



# STATE OF KANSAS

**Social & Rehabilitation Services**

**Division of Health Care Policy**

**Community Supports & Services**

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## KANSAS LIFESTYLE OUTCOMES

# Interpretive Guideline

[Reviewed 2--2007]

## Kansas Lifestyle Outcomes – Second Edition (KLO 2nd)

### SUMMARY PAGE

With Interpretive Guidelines for use in assessing each outcome measure

**VERSION #2: May, 2001 - REVISED Feb. 2007**

Person Receiving Services: \_\_\_\_\_ SSN/IDN: \_\_\_\_\_

Secondary Sources (Name/Relationship): \_\_\_\_\_

Reviewer: \_\_\_\_\_ Final Date Completed: \_\_\_\_\_

CDDO: \_\_\_\_\_ Survey Number: \_\_\_\_\_

Service Provider(s) [note service if multiple]: #1: [Residential] \_\_\_\_\_

#2: [Day Services] \_\_\_\_\_ #3: [Other - Specify Service] \_\_\_\_\_

No.	Outcome Measurement Description	Meets Standard	Process in Place	Not Present	Not Applicable
I	Opportunities Of Choice To Support And Increase Independence, Productivity, Integration And Inclusion; Effective Access Maintained				
II	Individual Rights And Responsibilities Supported				
III	Personal Health And Safety Maintained				
IV	Use Of Psychotropic Medications Or Restrictive Practices Safeguarded				

## General Instructions For Preparing Responses

1. The person receiving the services should be the primary source of information. If necessary, others should be consulted on behalf of the person receiving services, who are well acquainted with the person and his/her lifestyle preferences, needs and communication style. Other sources of information which should be accessed as applicable to particular questions include: The person's guardian, family members or support team members; staff persons providing services and supports to the person; and, records regarding the person and his/her services. In addition, the reviewer should spend time visiting with the person in his/her home or work/day activity place where services are received. Feedback regarding the results of the survey should be provided to any relevant service provider involved in the person's life, with prompt feedback regarding any issue needing improvement.
2. In determining which rating is applicable, the reviewer should consider the following guiding definitions:

*"Meets Standard"* would indicate that all components related to the issue being addressed are present in the person's life.

*"Process In Place"* would indicate that there is a solid process to address the issue involved, but some significant piece (or pieces) is not present in the person's life at the time the issue was measured.

*"Not Present"* would indicate there is an important absence of the standard in the person's life which should be addressed immediately.

*"Not Applicable"* would indicate that the issue being addressed is not applicable to the person's life at this time.
3. Any rating other than "meets standard" or "not applicable" should be briefly explained in the comments section.
4. Terms used in this instrument will generally have these meanings:
  - a. Independence refers to the extent to which the person exerts control and choice over his/her own life.
  - b. Productivity refers to the person's participation in income-producing work that has opportunities for increased income, improved employment status, or job advancement; and/or, to the person's participation in work that contributes to a household or community.
  - c. Integration and inclusion refers to the individual's use of and access to the same community resources, community activities and/or types of employment that are used by and available to citizens without developmental disabilities; and/or, to the person living in a home close to community resources, with regular contact with citizens without developmental disabilities; and/or to having friendships and relationships with individuals and families of their own

choosing.

- d. Self advocacy refers to speaking up for what you want and knowing how to get it. It means standing up for your rights as a person and knowing your responsibilities.
- e. Generic community services refers to services available to all person in the community, such as: physicians, dentists, other medical professionals, pharmacies, senior centers, community centers, grocery stores, mental health centers, transportation services, criminal justice victim assistance, legal services, domestic violence centers, support groups, etc.
- f. Natural community supports refers to non-paid supports such as: family, friends, neighbors, co-workers, faith based organizations, etc.
- g. "Red flags" as referred to in section IV, question 12, refers to the following:
  - The use of "old" psychotropic medications
  - The use of three or more psychotropic medications
  - Psychotropic medication dosages at or over the high end of typical use range.
  - No psychiatric diagnosis
  - Vague, non-specific psychiatric diagnosis
  - Excessive psychiatric diagnosis
  - Dissociation between psychiatric diagnosis and treatment
  - High utilization of PRN psychotropic medication
  - Absence of or extended time gap between formal or informal side effect monitoring.

## OUTCOME MEASURE NUMBER ONE

### I. Opportunities Of Choice To Support And Increase Independence, Productivity, Integration And Inclusion; Effective Access Maintained

<p><b>I.</b> The person is fulfilling their preferred lifestyles. Their life demonstrates that each person is provided access to required services &amp; supports that meets / exceeds their preferred lifestyle. Barriers to increase independence, productivity, integration and community inclusion are effectively addressed.</p>	<p style="text-align: center;"><b>YES</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[If YES, stop and move on to Outcome Measure #2]</p>	<p style="text-align: center;"><b>NO</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[If NO, complete 'sub outcome' I. A]</p>	<p style="text-align: center;">What meets this Outcome Measure</p> <p>Person is living (or is effectively working toward achieving his or her preferred lifestyle) in all five major lifestyle areas. <b><u>NOTE: If the person is on the waiting list the preferred lifestyle is not being met. If it is the person would not need services. Services are NEED based</u></b></p>
<p><b>I. A</b> The person has a PCSP in place that is current, identifies the preferred lifestyle in all five major lifestyle areas ( where the person chooses to live; with whom they choose to live; day / work activity; family &amp; friends; and social, recreation, leisure activities they choose to participate). The plan effectively identifies the persons barriers to achieving the preferred lifestyle, and has written strategies designed to facilitate planning, training, materials required including behavior supports as appropriate.</p>	<p style="text-align: center;"><b>YES</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If YES, stop and move on to I.B ]</p>	<p style="text-align: center;"><b>NO</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If NO, complete standards 1 thru 5 and 12 thru 15 ]</p>	<p style="text-align: center;">What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>There is a person centered support plan written, and available that describes the current preferred lifestyle in all lifestyle areas. Identifies BARRIERS and strategies to overcome all barriers, and lists and describes the necessary training, supports, material, including required positive behavior supports necessary to support the person effectively. <b><u>NOTE: If the person is case management only a person centered support plan with a detailed preferred lifestyle is still required. A person could be on wait list and this 'sub outcome' be met. It is based on evidence of an effective and appropriate plan.</u></b></p>
<p><b>I. B</b> The persons lifestyle demonstrates that they have "access" to all necessary services and supports that are needed to ensure that the person has the assistance necessary to become successful.</p>	<p style="text-align: center;"><b>YES</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If YES, stop and move on to I. C ]</p>	<p style="text-align: center;"><b>NO</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If NO, complete standards 6 thru 11 ]</p>	<p style="text-align: center;">What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>There are adequate supports in place that meets the preferred lifestyle, or are effectively addressed in a manner that appears to meet the persons needs. <b><u>NOTE: If the person is on the waiting list the preferred lifestyle is not being met. If it is the person would not need services. Services are NEED based</u></b></p>

<p>I. C. The persons lifestyle demonstrates that the PCSP is effectively and consistently implemented.</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p>[ If YES, stop and move on to I. D]</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p>[ If NO, complete standard 16 ]</p>	<p>What meets this Sub Outcome Measure [Color corresponds with the applicable standards] It is demonstrated in the life of the person that the plan as written is effectively implemented.</p> <p><b><u>NOTE: If the person is on the waiting list the preferred lifestyle is not being met and it would not be possible to have an effectively implemented plan that eliminates barriers. If it is the person would not need services. Services are NEED based</u></b></p>
<p>I. D. The person, guardian (support team if person cannot or guardian is not available) express that person persons needs are effectively addressed, appropriate supports are in place, they are satisfied with progress being made and that the person is achieving independence, productivity, integration and inclusion in his/her community.</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p>[ If YES, stop and move on to Outcome Measure # 2 ]</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p>[ If NO, complete standards 17 - 19 ]</p>	<p>What meets this Sub Outcome Measure [Color corresponds with the applicable standards] The person, if able (verbally or through any means possible) demonstrates:</p> <ul style="list-style-type: none"> <li>* all needs are effectively met</li> <li>* all necessary supports &amp; services are in place</li> <li>* satisfaction with all services and supports</li> <li>* agreement that the person is making satisfactory progress in regard to independence, productivity, personal integration and community inclusion.</li> </ul> <p><b><u>NOTE: If the person is on the waiting list the preferred lifestyle is not being met and it would not be possible to have an effectively implemented plan that eliminates barriers. If it is the person would not need services. Services are NEED based</u></b></p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>1. The person, the person's legal guardian and other people chosen from the person's support network are actively and meaningfully involved in the development of a person centered support plan (or if not involved, the reason and steps to enhance involvement are stated in the plan); and, the person or the person's legal guardian has approved the plan in writing (if either have an objection to any portion of the plan, it is noted in the plan with an explanation of any barrier to addressing the objection).</p>	<ul style="list-style-type: none"> <li>&gt; Signed approval of the plan, or documented attempts</li> <li>&gt; Documented active and meaningful involvement of the person (the plan designed around him/her); evidence in the plan and the person's life supports meaningful involvement, such as quotes, interviews, support team discussions, observations</li> <li>&gt; Evidence of opportunities for involvement of guardian or supporters (timing and location of planning meeting)</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Organized process that usually demonstrates compliance, but gap in this situation</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Any result not meeting description in other categories</li> </ul>
<p>2. The plan includes a description of the person's preferred lifestyle, including what type of setting the person wants to live in, with whom the person wants to live, what work or other valued activity the person wants to do, with whom the person wants to socialize, and in what social, leisure, religious or other activities the person wants to participate.</p>	<ul style="list-style-type: none"> <li>&gt; Contains complete description as to lifestyle preference in each area (consistent with what person states as preferences in conversation; discussion of why this preference and what it looks like, vis-a-vis other alternatives)</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Only three or four major lifestyle areas are addressed</li> <li>&gt; Incomplete description of person's lifestyle preferences (such as simply stating current status, or an address)</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Two or less major lifestyle areas are addressed</li> <li>&gt; No descriptive information accompanies lifestyle preference statement</li> </ul>
<p>3. If the person's identified lifestyle cannot be achieved, the plan includes an explanation of barriers to achieving any part of the lifestyle, strategies to overcome such barriers, and a description of the current next best option and how that option will be achieved.</p>	<ul style="list-style-type: none"> <li>&gt; Explanation of barriers to achieving any part of preferred lifestyle</li> <li>&gt; Listing of strategies to overcome barriers</li> <li>&gt; Description of current next best option</li> <li>&gt; Explanation of how current next best option will be achieved</li> <li>&gt; Explanation of timelines and persons responsible</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Plan demonstrates an understanding of the barrier/overcoming process, but one or more element is missing in description</li> <li>&gt; Incomplete description of next best option or how to achieve</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Any result not meeting description in other categories</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>4. In each of the major lifestyle areas, the plan identifies opportunities for personal independence, productivity, integration and community inclusion for the person; any barriers to achieving personal independence, productivity, integration and community inclusion; and strategies to overcome such barriers.</p>	<ul style="list-style-type: none"> <li>&gt; Plan addresses major lifestyle area, identifying individual opportunities to achieve independence, productivity, integration and inclusion</li> <li>&gt; Plan addresses all barriers to achieving those opportunities, and strategies to overcome the barriers</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Plan demonstrates an understanding of the process for identifying personal opportunities, but one or more element is missing in the description</li> <li>&gt; Incomplete description of barriers/ strategies to overcome them</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Any result not meeting description in other categories</li> </ul>
<p>5. The plan lists and describes the necessary activities, training, materials, equipment, assistive technology and services needed to assist the person to achieve his/her identified lifestyle, including opportunities for independence, productivity, integration and inclusion.</p>	<ul style="list-style-type: none"> <li>&gt; Each item must be addressed with specifics as appropriate to the person</li> <li>&gt; Details of what the service system is bringing to the life of this person</li> <li>&gt; The list/description is tied to the lifestyle preferences and needs of the person</li> </ul>	<ul style="list-style-type: none"> <li>&gt; List and description of needs is incomplete to adequately assist the person</li> <li>&gt; List and description of needs is not consistent with the person's lifestyle preference and identified needs</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Any result not meeting description in other categories</li> </ul>
<p>6. Included as part of identifying needed services or supports is a consideration of the person's health or medical needs, and a description of how those needs will be addressed.</p>	<ul style="list-style-type: none"> <li>&gt; Plan contains a statement of current health or medical needs, with a detailed description of how those needs will be met (including persons responsible, steps to achieving and timelines)</li> <li>&gt; Or, plan confirms there is no support need for the person in this area</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Health needs are listed, but inadequate description of how they will be addressed</li> <li>&gt; Primary health needs are listed and addressed, but other less pressing needs are overlooked</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Any result not meeting description in other categories</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>7. Included as part of identifying needed services or supports is a consideration of the person's behavioral support needs, and a description of how those needs will be addressed.</p>	<p>&gt; Plan contains a description of current behavioral support needs, and a detailed description of how those needs will be met (including persons responsible, steps to achieving and time lines)            &gt; Or, plan confirms there is no support need for the person in this area</p>	<p>&gt; Behavioral support needs are listed, but inadequate description of how they will be addressed            &gt; Behavioral support needs are not adequately identified</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>8. Included as part of identifying needed services or supports is a consideration of any training or support the person needs in order to explore, maintain and/or expand personal or intimate relationships, as well as to cope with the loss of significant relationships in the person's life (such as death of a loved one, ending of a personal relationship, or change of staff), and a description of how those needs will be addressed.</p>	<p>&gt; Plan contains a description of current relationship-based support needs, and a detailed description of how those needs will be met (including persons responsible, steps to achieving and time lines)            &gt; Or, plan confirms there is no support need for the person in this area</p>	<p>&gt; Relationship-based support needs are listed, but inadequate description of how they will be addressed            &gt; Relationship-based support needs are not adequately identified</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>9. Included as part of identifying needed services or supports is a consideration of the person's financial management training or support needs, and a description of how those needs will be addressed.</p>	<p>&gt; Plan contains a description of current financial management support needs, and a detailed description of how those needs will be met, including past or current training efforts (including persons responsible, steps to achieving and time lines)            &gt; Or, plan confirms there is no support need for the person in this area</p>	<p>&gt; Financial management support needs are listed, but inadequate description of how they will be addressed            &gt; Financial management support needs are not adequately identified</p>	<p>&gt; Any result not meeting description in other categories</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>10. Included as part of identifying needed services or supports is a consideration of the person's self advocacy training or support needs, and a description of how those needs will be addressed.</p>	<p>&gt; Plan contains a description of current self advocacy support needs, and a detailed description of how those needs will be met (including persons responsible, steps to achieving and time lines)            &gt; Or, plan confirms there is no support need for the person in this area</p>	<p>&gt; Self advocacy support needs are listed, but inadequate description of how they will be addressed            &gt; Self advocacy support needs are not adequately identified</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>11. Included as part of identifying needed services or supports is a consideration of the person's personal safety training or support needs, and a description of how those needs will be addressed.</p>	<p>&gt; Plan contains a description of current personal safety support needs, and a detailed description of how those needs will be met (including persons responsible, steps to achieving and time lines)            &gt; Or, plan confirms there is no support need for the person in this area</p>	<p>&gt; Personal safety support needs are listed, but inadequate description of how they will be addressed            &gt; Personal safety support needs are not adequately identified</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>12. The development and/or use of natural community supports, or generic community services, which may assist the person to achieve his/her identified lifestyle and opportunities for personal independence, productivity, integration and inclusion, are considered as part of the person centered planning process and included in the person's plan.</p>	<p>&gt; Plan identifies what natural or generic supports are present in the person's life and/or planned for to meet the person's identified lifestyle and opportunities for personal independence, productivity, integration and inclusion</p>	<p>&gt;Plan identifies some natural community supports or generic services; but inadequate description of how they will be utilized.</p>	<p>&gt;Any result not meeting description in other categories</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>13. The plan describes how opportunities of choice are supported, including the person's effective communication methods; any additional training, experience or support the person may need to fully utilize choice-making skills; and assistance the person or guardian may need to understand negative consequences of risky choices the person may make.</p>	<p>&gt; Plan describes in detail:  ~ how opportunities of choice are supported  ~ person's communication methods  ~ training needed to enhance choice making  ~ support needed to understand consequences of risky choices the person may make</p>	<p>&gt; One or two of the four identified elements are not addressed  &gt; One or two of the four identified elements are inadequately addressed</p>	<p>&gt; Three or four of the identified elements are not addressed  &gt; Three or four of the identified elements are inadequately addressed</p>
<p>14. The plan documents that providers work together to prepare a single plan (if applicable); a lead coordinator for the preparation of the plan is identified; and, a lead coordinator for addressing the health care needs of the person is identified.</p>	<p>&gt; A single plan for the person exists  &gt; Both a lead coordinator for plan preparation and a lead coordinator for addressing health care needs are identified</p>	<p>&gt; The plan does not list a lead coordinator for plan preparation and/or a lead coordinator for addressing health care needs  &gt; The identification of either coordinator is not a specific person or job position</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>15. The plan is regularly reviewed and revised whenever necessary to address changes in the person's identified lifestyle and related needs, including opportunities for personal independence, productivity, integration and inclusion; or when services are not responsive to the person.</p>	<p>&gt; Documented indication of review and revision in response to changes in lifestyle preferences, needs, or when plan is ineffective</p>	<p>&gt; Review was conducted, but not timely revision for the person</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>16. Services and supports are consistently implemented in accordance with the person's current preferred lifestyle (or current next best option) and related needs, and in a manner to increase personal independence, productivity, integration and inclusion.</p>	<p>&gt; Observable, reported and/or documented evidence that consistent implementation is occurring, in accordance with the person's current preferred lifestyle (or current next best option).</p>	<p>&gt; Portions of the desired services and supports are consistently implemented, but not all are.  &gt; The person's preferences have changed, but they are not being responded to timely</p>	<p>&gt; Any result not meeting description in other categories</p>
<p>17. The person, guardian and/or support team report that the person's needs are being adequately addressed and that the person is receiving the services and supports he/she needs.</p>	<p>&gt; Reportable evidence that the person's needs are being addressed and the person is receiving the services and supports he/she needs.</p>	<p>&gt; Portions, but not all, of the person's needs are being addressed</p>	<p>&gt; Any result not meeting description in other categories</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
18. The person, guardian and/or support team report that the person is satisfied with how care is delivered.	>Reportable evidence that the person is satisfied with his/her service delivery, and/or evidence that the provider has been and continues to be responsive to service delivery needs	> Satisfaction with primary areas of care is reported, but other less pressing care issues are overlooked	> Any result not meeting description in other categories
19. The person, guardian and/or support team report that the person is making progress in achieving personal independence, productivity, integration and inclusion in his/her community.	>Reportable evidence that the person is making progress in accordance with the person's current preferred lifestyle ( or current next best option).	>The person is making progress in some, but not in all areas of preferred lifestyle (or current next best option)	> Any result not meeting description in other categories

## OUTCOME MEASURE NUMBER TWO

### II. Individual Rights And Responsibilities Supported

<p>II. A. The persons lifestyle demonstrates that their rights are protected and they are supported to fulfill their citizenship and community responsibilities.</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p>[ If YES, stop and move on to Outcome Measure III ]</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p>[ If NO, complete standards 1 thru 12 ]</p>	<p>What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>All of the standards addressed in Outcome Measure Number 2 should be effectively present, or are being addressed in a manner that assures the outcome in the persons life, to the degree that the person feels is important to them. This standard can be met when the person is receiving case management only, on a wait list, or while receiving less than requested amount of supports and services.</p>
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Standard Being Assessed	Meets Standard	Process in Place	Not Present
<p>1. The person, his/her guardian and support network have ongoing, <i>individually-appropriate</i> opportunities to learn about his/her individual rights and responsibilities, including at least quarterly training offered by the provider.</p>	<ul style="list-style-type: none"> <li>&gt; Documentation demonstrates training is occurring at least annually.</li> <li>&gt; Training opportunities are individualized and appropriate to the person.</li> <li>&gt; Communication with the person/guardian/supporters confirms participation in such training; or -</li> <li>&gt; If person has not participated, the provider is offering the training in a manner appropriate to the person, encouraging participation.</li> </ul>	<p>&gt;Training is occurring, but not in an understandable manner or individualized for the person served or the guardian.</p>	<p>&gt;Rights and responsibilities training is minimal (one or zero times per year), or is not appropriate to the person served.</p>
<p>2. The person actively participates in matters impacting his/her life, including decision-making, all aspects of support planning and implementation, activities of self care (such as shopping, meal planning and preparation), home/property care (such as housekeeping, selection and purchase of personal property), choosing with whom to associate, and choosing his/her daily routine and daily activities.</p>	<ul style="list-style-type: none"> <li>&gt;Conversation with and observations of the person served and support staff indicate that the person is actively participating in matters impacting his/her life.</li> <li>&gt;If some decisions impacting the person's life are made for him/her, the person has substantial influence in those decisions.</li> <li>&gt;The person receives support in learning how to actively participate in matters impacting his/her life.</li> </ul>	<p>&gt;The person is not participating in some decisions impacting his/her life which he/she would like to impact, and/or the person is not supported in learning effective ways to impact those decisions.</p>	<p>&gt;Through conversation and observations, numerous examples of the person not having an impact on decisions impacting his/her life have been identified.</p>

Standard Being Assessed	Meets Standard	Process in Place	Not Present
<p>3. The person has time, space and opportunities for privacy, including closed doors, no one entering personal space without seeking permission, private telephone, visiting and grooming/dressing space, private mail.</p>	<ul style="list-style-type: none"> <li>&gt;Living and working places are arranged in a manner that is conducive to the privacy of the person served.</li> <li>&gt;The person served indicates that he/she regularly exercises rights to privacy.</li> <li>&gt;Privacy locks exist on individual rooms when appropriate.</li> <li>&gt;People knock or seek permission before they enter a private room or closed door.</li> <li>&gt;People have opportunities for private phone conversations.</li> <li>&gt;Private areas are available for grooming and dressing needs.</li> <li>&gt;Staff are sensitive to an individual's privacy regarding personal needs or preferences.</li> <li>&gt;The person served receives and opens his/her own mail.</li> <li>&gt;The person served has space and privacy for personal intimacy.</li> <li>&gt;The person's privacy is consistently respected by others.</li> </ul>	<p>&gt;Some privacy issues are not being effectively addressed or consistently followed through in residential or day services settings.</p>	<p>&gt;Numerous privacy issues are not being effectively addressed or consistently followed through in residential or day service settings.</p>
<p>4. The person is supported in exploring, accessing and exercising his/her religion or faith.</p>	<ul style="list-style-type: none"> <li>&gt;If the person is has chosen to attend religious activities, he/she is being supported in doing so by effectively addressing any related support needs plan.</li> <li>&gt;The support plan indicates how the person will be supported in exploring, accessing and exercise religious options.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person served has identified religious activities he/she would like to participate in but support in accessing them is not consistent.</li> <li>&gt;Ongoing efforts are made to support a person in accessing religious activities when the right match is not found promptly or it is discontinued.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No attempt has been made to identify if there are religious activities that the person served wishes to participate in.</li> <li>&gt;The person served has identified religious activities he/she wants to participate in but is not being supported in doing so.</li> </ul>

Standard Being Assessed	Meets Standard	Process in Place	Not Present
<p>5. The person is supported in exploring, accessing and exercising his/her right to vote.</p>	<ul style="list-style-type: none"> <li>&gt;The person has been supported in exploring his/her right to vote.</li> <li>&gt;The person has been supported in understanding how to vote and accessing information about the issues and candidates involved.</li> <li>&gt;The person has been supported in getting registered to vote, if he/she wants to vote.</li> <li>&gt;The person has been supported in actually voting, according to his/her own interests and choices, if he/she wants to vote.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person served has been supported in some, but not all, areas of: learning about the right to vote, how to vote, learning about issues/candidates, and/or getting registered to vote.</li> <li>&gt;The person has been supported in those areas, but has not been supported in voting according to his/her own interests and choices.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person has not been supported in learning about and/or accessing his/her right to vote.</li> <li>&gt;The person has been supported in exploring and learning about how to access voting, but has not been supported in actually getting the vote accomplished.</li> </ul>
<p>6. The person is not being required to work without compensation (except in upkeep of the person's own living space and of common areas of shared home), including assisting with the care and support of other people receiving services.</p>	<ul style="list-style-type: none"> <li>&gt;Paid work activities are compensated for in compliance with Federal Wage and Hour laws.</li> <li>&gt;Interview, observation and/or record review indicates the person is being paid for the work he/she does, and understands how he/she is being paid.</li> <li>&gt;Volunteer opportunities or activities are understood and agreed to by the person served and the person's guardian.</li> <li>&gt;The person is not required to assist in the care and support of other people receiving services, without payment.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person is being appropriately paid, but does not understand his/her rights or options for payment for work and/or the nature or availability of volunteer activities.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person is not being paid for work that is traditionally done by staff or by other paid workers.</li> </ul>

Standard Being Assessed	Meets Standard	Process in Place	Not Present
<p>7. The person has control over his/her financial resources; or, if any support is needed to assist the person in managing financial resources, safeguards are in place to ensure appropriate use of the funds, access to funds and information by the person or his/her representative, and accountability for all funds.</p>	<ul style="list-style-type: none"> <li>&gt; The person is supported in understanding how his/her money is spent, how much money he/she has, and how to access his/her funds.</li> <li>&gt;The person is receiving any needed training to help the person be more financially independent.</li> <li>&gt;If the service provider is the payee for the person, the person's funds are maintained separately and accurate records are kept.</li> <li>&gt;If staff help manage personal funds for the person, safeguards are in place to ensure that the money is spent and accounted for appropriately.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;There is no clear evidence of missing mis-used funds, but there is not thorough accounting for the person's funds.</li> <li>&gt;The person served indicates a desire to become more financially independent, and training needs have been identified, but have not been implemented.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Individual funds are not appropriately accounted for and there are indicators of missing or mis-used funds.</li> <li>&gt;Payees or conservators are not appropriately accounting for the person's funds, and the person has not been supported to remedy the situation.</li> <li>&gt;The person served does not have information about the amount of funds they have, how their funds are used, and/or how to access them.</li> </ul>
<p>8. The person and guardian have been provided individually-appropriate information regarding his/her rights to confidentiality, to access records, and to decide with whom to share information.</p>	<ul style="list-style-type: none"> <li>&gt;Informed consents are completed and signed for release of information, and are both subject specific and time limited.</li> <li>&gt;The person served is aware that he/she can access their records if desired.</li> <li>&gt;The person or guardian is being supported in understanding confidentiality.</li> <li>&gt;Training about confidentiality is individualized and appropriate to the person.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Training is occurring, but not in an understandable manner or individualized for the person served or the guardian.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No training has occurred to inform the person served about confidentiality issues.</li> <li>&gt;There are no signed releases regarding confidentiality; or , they are not subject specific or time limited.</li> </ul>
<p>9. The person and guardian have been provided individually-appropriate information regarding how to access dispute resolution processes if disputes arise concerning his/her services, including such processes both for his/her service provider and for the CDDO region.</p>	<ul style="list-style-type: none"> <li>&gt;Conversations with the person and observations indicate the person knows where to go if he/she disagrees with the service provider about service related issues.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Training is occurring, but not in an understandable manner or individualized for the person served or the guardian.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;The person served or guardian have no knowledge of the dispute resolution processes, and there is no evidence that the information was provided to them.</li> </ul>

Standard Being Assessed	Meets Standard	Process in Place	Not Present
<p>10. Both the person and the guardian are assisted in resolving any conflict that arises between them, and are supported in understanding their respective rights, roles and responsibilities, as well as the person's preferences in regard to the conflict.</p>	<p>&gt;There is evidence that the person's preferences are always taken into account and their rights are protected. &gt;If there is a conflict between the person and the guardian, the provider is supporting the person and the guardian to resolve the conflict.</p>	<p>&gt;There is evidence that some but not all of the person's preferences have been taken into account. &gt;Conflict has been recognized, but efforts to support the person and the guardian resolve them have not been timely or effectively undertaken.</p>	<p>&gt;Next best options are being substituted for preferences when preferences can be achieved. &gt;The person's preferences are not taken into account. &gt;Assistance has not been provided to resolve conflict between the person and guardian. &gt;Lack of evidence to show the provider has protected the person's rights.</p>
<p>11. The person is treated with dignity, respect and fairness; is listened to, responded to, and treated as an adult.</p>	<p>&gt;Conversations and observations demonstrate that the person is consistently treated with dignity and respect.</p>	<p>&gt;Conversations, observations and/or documentation demonstrate some inconsistency in the person being treated with dignity and respect.</p>	<p>&gt;Conversations, observations and/or documentation demonstrate numerous instances of the person not being treated with dignity and respect.</p>
<p>12. The person reports feeling safe and secure in all of his/her environments; or if not, pro-active measures are in place to effectively detect and address the cause(s).</p>	<p>&gt;Conversations and observations with the person indicate he/she feels safe and secure in all of his/her environments. &gt;The service provider is proactive about detecting and addressing the person's concerns about safety and security, including identification and provision of training to support the person in learning and acting upon personal safety and security practices.</p>	<p>&gt;The person served reports feeling unsafe in environments but does not appear to be in current danger and the provider has taken some steps to address the concerns, with plans for additional measures to address the concerns.</p>	<p>&gt;The person served reports that he does not feeling safe in any or all environments and the service provider is not proactive in addressing the concerns of the persons served.</p>

## OUTCOME MEASURE NUMBER THREE

### III. Personal Health and Safety Maintained

<p><b>III. A.</b> The persons lifestyle demonstrates that their personal health and safety are maintained at a level that is determined appropriate by the person, the persons guardian and / or support team.</p>	<p style="text-align: center;"><b>YES</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If YES, stop and move on to Outcome Measure IV ]</p>	<p style="text-align: center;"><b>NO</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If NO, complete Sub Outcome III. B ]</p>	<p style="text-align: center;">What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>All of the standards addressed in Outcome Measure Number 3 should be effectively present, or are being addressed in a manner that assures the outcome in the persons life, to the degree that the person, the persons guardian feel is important to them. This standard can be met when the person is receiving case management only, on a wait list, or while receiving less than requested amount of supports and services.</p>
<p><b>III. B.</b> The persons lifestyle demonstrates that personal safety and security measures are in place to the degree that is needed by the person.</p>	<p style="text-align: center;"><b>YES</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If YES, stop and move on to Sub Outcome Measure III. C. ]</p>	<p style="text-align: center;"><b>NO</b></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;">[ If NO, complete standards 1, 12 thru 14, 20, 21 &amp; 22 ]</p>	<p style="text-align: center;">What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>All of the standards addressed in Outcome Measure Number 3, standards 1, 12, 13 &amp; 14 should be effectively present, or are being addressed in a manner that assures the outcome in the persons life, to the degree that the person, the persons guardian feel is important to them. This standard can be met when the person is receiving case management only, on a wait list, or while receiving less than requested amount of supports and services.</p>

<p><b>III. C.</b> The person is supported or assisted as appropriate to ensure that all needed health related and medication support is present in the persons life to the degree that is appropriate to the person, the persons guardian and support team.</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p>[ If YES, stop and move on to Sub Outcome Measure III. D. ]</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p>[ If NO, complete standards 2 thru 11 ]</p>	<p>What meets this Sub Outcome Measure [Color corresponds with the applicable standards]</p> <p>All standards in sub section are met that assure:</p> <ul style="list-style-type: none"> <li>*preventative, routine and physical examinations are regularly obtained</li> <li>*specialized health care needs / services / equip are present</li> <li>*person is supported to understand their health care needs to promote independence / personal integration and community inclusion</li> <li>*medications - staff are aware, have been trained - are appropriately prescribed - reviewed to monitor effectiveness, etc.</li> </ul>
<p><b>III. D.</b> The person, the persons guardian and support team are confident that: Direct care staff have the training sufficient to meet the daily needs of the person, including behavioral supports as required. Evidence exists that all staff have had background checks performed, have received First Aid and CPR training, and that staff know how to appropriately prevent and report Abuse, Neglect and Exploitation. And the person, the persons guardian, as appropriate knows what to do, who to contact if someone mistreats them (not limiting to ANE events).</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p>[ If YES, stop and move on to Outcome Measure 4 ]</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p>[ If NO, complete standards 15 thru 19 ]</p>	<p>What meets this Sub Outcome Measure [ Color corresponds with the applicable standards]</p> <p>All standards are met including:</p> <ul style="list-style-type: none"> <li>* Staff access to APS number</li> <li>* Staff aware how to prevent and report ANE</li> <li>* Staff trained in CPR - First Aid</li> <li>* Staff have completed background check</li> <li>* Person knows what to do if they are mistreated</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>1. Personal safety and security materials (including first aid supplies and water temperature safety features as needed), and all needed health care equipment or supplies, are present, well maintained and readily available for the person.</p>	<p>&gt;All necessary materials as described are present as necessary for person's safety and security</p> <p>&gt;All necessary health care equipment and supplies are present, well maintained and readily available</p>	<p>&gt;Critical materials are present but others are missing</p> <p>&gt;Critical health care equipment and supplies are present and maintained, but others are missing or not maintained</p>	<p>&gt;Items addressed in standard are not present as needed</p>
<p>2. Preventative, routine and physical examinations are regularly obtained by the person.</p>	<p>&gt;Evidence that preventative, routine and physical examinations are complete as specifically needed by person</p>	<p>&gt;Needed examinations are not consistently maintained on a routine basis</p>	<p>&gt;Significant gaps in addressing needed examinations regularly</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
3. All specialized health services and/or equipment needed by the person are timely accessed and continuously maintained.	<ul style="list-style-type: none"> <li>&gt;Evidence verifies that all elements of the standard are present as needed by the person</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Non-critical health services and/or equipment needed by the person are not readily available on a continuous or timely basis</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Significant gaps in accessing/maintaining needed specialized health services or equipment</li> </ul>
4. The person is supported in knowing, making decisions about, and accessing health services and equipment; training and information about personal health maintenance and accessing available health care is provided to enhance the person's skills and independence.	<ul style="list-style-type: none"> <li>&gt;Through interview and/or by observation person is supported to achieve all needed elements of the standard to enhance the person's skills and independence</li> <li>&gt;The person has been provided training and/ or information to maintain a healthy lifestyle</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Person knows about but is not consistently supported or trained in making health care decisions</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Person does not make decisions, nor are they supported or trained in accessing health services and equipment</li> </ul>
5. Staff are knowledgeable about and responsive to the person's health services and equipment needs.	<ul style="list-style-type: none"> <li>&gt;Staff can demonstrate knowledge of the person's health services and equipment</li> <li>&gt;Evidence indicates that staff are responsive to the person's health service needs</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Staff knowledge of the person's health services and equipment needs is limited</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Staff demonstrate little or no knowledge about health services and equipment needs</li> <li>&gt;Provider is not responsive to health care or equipment needs</li> </ul>
6. Coordination of health services, medication and equipment needs between service providers (and different staff of each provider is present.	<ul style="list-style-type: none"> <li>&gt;Evidence of communication and coordinated service delivery between provider staff and between providers and/or family if necessary.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Sporadic communication or non-critical gaps in service delivery between provider staff and between providers and/or family, if necessary.</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Significant gaps in service delivery between provider staff and between providers and/or family, if necessary.</li> </ul>
7. Staff are aware of the medications used by the person; are knowledgeable of the purpose and potential side effects of the medications; and, know how to respond effectively if negative side effects occur.	<ul style="list-style-type: none"> <li>&gt;Evidence is present that staff are aware or have access to information about the medications used by the person</li> <li>&gt;Know the purpose</li> <li>&gt;Know the potential side effects</li> <li>&gt;Know how to respond effectively</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Know critical information</li> <li>&gt;Reference material is not readily available</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No knowledge</li> <li>&gt;No reference material available</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
8. All medications consumed are prescribed or approved by the person's physician or other health care practitioner, and the person or guardian are informed about the nature and effect of all such medications and consent to their consumption.	<ul style="list-style-type: none"> <li>&gt;Evidence of physician orders or other health care professional</li> <li>&gt;Person and/or guardian are aware of medications</li> <li>&gt;Evidence of consent</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Evidence of physician orders or other health care professional; but:</li> <li>&gt;person and/or guardian are not made aware</li> <li>&gt;person and/or guardian have not provided consent</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No physician orders available</li> <li>&gt;No knowledge of medications by person and/or guardian</li> <li>&gt;No consent</li> </ul>
9. Medications are regularly reviewed to monitor their effectiveness to address the reason for which they are prescribed and for possible side effects.	<ul style="list-style-type: none"> <li>&gt;Evidence exists that medications are regularly reviewed to address both continued need and potential side effects</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Inconsistent review</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No evidence of review</li> </ul>
10. Medication consumption is monitored to ensure accurate consumption, and medication errors are effectively detected and responded to.	<ul style="list-style-type: none"> <li>&gt;Evidence of a medication monitoring system in place and effectively utilized</li> <li>&gt;Evidence that there is an effective system to monitor for medication errors</li> <li>&gt;Evidence that if errors are detected that they are appropriately responded to</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Evidence of a medication monitoring system in place, but not consistent or effectively utilized</li> <li>&gt;Evidence of a monitoring system for medications errors, but not consistent or effectively utilized</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Absence of a monitoring system</li> <li>&gt;No system to detect medication errors, or system in place is not utilized effectively</li> <li>&gt;Medication errors when detected are not responded to appropriately</li> </ul>
11. Any administration of medications or other nursing tasks or activities are performed only by staff to whom a nurse has trained and delegated the duty, and under the nurse's supervision.	<ul style="list-style-type: none"> <li>&gt;Evidence of training, delegation and ongoing supervision by nurse as to any medication administration or other nursing task</li> </ul>		<ul style="list-style-type: none"> <li>&gt;Untrained staff performing nursing tasks or activities</li> <li>&gt;No ongoing supervision by nurse</li> </ul>
12. The person's living area is clean and well maintained, including appropriate temperature and adequate inside and outside lighting.	<ul style="list-style-type: none"> <li>&gt;On-site observation demonstrates:</li> <li>&gt;The person's living area is adequately clean to ensure no health or safety risk</li> <li>&gt;Well maintained</li> <li>&gt;Appropriate temperature control is available</li> <li>&gt;Adequate inside and outside lighting is present</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Minor maintenance issues exist</li> <li>&gt;Living environment is essentially safe and healthy, but significant cleanliness or maintenance issues exist and steps are being taken to make improvement</li> </ul>	<ul style="list-style-type: none"> <li>&gt;There are substantial cleanliness and maintenance issues present, creating risk to person's health and safety issues present</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
13. The person's working/day service area is clean and well maintained, including appropriate temperature and adequate inside and outside lighting.	<ul style="list-style-type: none"> <li>&gt;On-site observation demonstrates:</li> <li>&gt;The person's working/day service area is adequately clean to ensure no health or safety risk</li> <li>&gt;Well maintained</li> <li>&gt;Appropriate temperature control is available</li> <li>&gt;Adequate inside and outside lighting is present</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Minor maintenance issues exist</li> <li>&gt;Work/day environment is essentially safe and healthy, but significant cleanliness or maintenance issues exist and steps are being taken to make improvement</li> </ul>	<ul style="list-style-type: none"> <li>&gt;There are substantial cleanliness and/or maintenance issues present, creating risk to person's health and safety</li> </ul>
14. Appropriate accessible space is available for the person to engage in desired activities.	<ul style="list-style-type: none"> <li>&gt;Conversations with the person and observations demonstrate appropriate space is available</li> <li>&gt;Person's preferred lifestyle (or next best option) is being met</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Space is minimal and/or some access barriers exist; however the person's preferred or next best lifestyle is being met</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Substantial access barriers exist, the space is inadequate, and/or preferred (or next best) lifestyle is not being met</li> </ul>
15. Staff know how to access the Adult Protective Services contact number; and, are knowledgeable about how to identify and report instances of suspected abuse, neglect or exploitation.	<ul style="list-style-type: none"> <li>&gt;Through interview (and review of training records if helpful) it is determined that:</li> <li>&gt;Staff know how to access the APS contact number, and</li> <li>&gt;Can identify and report suspected ANE</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Staff indicate they know how to report but are not sure what is abuse, neglect or exploitation</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Evidence that ANE events may have occurred and have not been reported</li> <li>&gt;Staff reported they are not allowed to report or do not know how to</li> <li>&gt;Staff having limited or no knowledge regarding abuse, neglect and exploitation</li> </ul>
16. Staff trained in CPR and first aid are present whenever services are provided.	<ul style="list-style-type: none"> <li>&gt;Verified certification</li> </ul>	<ul style="list-style-type: none"> <li>&gt;Certification is outdated, but training is scheduled within a short time frame</li> </ul>	<ul style="list-style-type: none"> <li>&gt;No evidence of certification is available</li> </ul>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>17. Staff have sufficient knowledge, competence and training to serve the person without oversight by another staff before working alone.</p>	<p>&gt;Review of assigned staff training records or interview indicates that training is appropriate to the person's support and service needs are addressed; and &gt;Staff confirm they feel competent to provide the supports and services as outlined in the person's plan and/or as needed for the person &gt;Identified and/or needed services and supports are consistently delivered</p>	<p>&gt;Staff demonstrate some knowledge but it is inadequate to provide all identified and/or needed services and supports</p>	<p>&gt;Staff indicate they are not appropriately trained. &gt;Effective implementation of service and support needs is not taking place for the person</p>
<p>18. Staff working with the person have had a background check, including at least criminal record, presence on any registry, and prior employment.</p>	<p>&gt;Documented evidence is present</p>	<p>&gt;Process has been initiated within a prompt time-frame; however results are not yet available, and staff involved is not working alone with the person</p>	<p>&gt;No evidence or verification that criminal record, presence on any registry and prior employment checks have been made as to any staff working with the person</p>
<p>19. The person knows what to do if someone mistreats him/her or fails to provide needed assistance to him/her (or is supported as needed to respond to these issues).</p>	<p>&gt;The person can demonstrate who they would call or tell to effectively address these issues; or, &gt;The person is supported by someone who can demonstrate appropriate knowledge</p>		<p>&gt;Person does not have necessary knowledge or ability and is not supported in a way that would assure appropriate and timely response</p>
<p>20. The person knows what to do in the event of a fire, tornado, or other emergency situations (or is supported as needed in responding safely).</p>	<p>&gt;The person can demonstrate how they would effectively respond to the specific situations; or, &gt;The person is supported by someone who can demonstrate appropriate knowledge</p>		<p>&gt;Person does not have necessary knowledge or ability and is not supported in a way that would assure appropriate and timely response</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
21. The person knows how to assure his/her personal safety and security (or is supported as needed to address these issues).	>The person can demonstrate he/she has appropriate knowledge to assure personal safety and security; or, >The person is supported by someone who can demonstrate appropriate knowledge		>Person does not have necessary knowledge or ability and is not supported in a way that would assure appropriate and timely response
22. If the person, guardian and/or support team feel the person has been subject to any incident of physical harm, emotional/mental harm, sexual abuse/exploitation, theft or exploitation of money or possessions, or reasonably preventable injury in the past year, the provider has effectively identified and corrected the originating cause and assisted the person in accessing emotional or other needed support.	>Interview, observation and record review demonstrate the provider has effectively identified and corrected the originating cause; and, the provider has assisted the person to access emotional or other needed support	>Interview, observation and record review demonstrate the provider has effectively identified and corrected the originating cause; however, >The provider has not assisted the person to access emotional or other needed support	>Provider has not taken appropriate action

## OUTCOME MEASURE NUMBER FOUR

### IV. Use Of Psychotropic Medications Or Restrictive Practices Safeguarded

<b>IV. A.</b> The persons lifestyle demonstrates that all use of Psychotropic Medications or Restrictive Practices have appropriate safeguards in place, and/or the person does not have these restrictions in place in there lives, and that the person has not been subjected to the utilization of law enforcement authorities to respond to behavioral support issues in the past year ( exceptions for significant danger excepted); and/or physical seclusion / restraint has not be utilized in the past year (exceptions for significant / imminent danger).	<p style="text-align: center; color: green; font-weight: bold; font-size: 1.2em;">YES</p> <p style="text-align: center; font-size: 1.5em;">□</p> <p style="text-align: center; font-weight: bold;">[ If YES, stop the KLO-II is completed, Congratulations]</p>	<p style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">NO</p> <p style="text-align: center; font-size: 1.5em;">□</p> <p style="text-align: center; color: red; font-weight: bold;">[ If NO, complete standards 1 thru 12 ]</p>	<p style="text-align: center;">What meets this Outcome Measure [Color corresponds with the applicable standards]</p> <p>All of the standards addressed in Outcome Measure Number 4 should be effectively present. This outcome is applicable to licensed community services; standard 10 &amp; 11 are applicable to all persons regardless of service setting. Standards 10 &amp; 11 should be utilized for persons on waiting lists &amp; for persons receiving case management only.</p>
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Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>1. If there is any restrictive intervention or psychotropic medication being used for or by the person, the person and support team have examined, determined and documented it to be the least restrictive intervention appropriate for this person.</p>	<p>&gt;Person &amp; support team have:            *examined / exhausted            *determined            *documented that            &gt;all lessor restrictive alternatives have been tried...            AND            &gt;present situation is most appropriate for this person</p>	<p>&gt;Lessor restrictive alternatives have been assessed, but other elements are not completely examined, determined and documented to be the least restrictive</p>	<p>&gt;No review has taken place, or            &gt;Major components are missing</p>
<p>2. If there is any restrictive intervention or psychotropic medication being used for or by the person, positive supports, accommodations and effective services have been considered, documented and are consistently present in the person's life.</p>	<p>&gt;The following are observed as consistently present in the person's life:            *positive supports            *accommodations            *effective services</p>	<p>&gt;The majority of the items are consistently present in the person's life:            *positive supports            *accommodations            *effective services</p>	<p>&gt;Effective services            &gt;Positive services            &gt;Accommodations are not present in the person life</p>
<p>3. If there is any restrictive intervention or psychotropic medication being used for or by the person, the person and his/her guardian have received information about risks, benefits, side effects and alternatives, and have given voluntary, informed, documented consent for the use of the intervention or medication.</p>	<p>&gt;There is evidence that the person and guardian have received the following info:            *risks            *benefits            *side-effects            *other alternatives            &gt;both person and guardian if appointed have given voluntary informed and documented consent</p>	<p>&gt;Person and guardian have not received complete information regarding:            *risks            *benefits            *side-effects            *other alternatives            &gt;And/or the provider has not made reasonable attempts to secure consent</p>	<p>&gt;Person and guardian have not received information...AND            &gt;Have not given informed consent</p>
<p>4. If there is a restrictive intervention or psychotropic medication being used as a <i>behavior support</i> for or by the person, the behavioral issue being addressed is clearly defined, together with a description of how it's frequency and severity will be measured, as well as a description of how often the support will be reviewed and what criteria will be used for the reduction or elimination (only when appropriate) of the intervention or medication.</p>	<p>(Behavior Support Only)            &gt;Clear definition of behavior at issue            &gt;Explanation is provided to staff as to how to consistently document frequency and severity of specific behavior according to person's plan            &gt;Statement as to criteria for when and how the plan will be reviewed, evaluated, revised or ended</p>	<p>(Behavior Support Only)            &gt;Methodology/mechanism is in place, but one or two element(s) not addressed consistently or effectively</p>	<p>(Behavior Support Only)            &gt;No methodology/mechanism in place            &gt;All elements are missing or incomplete</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>5. If there is a restrictive intervention or psychotropic medication being used as a <i>behavior support</i> for or by the person, staff have been trained in the appropriate use of the support, are accurately documenting the frequency and severity of the behavioral issue involved, and are consistently providing related positive behavioral supports.</p>	<p>(Behavior Support Only)            &gt;Staff have been trained as appropriate to the person's plan            &gt;Staff have been provided adequate information to consistently implement plan and respond to needs            &gt;Staff consistently document frequency and severity of targeted behaviors according to plan</p>	<p>(Behavior Support Only)            &gt;Mechanism is in place to train staff to provide individually appropriate supports....and            &gt;To document frequency &amp; severity ... but            &gt;Staff are not consistently providing positive behavioral supports according to plan, and/or            &gt;The staff do not consistently document frequency and severity according to plan</p>	<p>(Behavior Support Only)            &gt;No mechanism is in place... or            &gt;Both elements of documentation are missing... or            &gt;Staff have not been provided appropriate training</p>
<p>6. If there is a restrictive intervention or psychotropic medication being used as a <i>behavior support</i> for or by the person, the provider is periodically reviewing and reporting to the person, support team and prescribing physician (when applicable), information about the frequency and severity of the behavioral issue involved, effectiveness of the intervention or medication being used, and any medication side effects.</p>	<p>(Behavior Support Only)            &gt;The provider, based on the person's individual needs, reviews and reports to:            *the person            *the support team            *the prescribing physician            The information about:            *frequency and severity of behavior issue            *effectiveness of restrictive intervention(s) or medication(s)            *side effects</p>	<p>(Behavior Support Only)            &gt;Mechanism is in place but one or more of the following are not present:            *provider has not reviewed            *provider has not reported to the person, support network, prescribing physician            *provider is not reporting frequency and severity of behavior issue            *provider is not reporting effectiveness of medication(s) or restrictive intervention(s) or side effect(s)</p>	<p>(Behavior Support Only)            &gt;No mechanism in place            &gt;Mechanism in place, but elements are not addressed</p>
<p>7. If any psychotropic medication is being used to treat a diagnosed mental illness, the provider is periodically providing to the prescribing physician, information about the effectiveness of the medication used and any medication side effects.</p>	<p>(Mental Illness Support Only)            &gt;Provider, based on individual needs, provides to prescribing physician:            *medication effectiveness            *medication side effects</p>	<p>(Mental Illness Support Only)            &gt;Provider has effective mechanism in place to routinely provide information to prescribing physician on at least one of the elements</p>	<p>(Mental Illness Support Only)            &gt;No mechanism in place to effectively provide required information</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>8. A behavior management committee (meeting the membership criteria described in KAR 30-63-23[b][3]) periodically reviews any use of restrictive interventions or psychotropic medications for or by the person to ensure the provisions of KAR 30-63-23 are met, and the provider is responsive to any findings or recommendations by that team.</p>	<p>&gt;Behavior management committee (BMC) meets regulatory structure and is in place          &gt;BMC periodically (based on person’s needs) reviews uses of:          *restrictive interventions          *psychotropic medications          &gt;BMC ensures provisions of KAR 30-63-23 are met          &gt;Provider is responsive to BMC’s findings and recommendations          &gt;BMC follows up to determine provider responsiveness</p>	<p>&gt;No more than one of the criteria listed in “Meets Standard” section is absent</p>	<p>&gt;BMC review does not occur; or          &gt; More than one of the criteria listed in the “Meets Standard” section is absent</p>
<p>9. Any utilization of PRN psychotropic medication is with the express consent of the person or guardian, and per usage approval from the prescribing physician or another health care professional designated by the person or guardian.</p>	<p>(PRN psychotropic medication use only)          &gt; Documented informed consent is obtained          &gt;Per usage approval from prescribing physician or other health care professional designated by the person or guardian is documented</p>	<p>(PRN psychotropic medication use only)          &gt; One of the two elements is not met</p>	<p>(PRN psychotropic medication use only)          &gt; Neither of the two elements are met</p>
<p>10. There has been no utilization of law enforcement authorities to respond to behavioral support issues in the past year, absent a direct, significant and unabated threat to the physical safety of the person or others who cannot be promptly removed from danger, unless specifically included in a plan meeting the requirements above.</p>	<p>&gt;Law enforcement used only when:          * immediate, direct, significant and unabated threat to the physical safety of the person or others; or,          *as a specific part of a documented positive behavior support plan, meeting criteria above</p>		<p>&gt;Use of law enforcement without either of two required elements</p>

Standard Being Assessed	Meets Standard	Process In Place	Not Present
<p>11. There has been no utilization of physical restraint or seclusion to respond to behavioral support issues in the past year, absent a direct, significant and unabated threat to the physical safety of the person or others who cannot be promptly removed from danger, unless specifically included in a plan meeting the requirements above.</p>	<p>&gt;Physical restraint or seclusion used only when:            *immediate, direct, significant and unabated threat to the physical safety of the person or others; or,            *as a specific part of a documented positive behavior support plan, meeting criteria above; and, staff are adequately trained to follow procedure</p>		<p>&gt;Use of physical restraint or seclusion without either of the two required elements</p>
<p>12. If any of the established “red flags” regarding use of psychotropic medications are present in the person’s life, the person, his/her guardian, support team and provider have examined the issue(s), determined how status quo is appropriate to best meet the person’s needs, or developed a plan to modify medication usage to best meet the person’s needs.</p>	<p>&gt;If red flags are present:            *the person, support team guardian and provider have examined the issue            *been determined most appropriate to meet person’s needs            *or have developed a plan to modify med usage to best meet the persons needs</p>	<p>&gt; Only one element is not present</p>	<p>&gt;Two or more elements are not present</p>

It is required that each KLO-II is reviewed with the CSP Director (designee) and the CDDO Management Region Director ( designee )

Person consulted \_\_\_\_\_ Date \_\_\_\_\_ Agency \_\_\_\_\_

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