

**Butler County Board of Mental Retardation and  
Developmental Disabilities  
2007 Annual Action Plan  
FINAL REPORT**

**LONG TERM GOAL I:  
INDIVIDUALS CHOOSE THEIR LIFE ACTIVITIES AND GOALS**

***Annual Goal 1: Adults who choose community employment will be supported to work successfully in an integrated employment setting and will earn at or above minimum wage level.***

**Actions we said we would take to achieve this goal:**

- Support Project Search. (SSA)\*
- Support a Parent Resource Position to promote employment for young persons ready to graduate from high school. (SSA)
- Market and promote community employment. (SSA)
- Contract the equivalent of 1 FTE employment specialist position for job placement. (SSA)
- Support EPRO (Empowered People Reaching Out) to mentor transition students. (SSA, QA)

**Accomplishments:**

- 23 individuals obtained community employment, earning at or above minimum wage and maintained employment for at least 90 days (and counting).
- Contracted with a parent as a support position; she has been crucial to the development and growth of the School to Adult Life Transition Series.
- Two EPRO members were hired as apprentice job coaches by one of the provider organization to provide classroom and on the job training to transitioning students.

***Annual Goal 2: Adults who choose to participate in day habilitation programs will have options and choices for meaningful activities.***

**Actions we said we would take to achieve this goal:**

- Develop and implement the Butler Choices art production at MRDD adult centers. (AS)
- Provide a computer lab for individuals in each center. (AS)
- Provide a customized day habilitation program for individuals who have challenging behaviors and historically have had difficulty finding appropriate day services which meet their unique needs. (AS, ANC)
- Provide alternative methods to present choices to individuals and for them to communicate their choices to us. (AS, ANC, SSA)

**Accomplishments:**

- The Art program did flourish as we moved through 2007. All four facilities have art studios or space provided for individuals to create their art. Developed a contract with Visionaries and Voices to assure a financial stream so that artists will be paid for their work.

- Retail space for artwork was remodeled and completed at Hamilton Center.
- A full time position was devoted to the coordination of the Heart of the Art.
- Computer labs were completed and fully utilized at all four facilities.
- Three individuals were served through customized day programs, two of which continue to be served.
- A satisfaction survey was completed during the early part of the 3<sup>rd</sup> quarter. We had 79% (269) responding out of 339 surveys. Of the 269 respondents, 98% are satisfied with the people who work with them and with what they do during the day.

***Annual Goal 3: Families of children (birth – 3) will be more familiar with services currently available to them within their community and through MRDD.***

**Actions we said we would take to achieve this goal:**

- Identify activities available to families in each community for children age 18-36 months. (EI)
- EI staff will support families to attend and participate in community based activities, when needed. (EI)

**Accomplishments:**

- In some parts of the county, libraries, YMCA's, gymnastic schools, and some private business that support motor development are surfacing.
- A couple of parents have begun their own meetings and activities after a park trip was planned by staff.

**LONG TERM GOAL II:  
INDIVIDUALS WILL CONTROL AND BE RESPONSIBLE  
FOR ALLOCATED PERSONAL BUDGETS**

***Annual Goal 4: Individuals will know what services cost and will make choices based on allocations available to them.***

**Actions we said we would take to achieve this goal:**

- Support Coordinators will give individuals their budget amounts. (SSA)
- Individuals will have knowledge of service provider options and costs of services. (SSA)
- A Provider Fair will be held two times during 2007. (SSA)
- An all inclusive provider resource will be available in several different formats for individuals and families. (SSA, QA)
- Families of children (from birth - 3) will be informed of the cost of service that is being provided by MRDD in 2008. (EI)
- The Business Office will work with each service division to obtain and maintain cost of service. (BO, AS, EI)

**Accomplishments:**

- The state assessment tool to determine individual staffing needs was administered for all individuals enrolled within the Adult programs. Staffing has been maintained according to this tool.

- “My Budget” sheets were completed for 624 individuals and reviewed with them, showing their costs of services.

***Annual Goal 5: Individuals will be supported with person centered planning to help them to determine what they want and need.***

**Actions we said we would take to achieve this goal:**

- Increase the number of people who can facilitate PATH (Planning Alternative Tomorrows with Hope) sessions. (SSA, QA).
- Complete Person Centered Planning sessions for people who want them. (SSA).
- Assist individuals on waiting list to apply for waivers. (SSA, MS)

**Accomplishments:**

- 8 people have learned/are learning to facilitate PATH sessions.
- 21 Person Centered Planning sessions were completed this year.
- 26 individuals received IO waivers in 2007; 3 of these were Martin waivers. 5 individuals received Level 1 waivers in 2007.

### **LONG TERM GOAL III:**

#### **INDIVIDUALS ARE HEALTHY, SAFE AND TREATED WITH RESPECT**

***Annual Goal 6: Individuals’ safety and health will be monitored by MRDD.***

**Actions we said we would take to achieve this goal:**

- Monitor for trends and patterns of reported MUI’s (Major Unusual Incidents) regarding specific individuals and agencies. (OIR)
- Noted trends and patterns will be discussed with the provider to discuss ways and strategies to reduce MUI’s. (OIR)
- Monitor contracted day habilitation services. (SSA)
- Monitor and complete Provider Compliance Reviews per ODMRDD rule. (QA)

**Accomplishments:**

- Trends and Patterns Committee met in late September, 2007; reports of major unusual incidents were about the same or less in some categories.
- Contracts were monitored.
- Provider Compliance Reviews were completed.

***Annual Goal 7: Individuals will participate in defining how their lives can be better.***

**Actions we said we would take to achieve this goal:**

- Continue the development of the Butler County Co-op. (QA)
- Request \$5000 new initiative monies to be used as match dollars as an incentive for providers to get staff to training opportunities. (QA)
- Request \$5500 new initiative monies to be used for development of Web site for the Co-op, supplies for training, and cost of projects (i.e. cameras for “Picture it” project.) (QA)

- Develop a new tool/format to measure individual's satisfaction with their life and/or services. (QA)
- Complete three trainings for direct service professionals to improve their interactions with the people they serve. (QA, SD)

**Accomplishments:**

- In October, November, December 2007, the Quality Cooperative began creating a training guide for their video; the video was shown to self-advocates, Support Coordinators, a group at the Ohio Association of County Boards of MRDD Conference in Columbus, and providers in Butler County. By December 14, providers had requested the video.
- Money was available for incentives for providers, but was not fully utilized.
- Revisions to QE surveys have been completed and include a continuum of responses which are objective and measurable. A satisfaction tracking sheet will be posted on the agency website quarterly.
- Provider satisfaction surveys will begin to be conducted by Miami University within the first quarter of 2008. Results will be posted on agency website.
- "The Autism Experience" and "TEACCH" methods of supporting individuals with autism trainings were provided to agency and individual providers of residential services.

***Annual Goal 8: Individuals who use Board facilities will be safe and secure; there will be alternative plans in the event of emergencies.***

**Actions we said we would take to achieve this goal:**

- Continue safety program and facility review from BWC's Public Employers Risk Reduction Program. (SS, AS)
- Continue collaboration with the local Hamilton Safety Council, EMA (Emergency Management Agency), and BWC (Bureau of Worker's Comp.) (SS)
- Complete all drills, inspections, and emergency plans. (AS supervisors)
- Develop a safety awareness award for staff and/or consumers. (SS, AS)

**Accomplishments:**

- Throughout 2007 there was a total of 64 staff work-related injury incidents reported. 43 incidents were reported within appropriate timelines (67%). In addition, total number of work injuries resulting in lost work days went from 9 to 3 and total number of lost work days went from 235 to 67.
- Site Services Supervisor continued relationships with Hamilton Safety Council, EMA, and BWC. Participated in several specialized training exercises and 20 individuals were certified through EMA.
- Adult Services facilities have maintained all drills and evacuation plans at 100%.

***Annual Goal 9: Individuals who have intensive needs will have services that are designed and supported to meet their unique needs.***

**Actions we said we would take to achieve this goal:**

- Continue to collaborate internally and externally with the Technical Assistance Team to meet the needs of individuals with more intense service needs. (ANC, SSA)
- Continue to contract with other providers, such as psychiatric services. (ANC, SSA)
- Continue to provide Family Focus services to families. (ANC)
- Continue the allocation of family resource funds to families for specific needs. (SSA)

**Accomplishments:**

- The Technical Assistance Team started to meet monthly on a formal basis in July, 2007.
- Dr. Peter Scheidler, Medical Director, provided direct service and consultation to staff and individuals. He continues to take new individuals on his caseload when evaluation or a physician is not available.
- The Butler County Dental Program provided oral screenings for 442 individuals; accompanied 80 individuals to appointments; assisted 15 individuals in the O.R.; and provided educational opportunities to 713 individuals and staff.
- 87 individuals received sexuality & relationship education/counseling; referrals for individual services were up 25% over the previous year.
- 150 individuals received services through Children's Diagnostic Services (psychiatric services, counseling and evaluations); the waiting list for this service continues to be a concern with 19 individuals currently – only 1 individual moved off the waiting list in 2007.
- Contracted with Habilitation Services for Occupational and Physical Therapies, for EI and Adult programs. The waiting list for home based evaluations continues to decrease, although the need for these services far exceeds the ability to provide them.
- Family Focus provided services for 93 individuals and families in 2007, averaging 62 contacts per month. The waiting list is currently 19 families, none over 30 days.
- Approximately \$328,109.00 was spent for Family Support Services (formerly Family Resource Services) in 2007; approximately 667 families used these services.

***Annual Goal 10: Individuals who live in housing contracted by BCBMRDD will live in safe, clean, and well maintained homes.***

**Actions we said we would take to achieve this goal:**

- Fully integrate management and operation of the Partnerships for Housing contract with Resident Home Corporation. (QA, BO)
- Partnerships for Housing will hold semi-annual meetings with tenants to assure that questions, and/or concerns are addressed. (QA)
- Partnerships for Housing will seek and secure site-based vouchers for all Butler County properties. (QA, BO)
- Rent structures for tenants will be evaluated and changed, as needed. (QA, BO)
- Butler County staff will monitor provisions of the contract and maintenance of the properties. (QA, BO)
- Partnerships for Housing will develop a satisfaction survey and share their results with the Butler County Board. (QA)
- Meetings will be facilitated between Partnerships for Housing and the Butler County MRDD Board, at least annually in 2007. (QA, BO)
- Partnerships for Housing will complete planning sessions to develop and complete a Vision Statement, as well as Strategic Planning sessions for the design of the future of the organization. (QA, BO)

**Accomplishments:**

- Meetings have been held more frequently than on a quarterly basis with Partnerships for Housing. The overall management of the homes and maintenance has received much praise from staff, providers, individual and families.
- A picnic meeting was held in October; turnout was small, but the gathering went well.
- Rent structures have been put into place for all homes not receiving Section 8.

- Tracking of repairs completed, paperwork, estimates of labor and cost has been a struggle. A new financial person has been hired and the communication process has been streamlined, hopefully this will resolve some of the concerns.
- A joint meeting was held with the Partnerships Board in October, 2007
- A planning meeting to develop a Vision Statement and Strategic Plan was scheduled for February 2008.

**LONG TERM GOAL IV:  
INDIVIDUALS ARE SUPPORTED TO CARRY OUT PLANS AND BUDGETS  
IN ORDER TO MEET THEIR INDIVIDUAL NEEDS**

***Annual Goal 11: Individuals will receive natural supports from within the community to meet their specific individual needs.***

**Actions we said we would take to achieve this goal:**

- Continue to recruit, train and match volunteers with individuals to assist them in meeting their identified needs. (CO)
- Continue to develop various community resources that can be made available to Support Coordinators to meet the diverse needs of the individuals they are serving. (CO)
- Work with families who already have functioning “support circles” to assist other families in developing their own functioning “support circles.” (QA, SSA)

**Accomplishments:**

- 17 individuals were referred and 7 of these (41%) were matched successfully with volunteers.
- 5 families participated in training about “support circles” and expressed interest in continued participation.

***Annual Goal 12: Families with children (0 – 3) will access services that will meet their specific needs.***

**Actions we said we would take to achieve this goal:**

- Continue to develop research evidence based curriculum for specialty groups. (EI, ANC)
- Support families to complete an entry and exit survey to measure the impact of service delivery. (EI)
- When necessary, provide additional support to parents with disabilities that need support to raise their child with developmental delays and identified needs. (EI)
- Collaborate with Care Case Management (i.e. cross training consultation) to improve service delivery for families. (EI)

**Accomplishments:**

- Specialty Group Measures of Effectiveness for 3<sup>rd</sup> and 4<sup>th</sup> quarter, 2007:
  - **Feeding Group** had a total of 14 children with their parent participating; 88% of families expressed overall value of the group as positive and helpful. 90% of parents indicated their child’s feeding skills improved as a direct result of their participation; 90% of parents indicated that they learned specific strategies to use with their child to address feeding issues; 90% of parents indicated they have positive changes in the

- way they react to their child's feeding difficulties. 80% of children in the group increased their level on the Eating Hierarchy.
- **Hanen Parent Group** had a total of 16 families participating; 89% of families expressed overall value of the group as positive and helpful. 100% of families indicated they have made specific changes in how they communicate with their child; 90% of families indicated their child's communication improved as a direct result of their participation; 90% of families indicated they would recommend this program to other families.
  - **Small Talk Group** had a total of 16 children with their parent participating. 92% of families expressed overall value of the group as positive and helpful. 85% of families indicate they made positive changes in their communicative interactions with their child; 92% of families reported improvement in their child's speech and language skills as a result of attending.
  - **Social Group** had a total of 40 children involved in 6 sessions during this time period. With approximately 55% of the families completing a satisfaction survey, 100% felt that the group helped their child in some way: 10% thought their child improved in learning how to follow directions and routines; 18% through their child had improved in learning how to accept and enjoy sensory/motor activities; 23 % felt their child improved in learning how to share and take turns; 50% felt their child improved in learning how to interact with other children and adults. 100% of the families said they would recommend this group to other families.
  - Comparing pre and post-surveys was unsuccessful in that only 1% did both surveys. In 2008, a new process will be initiated. Of the ones for whom we could compare pre and post-surveys:
    - Parents are increasing their awareness of resources, special needs, and behavioral techniques.
    - Parents believe their children are progressing with the help of increased parent ability, EI services, and practicing more with their child.
    - There is only a slight increase in doing enjoyable things as a family as well as going to social events in the community.
    - There is only a slight increase in knowledge about their own child.
    - Parents are comfortable advocating and planning with the support of EI staff.

***Annual Goal 13: Information on individuals will be accurate and available to support coordinators and other team members in order to facilitate services.***

**Actions we said we would take to achieve this goal:**

- Complete a list of tasks/steps needed to complete projects that will improve data collection & maintenance with timelines for 2007. (QA)
- Develop a tracking system for requests for assistance with data from the people using the information to assure that "users" are getting the follow-up required to adequately provide services and supports. (QA)
- Identify and support the staff development needs, regarding the various technological methods and computer usage to assist with making their jobs easier. (QA)

**Accomplishments:**

- Records Coordinator developed tasks with input and needed action from others.
- Tracking system was built and implemented in January, 2007 and is maintained daily.
- Data support survey questions were included in a survey; results have not been shared yet.

**Annual Goal 14: *Children in school will receive MRDD supports.***

**Actions we said we would take to achieve this goal:**

- Continue to provide behavior and classroom consultation by referral to children in local school districts. (ANC)
- Continue to provide grant monies to local school districts for preschool classrooms or other special education services. (BO)
- Continue to attend school district Superintendent meetings and special education director meetings. (Supt., ANC)

**Accomplishments:**

- Provided classroom management services to 98 children in local school districts.
- Grant monies were given to local school districts.
- Board staff attended meetings with school superintendents and special education directors.

**Annual Goal 15: *Individuals will be supported by stable, qualified MRDD staff.***

**Actions we said we would take to achieve this goal:**

- Training will be provided to EI staff in Dr. Solomon's Play Project, the TEACCH program, PIPE training, and on how to best build on family strengths so as to have a positive impact on the child's growth and development. (SD, EI)
- Comprehensive training for EI staff on all specialty areas, including the development and creation of an *Autism Resource Library*. (SD, EI)
- Provide support to supervisory staff and to direct service employees to maintain and increase job skills and maintain employment credentials. (HR)
- Provide training and on-going support to supervisors in effective and proactive management techniques. (HR, SD)
- Continue to develop leadership and management successor training (HR, SD)
- Maintain a current performance evaluation schedule and monitor completion for all employees. (HR)
- Assist new employees through a successful probationary period and orientation, by maintaining current record of all probationary employees, and monitoring the completion of mid-point and end-point evaluations to assure that all probationary employees are appropriately evaluated *before* moving to full time permanent status. (HR)
- Provide on-going training to Support Coordinators to help them be more efficient in their jobs. (SD)
- Assess and support staff training needs for customized day habilitation program, and for individuals with autism. (SD)

**Accomplishments:**

- Training was provided on the P.L.A.Y. Project, TEACCH, and PIPE training.
- 14 training sessions were held for Adult Services direct care staff.
- 12 training sessions were held for Support Coordinators.
- 8 training sessions were held for Customized Day Habilitation staff.
- As of 12/31/07, 95% of MRDD employees have a current evaluation on file.
- 93% of probationary employees exiting received an evaluation prior to entering full time permanent status.
- 54 employees completed the orientation training. 96% completed Phases I and III within the 90 day timeframe. Only 85% completed Phase II (facility based) within the 90 day timeframe.

***Annual Goal 16: Individuals will be supported by people with specialized training, experience, and knowledge about disabilities and appropriate strategies to support success.***

**Actions we said we would take to achieve this goal:**

- Provide Technical Assistance Teams to assist individuals and their teams that have specific identified needs. (ANC)
- Continue to provide on-going evaluation of the need and delivery mode of each ancillary service. (ANC)
- Continue to provide nurses to visit individuals in their homes (within the community) to monitor health concerns. (ANC)
- Provide training to MRDD staff, as well as providers to address behavioral concerns, medical concerns, techniques, and reportable conditions. (ANC, SD)

**Accomplishments:**

- The Technical Assistance Team started to meet monthly on a formal basis in July, 2007.
- Community nurses are carrying a caseload averaging 112; they completed all health record reviews, providing close follow-up and identification of health concerns. Mandated three year Medication Administration reviews were also completed within timelines specified by the department.
- Trainings were provided to Adult Services staff: 2 in the area of Behavior Supports; 3 sessions on Alzheimer's disease; 6 sessions on Medication Administration.

***Annual Goal 17: Individuals will have options for transportation that is safe, reliable, and affordable.***

**Actions we will take to achieve success:**

- Continue to participate in the Butler County Transportation Alliance. (BO & Supt.)
- Seek to provide alternative, less expensive transportation, when possible with vans, etc. instead of buses. (AS, BO)
- Seek outside sources (grants) to subsidize transportation for individuals. (All)

**Accomplishments:**

- Superintendent continued to chair Transit Alliance of Butler County.
- Finding other alternatives, less expensive options and grants has not been successful thus far.

**LONG TERM GOAL V:**

**THE PUBLIC WILL BE KNOWLEDGEABLE ABOUT HOW WE  
ACCOMPLISH OUR MISSION AND WILL TRUST  
HOW RESOURCES ARE MANAGED**

***Annual Goal 18: The Board will monitor costs and stay within the budget due to careful management of resources.***

**Actions we said we would take to achieve this goal:**

- Continue departmental budgeting and monitoring of spending. (All)

- Create safeguards in the process of monitoring contracts in order to maximize services and hold to costs. (All)
- Monitor all business office functions (payroll, accounting, etc.) for efficiency. (BO)
- Work with ICFMR's to reduce subsidy of active treatment effective 2008. (AS, BO)

**Accomplishments:**

- Spending was within 3% of the budget.
- There were 2 payroll issues requiring payroll adjustments in 2007; both were resolved in a timely manner.
- Payables processed 8032 invoices for 2007; 57 % were paid within 14 days, 25% within 30 days, 14% within 60 days, and 4% were over 60 days.
- All ICFMR's except one found other alternatives for active treatment; we continued to subsidize Fairfield Center due to a change in management and complications from revocation process.

***Annual Goal 19: The Board will inform the public about the effectiveness of services and the accomplishments toward its Mission.***

**Actions we said we would take to achieve this goal:**

- Continue to provide community newsletters, press releases, advertising and other media outlets to inform the public about Board activities. (CO)
- Provide specific information to public about effectiveness and efficiency. (CO)
- Continue staff involvement with community groups and management involvement with community/citizenship collaborations. (CO)
- Develop a method for gauging public knowledge of the agency's mission and activities. (CO)

**Accomplishments:**

- Our community newsletter was mailed out 4 times in 2007 and a postcard was mailed out announcing our new web site.
- 20 press releases, story ideas and/or photos were submitted by the Communications Coordinator and picked up by the media. Additionally, 9 stories were initiated by contact from the Communications Coordinator and 15 stories were printed that were not initiated by us.
- 9 ads were placed in various community publications throughout 2007.
- 3 listening sessions were held in the fall to get public input.

***Annual Goal 20: The Board will maximize Medicaid revenues.***

**Actions we said we would take to achieve this goal:**

- The Business Office will coordinate the conversion from WAC billing to MAC billing. (BO)
- The Business Office will develop a method for tracking PAWS billing timelines. (BO)

**Accomplishments:**

- Staff document services for MAC billing.
- 1620 PAWS (Payment Authorization of Waiver Services) were entered for 2007; 93 were not confirmed within 14 days – 12 were due to issues on the county's part. As of the end of the year, 6 were still not confirmed.

**Annual Goal 21: *The Board will prepare for a successful levy passage in 2009.***

**Actions we said we would take to achieve this goal:**

- Establish a separate and external fundraising committee for the PAC (Political Action Committee.) (CO)
- Continue to provide positive press releases to the media throughout the year. (CO)
- Continue to prepare, discuss, and explore different options available to the Board with regard to the levy options that will meet our long term needs (i.e. replacement, renewal, new millage) based on expenditures and revenues. (BO)

**Accomplishments:**

- The PAC group met regularly through 2007. To date, there is a total of \$42,111.77 in the account.
- See results of Goal 19 regarding press releases.
- Current strategy is to wait until 2010 to go on the ballot for a levy and to ask for additional millage.

**Annual Goal 22: *The Board will maintain and implement a quality IT system.***

**Actions we said we would take to achieve this goal:**

- Update the disaster plan complete with documentation for all systems including Gatekeeper, E-filing, and Vertex. (BO)
- Schedule and implement disaster recovery testing for its IT system. (BO)
- Document, track, and decrease the number of times that the system goes off line. (BO)
- Track the number of work orders or calls for requests and responses to assist with the system. (BO)
- Track the use of the IT Training Room. (BO)

**Accomplishments:**

- The disaster recovery plan has been updated to include disaster recovery procedures for all key servers.
- A formal schedule for disaster recovery was not used in 2007; however, two of our key servers were tested during the course of the year. A more formal schedule will be put in place during the 3<sup>rd</sup> quarter of 2008. This is due to ongoing modifications to the plan and the anticipated move of the Administrative office to a new facility by early summer of 2008.
- 2007 is the first year to document incidents where key servers go down.
- Plans to purchase Help Desk software for the IT department was not accomplished, tracking of requests for assistance is done by each individual IT staff person.
- The IT Training Room was added to the agency's global address book as an available resource and therefore, has a documented calendar where each instance of use is recorded. This serves as an easy reference to determine overall usage as well as the type and source of each training use.

***Annual Goal 23: The Board will monitor trends for service needs and make adjustments to programs and facilities, as necessary, to meet the needs of individuals receiving services.***

**Actions we said we would take to achieve this goal:**

- Schedule and conduct at least 5 “listening sessions” in different parts of the county. (CO, Ombudsman)
- Look at west Hamilton office site and begin planning for the end of the current leases on office space (441 Patterson lease.) (SSA, EI, & BO)
- Monitor MRDD staff and facility needs/use, as adults choose other day habilitation providers. (AS, BO, HR)
- Develop plan for facility/staff reduction for future and include benchmarks for when reductions would need to take place. (HR, AS, & BO)
- Continue to monitor the individuals’ needs. (SSA, EI, AS)
- Monitor the availability of waivers available through the state. (MS, BO)
- Monitor the need for additional contractual services. (SSA, ANC)
- Develop criteria for “Emergency Home” placement. (ANC, SSA)

**Accomplishments:**

- 4 listening sessions were scheduled; 3 were completed.
- An office was opened in west Hamilton.
- Costs did not decrease for the adult facilities, overall. Due to transitioning to staffing based on established Medicaid rules, the Adult Programs have had to maintain staffing cost associated with the Medicaid guidelines.
- An agreement for individuals entering the Emergency Home was developed to establish a mutual understanding of its purpose and the duration and parameter for an individual’s stay there.

**Key:**

AS = Adult Services  
ANC = Ancillary Services  
BO = Business Office  
CO = Community Outreach  
EI = Early Intervention  
HR = Human Resources  
MS = Medicaid Services  
OIR = Office of Incident Review  
QA = Quality Assurance  
SD = Staff Development  
SS = Site Services Supervisor  
SSA = Service and Support Administration  
Supt. = Superintendent