

SIoux COUNTY
MENTAL HEALTH/DEVELOPMENTAL DISABILITIES SERVICES
MANAGEMENT PLAN



Annual Review FY 2012/2013

MH/DD Management Plan Annual Review FY 2012/2013

It is the intent of this report to summarize and measure progress in the Sioux County Management plan for the time period of July 1, 2012 through June 30, 2013. This time frame is specific in correlation to the Fiscal Year as set forth in Iowa Administrative Rule 441 – 25.17. For quality assurance and stakeholder input purposes, the CPC Administrators from the Northwest Iowa Contracting Consortium work together to collect data that is relevant to measuring the efficacy of respective county plans. The data from informal interviews conducted with consumers, families, and providers, as well as data derived from the annual satisfaction surveys conducted by the counties two largest providers was considered during the development of subsequent Management Plans. A summary of this information is included elsewhere in this report. Furthermore, the Community Services office has compiled data on MH/DD management plan goals & objectives, documentation of stakeholder involvement, actual provider network, actual expenditures, actual scope of services, the number, type and resolution of appeals, and waiting list information.

1. PROGRESS TOWARD GOALS AND OBJECTIVES

GOAL ONE

FORM A REGION

Progress – We have identified the counties in the region and have been approved by DHS, a 28E agreement has been approved determining our regional structure and staffing, a draft management plan has been presented to the governing board, budgeting for the new region has begun, and discussion on regional operations are beginning.

2. DOCUMENTATION OF STAKEHOLDER INVOLVEMENT/PLAN DEVELOPMENT

Involving consumers & families in ongoing continuous quality improvement:

Consumers, family members and agencies are involved in all aspects of program planning, operations and evaluations. The Community Services Staff participate in as many consumer review processes as possible in order to gauge the appropriateness of services. Additionally, visits with consumers at Hope Haven conducted at every opportunity to measure their satisfaction with services as well as to gather ideas for services, cost effectiveness, availability, the amount of choice that family and consumers have in choosing services, as well as the direction of the management plan.

3. ACTUAL PROVIDER NETWORK

Cherokee Mental Health Institute
1200 West Cedar Street
Cherokee, Iowa 51012
(712) 226-2594

Inpatient Involuntary Hospitalization
Inpatient voluntary Hospitalization
Outpatient Psychiatric Services

Hope Haven, Inc.
1800 19th Street
Rock Valley, IA 51247
712) 476-2737

Work Activity, Sheltered Workshop
CSALA, Supported Employment
Day Treatment

Creative Living Center
21 1st Ave NE
Le Mars, IA 51031
(712) 546-4624

Community Support Program
Evaluation for Services/Commitment
Consultation/Public Education
Day Treatment, Outpatient Services

Village Northwest Unlimited
330 Village Circle
Sheldon, IA 51201
(712) 324-4873

CSALA, Work Activity

Willow Heights/Partnership for Progress
60191 Willow St.
Atlantic, IA 50022

RCF/MR

Southwest Iowa Transit Agency
1501 SW 7th St
Atlantic, IA 50022
(712) 243-4196

Transportation

Spencer Hospital
1200 First Ave E
Spencer, IA 51301

Inpatient Hospitalization

Life Skills
1510 Industrial Rd SW
Le Mars, IA

Work Activity

Nishna Productions
902 Day Street
Shenandoah, IA 51601

Work Activity

Pride Group
214 Plymouth St SE
Le Mars, IA 51031

RCF

4. ACTUAL EXPENDITURES

GRAND TOTAL: MH/DD Fund including Administrative: \$914,838.77

5. ACTUAL SCOPE OF SERVICES

SERVICE	MI	CMI	MR	DD
4x03 Information and Referral	X	X	X	X
4x04 Consultation	X	X	X	X
4x05 Public Education Services	X	X	X	X
4x06 Academic Services				
4x11 Direct Administrative	X	X	X	X
4x12 Purchased Administrative				
4x21- 374 Case Management- Medicaid Match				
4x21- 375 Case Management -100% County Funded				
4x21- 399 Other				
4x22 Services Management				
4x31 Transportation (Non-Sheriff)				
4x32- 320 Homemaker/Home Health Aides				
4x32- 321 Chore Services				
4x32- 322 Home Management Services				
4x32- 325 Respite		X	X	
4x32- 326 Guardian/Conservator				
4x32- 327 Representative Payee				
4x32- 328 Home/Vehicle Modification				
4x32- 329 Supported Community Living		X	X	
4x32- 399 Other				
4x33- 345 Ongoing Rent Subsidy				
4x33- 399 Other				
4x41- 305 Outpatient	X	X	X	
4x41- 306 Prescription Medication				
4x41- 307 In-Home Nursing				
4x41- 399 Other				
4x42- 305 Outpatient	X	X	X	
4x42- 309 Partial Hospitalization				
4x42- 399 Other				
4x43- Evaluation	X	X		
4x44- 363 Day Treatment Services		X		
4x44- 396 Community Support Programs				
4x44- 397 Psychiatric Rehabilitation		X		
4x44- 399 Other				
4x50- 360 Sheltered Workshop Services				

4x50- 362 Work Activity Services		X	X	X
4x50- 364 Job Placement Services.				
4x50- 367 Adult Day Care.				
4x50- 368 Supported Employment Services		X	X	
4x50- 369 Enclave		X	X	
4x50- 399 Other.				
4x63- 310 Community Supervised Apartment Living Arrangement (CSALA) 1-5 Beds		X	X	
4x63- 314 Residential Care Facility (RCF License) 1-5 Beds				
4x63- 315 Residential Care Facility For The Mentally Retarded (RCF/MR License) 1-5 Beds				
4x63- 316 Residential Care Facility For The Mentally Ill (RCF/PMI License) 1-5 Beds				
4x63- 317 Nursing Facility (ICF, SNF or ICF/PMI License) 1-5 Beds				
4x63- 318 Intermediate Care Facility For The Mentally Retarded (ICF/MR License) 1-5 Beds				
4x63- 329 Supported Community Living				
4x63- 399 Other 1-5 Beds.				
4x64- 310 Community Supervised Apartment Living Arrangement (CSALA) 6-15 Beds				
4x64- 314 Residential Care Facility (RCF License) 6-15 Beds		X		
4x64- 315 Residential Care Facility For The Mentally Retarded (RCF/MR License) 6-15 Beds				
4x64- 316 Residential Care Facility For The Mentally Ill (RCF/PMI License) 6-15 Beds		X		
4x64- 317 Nursing Facility (ICF, SNF or ICF/PMI License) 6-15 Beds				
4x64- 318 Intermediate Care Facility For The Mentally Retarded (ICF/MR License) 6-15 Beds				
4x64- 399 Other 6-15 Beds..				
4x65- 310 Community Supervised Apartment Living Arrangement (CSALA) 16 and over Beds				
4x65- 314 Residential Care Facility (RCF License) 16 and over Beds		X		
4x65- 315 Residential Care Facility For The Mentally Retarded (RCF/MR License) 16 and over Beds				
4x65- 316 Residential Care Facility For The Mentally Ill (RCF/PMI License) 16 and over Beds				
4x65- 317 Nursing Facility (ICF, SNF or ICF/PMI License) 16 and over Beds				
4x65- 318 Intermediate Care Facility For The Mentally Retarded (ICF/MR License)				
4x65- 399 Other 16 and over Beds..				
4x71- 319 Inpatient/State Mental Health Institutes	X	X		
4x71- 399 Other				
4x72- 319 Inpatient/State Hospital Schools				
4x72- 399 Other				
4x73- 319 Inpatient/Community Hospital	X			
4x73- 399 Other				
4x74- 300 Diagnostic Evaluations Related To Commitment.	X	X		
4x74- 353 Sheriff Transportation	X	X		
4x74- 393 Legal Representation for Commitment	X	X		
4x74- 395 Mental Health Advocates	X	X		
4x74- 399 Other				

6. NUMBER, TYPE, AND RESOLUTION OF APPEALS

There were no appeals filed in Sioux County during fiscal year 2012/2013.

7. QUALITY ASSURANCE IMPLEMENTATION, FINDINGS & IMPACT ON PLAN

Sioux County is committed to fulfilling its responsibility regarding funding for necessary services to persons with mental illness, chronic mental illness, mental retardation and developmental disabilities as per the guiding principals and goals of this plan. The entire system shall be reviewed on an annual basis to assure quality in compliance with rule 441, 25.22. Criteria noted in the Goals section of this plan will be used as part of the Quality Assurance review. Information from the Quality Assurance Survey, conducted as a component of the regional Quality Assurance (QA) process, is incorporated into the Annual Report.

Annually the CPC administrator identifies quality assurance indicators in order to measure effectiveness, efficiency, and satisfaction with the managed care plan. The results of the QA process is incorporated into our Annual Report. We undertake the following tasks:

- Re-determine network membership criteria, which includes applicable license and/or credentials, accreditation, completion of independent financial audits, internal Quality Assurance processes, and an information reporting system to supply the needed information
- Measure provider compliance with the standards outlined in this plan
- Review annual reports from providers
- Visit providers and supports in progress to determine the appropriateness of services and consumer satisfaction
- Review the appeals and accompanying decisions from the previous year
- Identify, distribute, and analyze a survey of consumers, their families and providers on a periodic basis
- Provide input as to ways the QA process can be improved upon
- Utilize what we've learned from the QA process in the development of future plans

The Community Services Staff participate in as many consumer review processes as possible in order to gauge the appropriateness of services. Additionally, visits with consumers at Hope Haven and other community providers are conducted at every opportunity to measure their satisfaction with services as well as to gather ideas for services they would like to see made available to them. Many of the meetings, particularly those at Hope Haven, involve consumer and family/guardian satisfaction surveys. The vast majority of respondents report excellent service and communication from the provider. Families are afforded opportunities for input about the services that their son/daughter are receiving and services they would like to see made available to them. Consumer satisfaction is further assessed through the information obtained from consumer surveys conducted by the provider agencies identified previously. The results of these processes, which demonstrate a consumer satisfaction rate of better than 90%, are utilized in the preparation and evaluation of the goals presented in the County's Management Plan. Further, this same information is incorporated into the development and strategic planning sections of the Management Plan for Fiscal Year 2013 and beyond. For example, one thing we've learned from these meetings/surveys is that consumers and their families tend to prefer community employment and community living over institutional living/working. With this in mind, Sioux County has determined to promote community employment for those who are able, as well as emphasizing the development of community living skills. It has been and will continue to be our goal to afford Sioux County consumers opportunities to work toward independent living and employment by utilizing available funding streams, HCBS waiver and Habilitation services for example, to the extent possible.

The following information, derived from a careful review of the previous year's outcomes, was considered during development of this management plan:

- Overview of the previous year's activities
- Assessment of progress on each of the previous year's goals and objectives
- Annual statistical report: unduplicated consumers served, by category and consumer, service units and cost per consumer, service dollars allocated per consumer and per service type service dollars allocated per provider
- Attainment of consumer outcomes (quality assurance) and consumer & family satisfaction
- Provider survey results (if available)
- Recommendations for revisions to plan, goals and objectives, new QA activities
- Unmet service needs

8. WAITING LIST INFORMATION

Sioux County maintained for the entire fiscal year. There were three individuals on the waiting list all seeking increased hours of work activity.