families must be aware of their rights. In the Adult Outcomes Surveys conducted in fiscal years 2006-2009, 71% of respondents indicated that they understood their rights and 90% indicated that they knew whom to contact if they had a problem or did not feel safe. Only 43%, however, were aware that they could file a complaint. In the family surveys conducted during the redesignation review, on average 82% of families reported that they were always satisfied with the health and safety supports provided their family member and an additional 11 % were sometimes satisfied. Over 80% knew whom to contact to report a rights violation. This information was supported at the redesignation family and guardian forums where most families reported that they were aware of the area agency complaint process. It was also supported by the CSNI family survey of 2007 where 93% of the respondents indicated that they were aware of and understood the rights of

individuals in the service system. Equally important, families reported that they would contact the area agency if they had any concern that a right had been violated (97%).

In a redesignation survey, the area agency's Complaint Investigator described ways in which individuals and families were made aware of the complaint process. This is done at intake and at annual service agreement reviews. There is also an area agency brochure entitled "Individuals Basic Rights" that includes information about rights and how to get help through the area agency or outside sources. The brochure was designed with the help of the two regional Self-Advocacy groups.

The redesignation team assessed the degree to which individuals exercised their right to engage in meaningful activities during day and residential services by conducting a comprehensive review of ten service agreements. Six of the agreements had specific goals related to individual interests as identified in the personal profile. In four service agreements the goals were general and related to routine supports provided to most people that receive services. Documentation of activities followed a similar pattern: some progress notes were detailed and specific to goal attainment, while others were vague and did not provide information necessary to assess goal attainment. All ten-service agreements did, however, document a high level of health care management for both routine and complex medical needs, with consistent follow-up on recommendations and on medical appointments. Each personal profile contained in-depth information about the individual, and 100% of the records reviewed documented service coordinator assessment of satisfaction.

**Recommendation:** The area agency has clearly provided excellent training in several areas related to service agreements and progress notes, particularly related to health and safety. There is a need to provide additional training for service coordinators on customized goal development and for service providers on documenting progress in achieving the goals.

In order to provide services that safeguard individual rights and safety, an area agency must have a strong education component for its workforce. Eleven of the twelve subcontract agencies in the region reported that PathWays required that they either provide their own training on rights protection or send their staff to area agency trainings. The area agency also set expectations for emergency protocols and staff training on positive behavior management. The Complaint Investigator in the region is required to attend all BDS trainings for investigators and participate in the quarterly state complaint investigator roundtables.

Direct service staff, family support staff, ESS staff, home providers and service coordinators were asked if they felt the training they had received prepared them for addressing rights violations and handling medical and behavioral emergencies. The vast majority (95%) reported that they knew what to do if they became aware of an individual rights violation. In addition, 88% of these staff felt they had sufficient information to respond to medical or behavioral emergencies. Two of the five home providers who responded to the survey indicated, however, that they did not have this information prior to providing services but they now felt equipped to respond to medical or behavioral emergencies.

Assessment of the area agency's complaint process included reviews of the redesignation questionnaires completed by the external Complaint Investigator and Management Team, reviews of complaint data, and staff surveys. Of the 270 complaints filed over a five-year period, 237 were resolved using the formal complaint process and 33 using the informal process. All complaints had been resolved and none is currently on appeal. When the Complaint Investigator was asked to rate the support received from the area agency as Good/Average/Poor, the response

was, “excellent—far above average.” The Management Team requires a report on corrective action, both for the individual and on any systemic problems, and follow-up on this action is reviewed by the Complaint Investigator. In their survey responses, direct service staff, family support staff, home providers and service coordinators gave the area agency, on average, a 94% on its responsiveness to reports on rights violation allegations.

Individuals and families responded to questions in surveys about feeling safe and having their health needs addressed. In the Adult Outcomes Surveys of 2006-2009, 99% of the participants reported that they felt safe at home and during work/day services, and that they were treated respectfully by health care professionals. The CSNI 2007 survey of families revealed a 90% satisfaction rate for safety and health care but a lower percentage (73%) of satisfaction for mental health/behavioral and dental needs. Direct service staff and service coordinators gave the agency an equally high rating for addressing the safety and health care needs of individuals (90% positive).

The area agency has a Human Rights Committee that meets quarterly. It is comprised of five members that represent the agency, families and the community at large. The Complaint Investigator attends the committee meetings twice per year. The committee focuses on complaints, their resolution, and follow-up action. It reviews each investigation individually and requires a report from the Director of Family Services on the action taken. The Human Rights Committee does not review accident/incident reports or medication errors. The committee is currently reaching out to increase its membership by including an individual that receives services, a Board member and a member of the Family Support Council.

**Consideration:** The area agency may wish to examine the amount of time spent by the Human Rights Committee on individual complaints and provide some of this information in a summary report. This would leave the committee with more time to review other summary reports, including accident/incident reports and medication errors.

The Region 2 area agency has many systems in place to promote the health and safety of the individuals that receive services in the region. Based on the results of a number of surveys of individuals, families, staff and other providers, individuals are aware of their rights; they feel safe both at home and when they are being supported in the community; and their health care needs are being met. The area agency has an effective complaint process and families have indicated that they would use it if they became aware of any rights violation. The recommendation and suggestions included in this section would serve to strengthen service agreements, training in certain areas, and the valuable work of the Human Rights Committee.

## CHOICE, CONTROL AND SATISFACTION

### **Expectations:**

*The unique needs, strengths and preferences of individuals and families are acknowledged, respected and supported. Individuals and families/guardians have the knowledge, authority and support they need to direct and manage their supports and services and to decide who will provide them. Supports and services are designed to address the needs of individuals and their families, and to improve the quality of their lives.*

For many years, the developmental services system has aspired to listening to people who receive services and their families in order to provide services based on their needs and choices. People who have a developmental disability or acquired brain disorder must be equal partners with agencies in the service system and area agencies are evaluated on the degree to which they facilitate this.

During the two Region 2 family forums, some families expressed concern about the promotion of Consumer Directed Services in the region, not fully understanding its implications for them. They suggested that the area agency provide written information that describes all of its services, more fully than what is currently available on its website and in brochures. Most families at the forums reported that services reflected their family members' choices and desires. They also said they were very satisfied with respite providers and that information related to respite was readily available to them. Families commented on how important service coordinators were to their family members and to them. Several families indicated that their service coordinator had been changed by the area agency without their input in order to accommodate a reorganization of consumer/participant directed services. This change, acknowledged by the Management Team, was difficult for some families who said that the service coordinator "is their lifeline", especially during difficult times. The redesignation family survey results did not appear to confirm a region-wide problem in this area, with 74% of the 91 respondents reporting that they were made aware of any changes in service coordination.

**Consideration:** Problems for a few families remain a problem for the agency. When there is a conflict between the needs of the area agency to reorganize and the needs of the individual and family to retain their service coordinator, preference should be given to the individual and family to the greatest extent possible.

The redesignation family and guardian survey and the CSNI family survey of 2007 provided some conflicting information. (Note: the percentages in this report are based on the total number of families that responded to a specific question, not on the number that responded to the survey.) When families were asked in the CSNI survey how satisfied they were overall with the information they receive from the area agency, 85% responded positively; and in the redesignation survey there was a 77 % positive response to a similar question. When families were asked specific questions in the redesignation survey about whether or not they received wait list information, however, 43% of those that responded said "yes", and 25% said "sometimes." The two questions related to transition times had similar responses where, on average, 52% of respondents said they received information and 11% responded "sometimes." These echoed the concerns expressed at the family forums about the type of information available to families during times of change. At their forums, some families had also noted that the Resource Directory developed by Family Support at the agency has been a very useful tool for families; however, keeping the directory current has been a challenge.

**Consideration:** The area agency provides information about services on its website, in occasional newsletters and in PathWays brochures, in addition to holding periodic forums and having Family Support staff meet with families. Transition times are particularly stressful for individuals and families who may not be in a position to absorb all the information they receive, or the information may not be in sufficient detail to address concerns. The agency needs to examine the quality and quantity of the information provided. Perhaps reinstating the newsletter on a more regular basis and having columns dedicated to wait lists and transitions would be one way to provide families with ongoing information in these areas.

During their interview with the redesignation team, the PathWays Management Team underlined the area agency's commitment to expanding Consumer Directed Services, now referred to as Participant Directed and Managed Services (PDMS) in the region.\* The area agency's Board of Directors supported the creation of a "Participant Guided Supports Advisory Group" to assist with implementing a systemic change. In the past year, 10 new PDMS were implemented and nine individuals went from traditional services to managing their own services. There are eight more individuals who have opted for this change and these will be done within the next six months. In their written response to the redesignation questionnaire, the Management Team commented on the challenges of "working with individuals and families on service design/participant guided supports within the context of the existing service delivery system". PathWays management is committed to providing these services to all who choose PDMS.

The redesignation staff survey results were also positive when rating the agency for its work overall in providing individuals and families with the information they needed to make decisions: 100% of family support staff, ESS direct service staff and service coordinators responded "always" or "usually". Direct service staff and home providers in adult services were less positive: 67% of direct service staff and 80% of home providers. With regard to questions to families related to individual budgets, and whether or not the area agency has explained to them and their family member how they can be involved in deciding how allocated funds are spent and whether or not they were encouraged to become involved, 66% responded "yes" and 7% responded "sometimes."

In order to assess how services in the region are customized and reflect individual and family/guardian choices, subcontract agency managers were interviewed. All 12 subcontract agencies reported that their agencies promoted choice and control for individuals and their families and cited several examples. Individuals choosing where and with whom they lived and making changes based on their input were prime examples of listening to people and providing services accordingly.

The results of surveys of individuals who receive services, their families and area agency staff were reviewed to assess how services reflect individual and family choices. In the Adult Outcome Survey interviews, a very high percentage of respondents (97%) said that they chose their goals; chose where they lived and with whom they lived; and chose the activities they were involved in. A smaller percentage reported that they selected the staff that supported them in their homes (76%) and an even smaller percentage said they had chosen the staff that supported them during day services: 53%. Individuals that attended the redesignation consumer forum spoke of the number of ways they exercised choice and control over their services, including a wide variety of living arrangements. They also described how they were supported to work in jobs they had selected. Similar results were obtained from family surveys, including the CSNI, redesignation and ESS family surveys, with an average of 89% responding positively to questions related to services being based on their or their family members' choices. Staff surveys of service coordinators, family support coordinators, ESS staff and direct adult services staff reflected these

positive responses related to individuals and families exercising choice and control over their services (average 95%). A very small number of home providers in the region responded to the redesignation survey (5). Of this number 3 responded positively to questions related to choice and control. In the questions related to individuals being involved in the selection or hiring of their support staff, area agency staff and home providers echoed the responses of the Adult Outcomes Surveys with 66% reporting that the area agency assisted families, guardians and individuals in selecting or hiring their support staff.

***Recommendation:*** Individuals and families in the region exercise choice and control in many areas. They are not truly in control of these services, however, unless they are involved in selecting or hiring the staff that support them. Although the process of involving individuals and families in hiring or selecting staff is a far greater challenge when people are receiving traditional services, the area agency must incorporate, as a final step in the hiring/selection process, input from the individuals and families who will be receiving the services.

The individual and family/guardian surveys reviewed during the redesignation process included a large number of questions about how effective the area agency was in the following areas: providing services in accordance with service agreements; providing respite services; researching and providing assistive technology; assisting families to connect with resources; being responsive to requests from individuals and families; fostering individuals' participation in decision-making; assisting individuals to learn and maintain skills; and assisting individuals to meet their goals. On average, there was a 90% positive response. In questions pertaining to individuals being treated with dignity and respect by service coordinators, residential and day services providers and staff, there was almost unanimous agreement that individuals are treated with dignity and respect throughout the region, 98% positive.

As a final comment on the services and supports provided by the area agency, individuals, families and guardians were asked in all surveys if they were satisfied with the type of service options offered to them and about the quality of the services provided. Overall satisfaction with services was very positive, with a 94% satisfaction rate from individuals and 85% from families. At their forums families also reported that they were very satisfied with respite services, with a few indicating that they could use more assistance in this area.

Although improvements are still needed, particularly with regard to staff reassignments and the resulting impact on individuals and families, the Region 2 area agency has made great progress since the previous redesignation review in supporting individuals and families to exercise choice and control over their services. It was also clear in this review that the people who receive services are treated respectfully in all service settings.

\* During the family forums, families suggested that area agencies avoid making changes in terminology since it only adds to the confusion. Examples: from case managers to service coordinators to service brokers, and sometimes resource coordinators; and from Consumer Directed Services (CDS) to Participant Directed and Managed Services (PDMS).

## INDIVIDUAL AND FAMILY/GUARDIAN INVOLVEMENT

### **Expectations:**

*The area agency believes that people who need and/or receive services have the greatest investment in and understanding of how those services should be designed and provided. Individuals and families/guardians are invited, welcomed, and supported as full participants in system planning and decision-making. The opinions of individuals and families/guardians are continuously sought to inform policy making and system improvement. Financial and other assistance is available to enable individuals and families/guardians to play leadership roles and participate in all activities that affect them.*

A sense of community and common purpose can only be achieved when an area agency reaches out to individuals and families that receive services, letting them know that their participation in planning meetings and on committees is important and valued. An agency must also support individuals and families to participate to the fullest extent possible.

In their redesignation interview, the Region 2 Board of Directors described the ways that individuals and families are invited to become members of the Board. These include collaboration with the Family Support Council in recruiting members; agency staff informing families as they meet with them; Board members' networking efforts; and the regional Parent-to-Parent association making families aware of this opportunity. Of the nine people currently on the PathWays Board of Directors one is an individual that receives services and four are family members. One of the four family members is also a member of the Family Support Council.

In their written responses to a redesignation questionnaire, the two area agency Family Support Directors, as well as family support staff, reported about the ways in which PathWays provides opportunities for families to impact policy-making and strategic planning. As part of strategic planning, the area agency contracted with a professional facilitator to engage families in creating a new vision and structure for the delivery of family support services in the region. In order to keep families apprised of family support activities and important issues, family support staff use communication technology, such as the area agency website and emails, as well as traditional mailings. Family participation on the Family Support Council is also enhanced by using iChat and phone conferencing. Gas cards for transportation costs and additional funds for respite are also ways that the agency supports families to participate in Council and committee meetings. In addition to participation on Board committees, individuals and families are members of six area agency committees. Two family members are on the Facilities Committee and one on each of the following committees: Human Rights, Wait List, ESS Continuous Quality Improvement Committee, and the Safety Committee.

The eight member Family Support Council represents families from both Sullivan and Grafton counties. During their interview with the redesignation team, Council members reported that they were always invited to take part in strategic plan development and on updates to the plan. Each of the region's strategic work plan initiatives highlights individuals and families as important stakeholders to involve in the process.

The area agency Management Team identified similar efforts to engage families in the region. In addition to posting opportunities for involvement on the area agency website, the more personal approach is used. Service coordinators inform individuals and families about agency activities and they are asked to identify families that might be interested in being part of a committee or advisory group. Personal invitations are then extended. The Management Team also noted that

meeting and event times and dates are chosen for maximum convenience of families and individuals. Explanations of the specific purpose of the meetings are provided in advance, and agenda and meeting notes can be mailed to committee members that are unable to attend.

When Self-Advocates were asked at their forum about their involvement in area agency activities, committees and work groups, three individuals reported they had served on the area agency Board in the past and one was currently a Board member. Others served as representatives on a regional transportation committee. The Self-Advocates stated that they appreciated the assistance of their interim advisor and they expected to participate in the hiring of a new advisor. Although the Self-Advocates who attended the forum could not recall participating in the area agency's strategic planning, they reported feeling welcome to participate in any area agency committees.

Part of an area agency's responsibility is to keep its constituents informed by providing them with information on any proposed or implemented changes in regional or statewide services. As noted above, the Family Support Council was not only informed, it was part of the process to redesign the way family support services are provided in the region. Council members also reported during their interview with the redesignation team that they were kept directly informed through emails from the Executive Director and the Director of Family Services. The Executive Director also attends Council meetings quarterly. Any information about changes in the region or the state is communicated via letters from the Executive Director, through forums/focus groups, on the area agency website, and in occasional newsletters. The area agency has also initiated the use of Facebook. This is a first step in what the agency hopes to be an effective tool for communicating throughout the region.

Fifteen families attended the redesignation family and guardian forums held in the region. Although these families did not comment broadly about the information they received on regional and statewide changes at the forum, they did focus on their own personal experiences with services. Changes in staff, whether due to area agency organizational needs, or staff turnover, were problematic. (See Section III of this report under Considerations)

Other data gathered during family surveys indicated that families in the region are made aware of legislative hearings on bills that affect services or funding for people who have a disability sometimes, but not always: 54% responded "yes" and 21% responded "sometimes." When asked if they received information about changes in agency or statewide services, more families (75%) responded "yes", and 12% responded "sometimes." The CSNI 2007 survey had similar results, though the options for responses differed. It is interesting to note that when "Yes and Sometimes" were offered as answer choices in one survey, they had the same percentage as when "Always and Usually" were offered in another survey, a combined 75%.

In the yearly ESS family surveys, fewer families responded positively this year to the question about the extent to which the ESS program helped them to learn about the services available to them, with 59% responding favorably. Data in ESS is gathered regularly and the ESS Continuous Quality Improvement Committee assesses trends and makes recommendations for any needed changes. It is a process that has served the region well.

During their interview with the redesignation team, the Family Support Council reported that they felt the area agency valued their input. They were kept apprised about the region's wait list and they received ongoing information about the area agency's budget. One of the Family Support Directors reported in a written questionnaire that the results of the BDS Adult Outcome Surveys were also shared with the Council each year. Some of the ways the Council's work has directly benefited individuals and families include providing tuition assistance for families to attend

conferences; Council-sponsored educational and recreational activities for families; and additional respite allocations. Based on information from many sources, the work of the PathWays Family Council is highly valued by the area agency.

There was ample evidence during the redesignation review that PathWays reaches out to involve individuals and families in area agency planning activities and on its committees. There is a small but effective Family Support Council representing both counties in the region. Both the Family Support Council and the two Self-Advocacy groups in the region have a very positive relationship with the area agency and they feel well supported.

## SYSTEM OF QUALITY IMPROVEMENT

### **Expectations:**

*There is a resolute and continuous commitment to excellence and quality improvement. The area agency is committed to assessing the quality of services on an ongoing basis and is accountable to individuals and families who receive services. Individuals, families, as well as others are active partners in evaluating system quality and provider performance. There is continuous evaluation and improvement of services and supports to achieve better outcomes for individuals and families.*

Quality Improvement must be an ongoing effort in any organization, and it must occur at every level. Under Section III of this report, the area agency's assessment of individual and family satisfaction with services was reviewed, the most important indicator of high quality services. The area agency must also have in place an established system for evaluating all of its services and for using this information to improve service delivery.

PathWays has a Quality Assurance Policy in its Operations Manual that was revised in September 2010. The Operations Manual also includes reference to a requirement that all new provider agencies must submit a description of their own quality assurance strategies. In its current Strategic Work Plan, the area agency has several goals related to continuous quality improvement that are intended to promote the values of a "learning organization" at all levels. One of these goals, to assess the impact of the area agency merger with another area agency in 2006, was completed in 2009. The Work Plan is continuously updated and reflects implementation of goals, including the formation of a quality improvement committee that made recommendations to the Board in 2009.

In region 2, the Executive Director, Management Team, Area Directors and Resource Team members share responsibility for quality improvement projects in the region. Among the projects designed to enable individuals and families to have ready access to managers and staff, was the decentralization of administrative services from two large main offices to one main office and five satellite offices located in towns throughout the region. A Quality Assurance Administrator provides oversight of area agency certification compliance.

The area agency's ESS program has an active Continuous Quality Improvement Committee (CQI), comprised of a variety of stakeholders, including a family member, members of community organizations, school representatives and area agency staff. The committee uses program data to target areas in need of improvement. Two recent initiatives of the committee focused on improving transitions for children entering preschool special education from the ESS program, and developing an ESS informational brochure for physicians and others who may make referrals on behalf of families.

In response to the redesignation family survey question about how often the area agency asked them if they were satisfied with their services, 51% of families responded "always" and 33% responded "sometimes." When asked if the area agency followed up on their suggestions to improve services, 63% responded "yes" and 14% responded "sometimes." During its redesignation interview, the Family Support Council reported that survey results were shared with them and that the area agency involved them in discussions regarding improvements needed in the quality of services.

Redesignation surveys of family support staff, direct service staff, service coordinators, ESS staff and home providers in the region included questions about whether or not they were involved in discussions about improving the quality of services in the region. On average, 86% responded “yes.” When asked if these quality improvements efforts resulted in improved services for individuals, 85% responded “always” or “usually.”

During their redesignation interview, when members the PathWays Board of Directors were asked if the area agency shared the results of surveys and reports related to the quality of services, they unanimously responded, “yes.” The Board reviews this information and provides feedback to the area agency. One Board member participated in an area agency subcommittee on quality. Board members also reported that they underline the need for transparency, ensuring that families have access to information and understand how the agency operates.

In their interview with the redesignation team, The PathWays Management Team outlined ways in which quality improvement is an agency-wide effort and gave examples of the resulting concrete improvements in service delivery. One of the efforts to improve quality involved the area agency’s comprehensive review of its entire system. Entitled “Gap Analysis”, the report that was issued in December 2009 highlighted steps that should be taken to address gaps in the current system of quality improvement. Included among the recommendations was the need to create a mechanism for managers to meet periodically to share best practices, and the need to develop a method for trend analysis and follow-up. Also included was the need for improved distribution of information to all stakeholders and improved communication. Currently, managers evaluate feedback forms from the quarterly service coordinator satisfaction surveys, respite vouchers, and individual and family surveys. The area agency is working on developing a more formalized agency-wide continuous quality improvement (CQI) structure that will involve a “Clearing House” to receive information, and analyze and publish data.

***Consideration:*** The area agency currently does not have one staff member responsible for coordinating continuous quality improvement activities. Many staff are engaged in these efforts. PathWays may want to consider assigning one staff member responsible for coordinating CQI as it embarks on the creation of a more formalized agency-wide CQI structure. Combining training coordination and quality improvement is one approach. It could result in a more effective use of data to target training needs in the region.

Although these systems are not yet in place, the Management Team cited several areas of improvement resulting from its ongoing quality improvement activities: increased family participation in interviewing and hiring staff; better communications with families through email and the area agency web site; and the ESS Child Outcome Summary Form information being used to guide Individual Family Support Plans. The area agency took proactive measures to address the issues identified in the BDS regional and statewide 2010 “Quality Assurance Reviews of Community Residences” by establishing a Maintenance Department Committee and taking action steps to address any issues. Results were shared with the Board of Directors, the Operations Team and BDS. During its interview, the Management Team also gave examples of barriers to improving service quality in the region. Among these were the challenges of combining two different systems during the area agency merger with another area agency and the need to spend a greater amount of time building trust among individuals, families and staff.

The area agency Training Coordinator identified several feedback mechanisms used to improve the type and design of trainings in the region. Individual and family survey data is shared with directors in order to target specific needs. Employee survey data and information on performance

evaluations is also used, as well as feedback forms on trainings. The area agency is responsive to any requests from supervisors for revised training curriculums or new trainings.

Twelve of the region 2 subcontract agency managers interviewed during the redesignation review were asked about PathWays' expectations about quality improvement and about how involved they were in regional discussions about improving the quality of services. Five of the 12 subcontract agencies were aware that internal quality improvement mechanisms were a contractual requirement of the area agency; three of the 12 reported that they mutually shared quality improvement findings with the area agency; and four of the 12 identified ways that quality improvement initiatives led to area agency sponsored training or other supports to their agency. Each of the 12 agencies identified ways that they assessed their own services, including review of survey results, data on incidents, certification reports and progress notes. Subcontract agencies also said that the area agency reviewed similar information in their assessments of subcontract agency services. One positive comment from subcontract agencies was related to the area agency's service coordinators, "...they do a good job of communicating with the clients and really talking with them, making sure they are happy where they are living and healthy, and getting the services they need."

Although the area agency's nursing staff felt very involved in improving the quality of any health related services for individuals and in following up on both individual and systemic issues with medication errors (91% positive), several did not feel part of regional quality improvement activities or the sentinel event reporting process (55% positive).

***Recommendation:*** There is a need to involve subcontract agencies and nursing staff in regional continuous quality improvement activities. As the agency expands and formalizes its CQI process, these are key stakeholders.

There is evidence at all levels of the organization that PathWays is working toward an integrated system of quality improvement. It has several goals in its strategic plan dedicated to CQI and it has succeeded in achieving some of the initial goals. Keeping in mind the old adage, "When everyone is responsible, no one is responsible", the area agency would do well to reconsider its current approach. Although everyone in the region is responsible for the quality of the service he or she provides, the coordination of CQI throughout the region is needed to ensure that efforts are not fragmented.

## GOVERNANCE AND ADMINISTRATION

### **Expectations:**

*The area agency Board of Directors and Management Team play crucial leadership roles in administering an effective regional service system. A well informed and active Board and Management Team fulfill their responsibilities by engaging in and promoting effective communication with and among all stakeholders in the agency and region, achieving quality services, individual/family/guardian satisfaction, and employing a well trained, supported and supervised work force. The Board and Management Team engage in activities to enhance the area agency's association with the community at-large on behalf of individuals with disabilities.*

Staff and providers in an agency work most effectively within an organization that sets clear expectations, supports ongoing training, and provides a structure and an atmosphere that encourage open communications. Effective governance of an area agency is the role of the Management Team, guided by a Board of Directors that is actively engaged in reviewing policies and practices and providing oversight.

During the redesignation review, the PathWays Board of Directors participated in an on-line self-assessment as well as an interview with the redesignation team. Board members responding to the on-line survey indicated that they have a working knowledge of the by-laws, and actively participate in the Board's three standing committees. Board members agreed that the standing and ad hoc committees complete their tasks effectively and in a timely manner and report on progress to the full Board. The region 2 Board of Directors has been actively engaged in discussions about any new policies and it reviews all policies at least every two years. Having been reviewed in 2010, the Board by-laws reflect current practices. The area agency strategic plan is the primary tool used by the Board to assess accomplishments, and the plan clearly demonstrates that the Board has a prominent role in advising the agency. Although in March 2010, Board membership had fallen below the number of members required in He-M 505, this was addressed. The Board is currently comprised of 9 members, one of whom is an individual that receives area agency services. Four family members are on the Board of Directors and one of these family members is also on the Family Support Council. Board members represent the broad geographic area of the region, with a good balance from both Sullivan and Grafton counties.

Board members indicated that there were some areas that would need to be strengthened. They acknowledged that they have not assessed the need for ad hoc and standing committees, revising structures as necessary and setting goals at the beginning of each fiscal year. In their on-line survey, several Board members also indicated that a broader range of expertise on the Board would enhance its effectiveness. To its credit, the region 2 Board of Directors provided needed guidance in 2006 when the state required a merger of two area agencies. This was a long and involved process, the success of which rested on stakeholder involvement to ensure that the concerns of individuals and families were addressed.

The area agency has policies, an organizational chart, and job descriptions that are in place and up to date. Operational policies have been expanded and are currently in draft form. The area agency strategic plan is continuously reviewed by the Board and Management Team. It serves as a very useful management tool by setting specific goals and identifying persons responsible. Completion dates are always noted and new goals are added.

In its redesignation questionnaire, the area agency Management Team reported that members received ongoing training through participation in statewide activities, including CSNI quality improvement meetings and multiple coordinators' meetings. The area agency recruits and provides orientation training to its Board members in a manner that is consistent with its policies. Orientation consists of a comprehensive review of the developmental services' system, including a history of the institution and the area agency system. The PathWays mission and strategic plan are also reviewed during orientation. The Executive Director discusses the needs of the agency, future plans and the expectations of Board members, including their fiduciary responsibilities. Ongoing training for the Board is provided by the area agency Management Team as it reviews information about services throughout the year. The Board orientation manual, updated in 2010, includes a number of documents and resources as well as outlining Board responsibilities.

PathWays uses many avenues to provide oversight and leadership to achieve its goals. The Board's annual retreat is used to reflect on the agency's response to emerging trends and to set the course for the coming year. Based on a review of the minutes, the roles of the Board of Directors and Management Team are clearly delineated. The all-staff meetings held quarterly in the region provide an opportunity to disseminate information about agency-wide initiatives and for the Management Team to receive feedback from staff. Agency coordinators and business staff meet weekly; program staff and nursing staff meet monthly; and Human Resources staff meet quarterly. Senior managers meet semi-annually with home providers. These meetings at many levels of the organization are designed to ensure ongoing communication among all levels of management and staff.

In order to assess the effectiveness of communications, supervision and support of staff, providers, and subcontract agencies, the results of the redesignation surveys and interviews were reviewed. When asked to rate the area agency on the support and supervision they received, the accessibility of supervisors, and whether or not they had an effective voice in the agency, 93% of the area agency's service coordinators, ESS staff, nurses and family support staff gave a positive response. These staff also gave the agency, on average, an 85% positive rating for the training they were provided. Direct service staff were less positive in their responses, with an average 62% positive rating for the support, supervision and training they received. While a higher percentage (77%) of direct service staff reported that they received sufficient information to respond to medical emergencies, fewer, again 62%, reported that they were provided with sufficient training to respond to behavioral emergencies. The five home providers that responded to the redesignation survey were more positive about the information they received to respond to medical emergencies (100%) and behavioral emergencies (80%).

***Recommendation:*** In any service system, the moment of service delivery is the most important moment for individuals and families. There is a need to address the concerns of some direct service staff in the adult system. With services being entirely community based, these staff operate largely independently in the community and there are clearly some who do not feel sufficiently prepared. Managers would need to meet with these staff, listen to their concerns and put into place additional supports and training to address their needs.

The 12 subcontract agencies interviewed during the redesignation review commented on their relationship with the area agency. Of the twelve, 10 described their relationship with PathWays as "good"; one said "average"; and for one it was too soon to comment. Eight (8) reported that the area agency communicated effectively with them and they felt adequately supported by the area agency. Nine (9) subcontract agencies gave very positive feedback regarding the work done by service coordinators in the region, while three reported that the quality of service coordination varied, depending on the service coordinator, with some rated fair to poor.

Thirteen community agencies interviewed during the review commented very positively on the area agency's outreach efforts. They communicated with PathWays via email and telephone, and during their routine meetings with area agency staff. Some community agencies also reported that they collaborated with PathWays on mutual trainings for staff and self-advocates. The Family Support Council reported that it assists the area agency in keeping community organizations, health care providers and the general public informed about the area agency and its services.

Family Support Councils provide a valuable service to area agencies in their capacity as an advisory group. In its meeting with the redesignation team, the region 2 Family Support Council described its positive relationship with the area agency. Council members also reported that, after the merger of the two area agencies, the Council decided to have two chapters that meet monthly, with the chapters coming together quarterly as one advisory group to the area agency. They said that the area agency had been helpful to the Council in several ways, including maintaining mailing lists, processing mailings and promoting Council activities throughout the organization. The Executive Director and other Management Team staff keep the Council informed about area agency initiatives and services; the Council receives updated reports on its budget; it receives invitations to be involved in strategic planning; and members are encouraged to participate on the Board and on area agency committees. Council members stated that they felt empowered to provide direct feedback to the Executive Director and that their feedback was taken seriously and acted upon. In its capacity as advisor, the Council provides feedback on survey results. Council updates are a standing agenda item at the Board of Directors meetings and Board updates are a standing agenda item at Council meetings. Local chapters have the ongoing support of a Family Service Coordinator and a Family Support Director attends many of the monthly local chapter meetings, bringing information back to the area agency.

The area agency has a comprehensive orientation training for all its employees and an annual training requirement. PathWays' staff training is tracked to ensure that trainings are completed as required. When the 12 subcontract agency managers were asked about the support PathWays provided for orientation and other trainings, all but one said they were aware of the area agency's requirements for staff training and sometimes utilized training provided by the area agency. These agencies also reported that PathWays used email, newsletters, service coordinators and their website to share new ideas with them. The area agency meets quarterly with each of the three subcontract agencies in the region that provide services to more than one or two individuals. These meetings are attended by both area agency management staff and subcontract agency management staff. The area agency Management Team meets annually with all subcontract agencies as a group.

The Management Team at PathWays reported on the number of ways it provides proactive supports and services to reduce the need or intensity of long-term supports. Coordinators explore generic resources prior to expending area agency funds. Respite and day services reduce or delay the need for more extensive services. The area agency has increased its collaboration with school teams to maximize skill development, enabling individuals to become more independent as they enter the adult services system. PathWays also provides services under contract with local school systems, and accesses community resources such as Vocational Rehabilitation services, and services for the elderly.

In its role as an area agency, PathWays has worked hard to create and revise policies and procedures that will serve the expanded region effectively. The agency has developed a strong orientation training component for its Board of Directors and staff. Meetings of groups at all

levels of the organization have served many staff well, as evidenced by the positive ratings on the agency's support and supervision. Subcontract agencies generally report that there are good communications between their agencies and PathWays. The area agency has an excellent relationship with its Family Support Council and the Council feels valued in its capacity as advisor to the area agency. One area that requires improvement, however, is among the most critical to service delivery: the quality of the support and training provided to some of its direct adult services staff, 38% of whom do not feel well supported. High ratings from these staff must be one of the area agency's priorities.

## BUDGET DEVELOPMENT AND FISCAL HEALTH

### **Expectations:**

*The Management Team and Board of Directors provide leadership in achieving financial health in the pursuit of the area agency mission. The agency's resource allocation, budget oversight, and billing procedures reflect sound fiscal management. The development and management of the agency and individual budgets are achieved through the involvement of appropriate stakeholders. The agency reviews its fiscal status on an ongoing basis, maintains good financial health and considers cost effectiveness in resource allocation. In responding to requests from individuals and families/guardians for assistance, the area agency draws on generic community supports and services as key resources to enhance its own funding, including its efforts to address the needs of those who are on waiting lists.*

Sound management of an area agency's finances is essential to continued service provision. Agencies must have policies and procedures in place and both the Board of Directors and Management Team must provide budget oversight.

Management team job descriptions include responsibilities regarding the monitoring of finances and budget development. Several job descriptions emphasize developing individual budgets in accordance with the individual's and family's choice of supports and service providers. The job description of the Director of Fiscal Services delineates responsibilities for maintaining "financial records to assure that all procedures are performed in compliance with agency policy and state and federal regulations."

PathWays has financial policies and procedures that establish effective accounting principles and internal controls. Policies cover areas such as accounts payable and receivable, billing, payroll, general ledger and monthly processes. The area agency policy on "Approval of Financial Transactions" requires the approval of the Board of Directors for capital acquisition purchases as well as for the annual operating budget. Transactions must be reviewed by the Board Finance Committee that then makes recommendations to the full Board. The Finance Committee reviews monthly actual operating costs and capital expenditures compared to the budget. The full Board receives financial statements in the Board packet each month as well as a quarterly report from the Finance Committee.

In their on-line self-assessment, Board members agreed that policies regarding finances, human resources, conflicts of interest, legal and ethical compliance are in place at the area agency. Included in the orientation manual for new members of the Board of Directors is the most recent annual audit financial statement. In one section entitled "Understanding Financial Statements," there is a detailed explanation of Statement of Operations, Statement of Financial Position and Statement of Changes in Net Assets.

The area agency has a budget development process that begins with the people receiving services. Service coordinators in the region meet with individuals and families to develop individualized budgets or make changes to services. These budgets, including those from subcontract agencies in the region, are then reviewed by the Executive Director and Director of Family Services at the area agency. Department Directors "roll up" individual budgets into the appropriate cost centers. Each department works with the Management Team to complete budgets that are then reviewed by the Board of Directors. The Family Support Council chapters each control their own budgets and they receive regular budget updates from the Director of Family Support.

The PathWays Management Team meets quarterly with the managers of its three subcontract agencies that provide services to multiple individuals. The minutes of these meetings indicate that financial updates are a regular agenda item, in addition to discussions about the services for each individual. The Management Team reported that there has been an increase in the number of subcontract agencies in the region recently to allow for greater choice for individuals and families. Many of these subcontract agencies provide services to only one or two individuals. The PathWays management team meets annually with subcontract agencies as a group and it requires quarterly interim financial statements and annual independent audits from all subcontract agencies.

Wait list information is reviewed by the area agency's Wait List Committee. A review of minutes from the Board of Directors and Management Team indicates regular discussions by both groups about wait list needs and about the use of available funding to address those needs. Board members receive a packet of information prior to each Board meeting and information about regional and statewide waiting list issues is included. The area agency has developed a tracking system for wait list funds to ensure that services start within the expected time frame.

The Board of Directors and Family Support Council gave examples of how they seek and utilize other sources of revenue for the area agency. The area agency has received funding from the United Way; ESS has received equipment funds from ARRA (American Recovery and Reinvestment Act); the Special Needs Support Center in the region has done some fundraising; and PathWays has been involved in the Medicaid Infrastructure Grant to support employment initiatives. Board members were not aware of any policy about Board participation in fundraising efforts and they do not play an active role in this area. Service coordinator and family support supervisors described a number of ways the area agency accesses generic community resources. Examples included participating in senior center activities; having volunteer opportunities that result in paid health club memberships; and approaching local organizations to help fund specific activities such as camping and therapeutic riding. The area agency has recently become a vendor for Vocational Rehabilitation to support high school students.

In their on-line self-assessment, Board members agreed that the area agency budget is fully reviewed, discussed and understood by the Board. They also reported that the organization's independent audit is reviewed by the Board and any necessary action is taken in a timely way. During their interview with the redesignation team, Board members reported that, although some of the information they received in the past may have been confusing; they now receive concise and timely financial data that is easy to understand. Many packets include graphs and charts to show budget variances.

The area agency's current ratio is 1.3:1. Although this is an improvement over the past two years, the "Developmental Services System of Financial Condition for Fiscal Year 2009" states that "ratios under 1.4:1 are marginal." The Days of Cash on Hand based on 365 days was 18 (minimum criterion is set at 15 days) in FY 2009, and Medicaid Days in Accounts receivable was 16 (maximum criterion is set at 40 days).

**Recommendation:** The area agency has had mixed financial performances for the last five years, with a year-end deficit being projected again for the current fiscal year. The Board and the Management Team are encouraged to intensify their efforts to achieve a period of greater financial stability for the agency.

The area agency has clear policies and sound practices in place at all levels for budget development and review. Service coordinators are actively engaged in working with individuals

and families on individualized budgets and there is good oversight provided. For all of its work to promote systems that provide close financial monitoring and its efforts to identify and implement a number of cost saving strategies, the area agency has not yet achieved its goal of ongoing financial stability.

## COMPLIANCE

### **Expectations:**

*The area agency and its subcontract agencies are knowledgeable of and in compliance with the basic state and federal standards regarding services. The area agency and its subcontract agencies fulfill requirements regarding certification of day and residential services, medication administration, determination of eligibility for area agency services, establishment of service agreements for each person being served, authorization for Medicaid's Community Care Waiver funding stream, provision of Family Support and Early Supports and Services, and management of waiting lists. The area agency and its subcontract agencies also submit to the Division requested information and data regarding services provided under the contracts with the State.*

The NH Bureau of Developmental Services and the Bureau of Health Care Facilities routinely conduct reviews and require information to assess area agency compliance with state and federal regulations. During the 2010 redesignation review, data were examined for a five-year period.

The Region 2 area agency was found to be in compliance with He-M 503 and He-M 522, the regulations that govern service agreements for individuals who have a developmental disability or acquired brain disorder. Ten individual service agreements were reviewed and all complied with minimum standards; some exceeding these standards. PathWays was also in compliance with the He-M 503 requirements for eligibility determinations and wait list maintenance and prioritization.

Routine compliance reviews from FY 2006 – FY 2010 had the following results:

Region 2 had, on average, 2.75 deficiencies per year for adult services' certification reviews compared to the statewide average of 1.93 for this same period. An average of 31% of certification visits were without deficiencies compared to the statewide average of 36%. This is considered an average rating, being higher than some agencies and lower than others. One large staffed residence, however, accounted for a number of deficiencies related to He-M 507, Day Services.

**Consideration:** Although corrective action plans were submitted, further efforts are needed to ensure that all residents of this home have access to as many opportunities to go into the community as possible.

The BDS Medication Committee finds that PathWays consistently provides clear and concise reports on medication administration. The area agency is also proactive in asking for suggestions from the committee on how to systematically improve its medication administration practices.

The area agency meets the documentation requirements of He-M 517, obtaining prior authorization for services under the Medicaid Community Care Waiver.

The area agency complies with He-M 519 with regard to membership and geographic representation on the Family Support Council.

The area agency submits timely and complete applications for In-Home Support services. Any requests for further information are provided promptly.

After the merger of the two area agencies, PathWays combined the two ESS programs in the region. The shared staff allows the area agency to provide high quality services and better outreach. PathWays has had 100% compliance for all ESS federal indicators, including: timely services; transition planning and conferences; and referrals to the Local Education Agency.

Reports from staff at the Bureau of Developmental Services indicate that PathWays submits accurate and timely budget, contract, wait list, employment, and ESS information. The area

agency's Biennial Plans and updates are comprehensive and meet all guidelines. Mortality notifications and Sentinel Event reports are done in a timely fashion and contain all required information.

Based on a review of all compliance data, the Region 2 area agency makes every effort to adhere to state and federal regulations. When problems are noted, corrective action is taken to address any issues.

## **SUMMARY: REDESIGNATION REVIEW, REGION 2**

The redesignation review of the Region 2 area agency covered a five-year period, 2006-2010. A summary of the information gathered during this review must be prefaced by acknowledging the enormous challenge region 2 faced when it was asked in 2006 by the Bureau of Developmental Services to become the lead agency in the merger of Developmental Services of Sullivan County (DSSC) and United Developmental Services (UDS). Although there were many obstacles and unforeseen complications resulting from this merger, from the outset region 2 was committed to ensuring that individuals and families who received services would not be adversely impacted. For PathWays of the River Valley, the new expanded area agency, establishing trust was a top priority.

PathWays of the River Valley, now commonly referred to simply as PathWays, has a clear and concise mission that is understood by staff, providers, individuals and families that receive services, and the community at large. There was substantial evidence gathered throughout the redesignation review that this area agency is adhering to its mission of working in partnership with individuals and families to provide them the supports they need to live in their chosen communities. It offers Participant Directed and Managed Services to all who select this option and the number of individuals now in this service arrangement has greatly increased in the region.

There was also overwhelming evidence that individuals feel safe in this service system and that their health care needs are being addressed. Results of surveys and forums conducted during the redesignation review confirmed this. The area agency reaches out to individuals and families, inviting them to become members of the Board of Directors, and to participate on area agency committees and work groups, and individuals and families have responded. They are well represented on the Board as well as on most area agency committees. The area agency has a good relationship with its Family Support Council and the agency supports two Self-Advocacy groups in the region. The Early Supports and Services program in region 2 consistently receives high marks for its work with families. The results of individual and family surveys regarding their satisfaction with services were very positive and there was almost unanimous agreement throughout the region that all who receive services are treated with great respect and dignity.

There are several areas for improvement identified in this report. Although the area agency is in the process of implementing a system of quality improvement, these efforts remain fragmented and do not involve all stakeholders. There is also a need to provide greater support and training for some direct service staff who, for the most part, work independently supporting individuals in the community. Finally, the area agency must continue to work very hard at achieving financial stability.

PathWays of the River Valley has staff and providers that are committed to a mission of inclusion and the provision of services in accordance with individual and family choice. The Bureau of Developmental Services wishes to express its appreciation to the Region 2 Board of Directors, Management Team, staff and providers for guiding the region through a difficult time. It has succeeded in establishing trust among its stakeholders, foremost among whom are individuals and families.