

Agencies Providing Residential Supports for Individuals with MR/DD Butler County, Ohio

Directory Information: Agency Name: Community Options, Inc. Local Address: 6699 Triway Drive City, State, Zip: Mason, Ohio 45040 Telephone: 513-398-8885 Web address: www.coiohio.com Fax: (513) 398-8181 Local Director: Kent Whitacre, Regional Program Coordinator Office hours:																																		
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Main Office Information <small>(if applicable)</small> Address: 6699 Triway Drive City, State, Zip: Mason, Ohio 45040 Telephone: (513) 398-8885 Chief Executive Officer: Betty Davis/ Wayne Davis Office hours: 8:30 am – 5:00 pm																																		
Types of Supports Offered: <small>(Check those that apply in Butler Co.)</small> Supported Living <input checked="" type="checkbox"/> In-Home Supports <input checked="" type="checkbox"/> Foster Care <input type="checkbox"/> Group Home <input checked="" type="checkbox"/> ICF/MR <input checked="" type="checkbox"/> Planned Respite Care <input type="checkbox"/> Emergency Respite Care <input type="checkbox"/> Other Services <input checked="" type="checkbox"/> Adult Services HPC/Transportation/Level I/ Nutrition/Social Services	Number of Individuals Served/Program: <small>(Butler Co. only)</small> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Program</u></th> <th style="text-align: center; border-bottom: 1px solid black;"><u>Current No. Served</u></th> <th style="text-align: center; border-bottom: 1px solid black;"><u>Accepting New Referrals</u></th> </tr> </thead> <tbody> <tr> <td>Supported Living</td> <td></td> <td>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></td> </tr> <tr> <td>In-Home Supports</td> <td></td> <td>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></td> </tr> <tr> <td>Foster Care</td> <td></td> <td>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></td> </tr> <tr> <td>Other Services</td> <td></td> <td>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></td> </tr> <tr> <td></td> <td style="text-align: center;"><u>No. Served</u></td> <td style="text-align: center;"><u>Capacity</u></td> </tr> <tr> <td>Group Home</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>ICF/MR (CCI)</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Total Served:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Planned Respite Care Capacity:</td> <td></td> <td></td> </tr> <tr> <td>Emergency Respite Care Capacity:</td> <td></td> <td></td> </tr> </tbody> </table>	<u>Program</u>	<u>Current No. Served</u>	<u>Accepting New Referrals</u>	Supported Living		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	In-Home Supports		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Foster Care		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Other Services		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		<u>No. Served</u>	<u>Capacity</u>	Group Home	_____	_____	ICF/MR (CCI)	_____	_____	Total Served:	_____	_____	Planned Respite Care Capacity:			Emergency Respite Care Capacity:		
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<p>History: Years providing service in Butler Co. Total years providing services: 16 years</p>	<p>Total Operating Budget:</p>
<p>Experienced in providing services to individuals with: (Check those that apply)</p> <ul style="list-style-type: none"> Autistic Behavior x Behavioral Challenges x Brain Injury x Medically Fragile x Hearing Impairment x Mental Illness x Mental Retardation x Other Developmental Disability x Physical Impairment x Visual Impairment x 	<p>Agency Intake Contact: Intake Telephone: (513) 398-8885 ext1205 Intake Email: wdavis@coiohio.com</p>

Direct Service Staff Information: (Butler County Staff only)

Educational / Experience Requirements for Direct Service Staff:

- . high school graduate/GED
- . 40 hours orientation in all areas affecting DD population
- . pre-employment; for cause; random drug testing
- . preferably at least 1 year experience
- . delegated nursing required/provided
- . CPR/1st aid/ crisis prevention
- . criminal background check
- . drivers abstract/insurance proof
- . nurse aide registry check/abuser registry check

Pre-service Orientation Hours:

- . 32-40 in class (includes all of above and delegated nursing)
- . 8-24 hours on the job training and client specific training

Average In-service Training Hours Per Year:

- . average 12 hours inservices
- . required at least 16 hours recertification

Number of Direct Service Staff (Full-time equivalents):

- . approx. 21 fte

Average Length of Service:

- . 5.4 years

Average Turnover per Year:

- . 28%

Pay Range:

- . direct care \$8.00 – \$12.00 – experience and longevity

Benefits Offered:

- . health/medical insurance
- . dental insurance
- . long term disability
- . life insurance
- . personal time
- . vacation
- . paid birthday

Frontline Supervisory Staff Information: (Butler County Staff only)

Educational / Experience Requirements for Frontline Supervisory Staff:

- . at least one year – preferably 5 years experience with DD population
- . home team leader – 1 year experience – high school graduate
- . same training as above for direct care staff

Pre-service Orientation Hours:

- . 32 – 40 in class hours (includes all of above and delegated nursing training)
- . 8-24 on the job training/client specific training

Average In-service Training Hours Per Year:

- . average 24 hours inservices
- . required at least 16 hours recertification

Average Number of Sites Supervised:

- . 5 sites

Average Number of Individuals Served:

- . 3 - 8

Number of Frontline Supervisory Staff:

- . 2 current

Average Length of Service:

- . 5.2 years

Average Turnover per Year:

- . **32%**

Administrative Staff Information: (Serving Butler County)

Average Number of Sites Supervised:

- . office manager/scheduler – 3 years experience – high school graduate
- . program coordinator – four year degree related field – 3 years experience – QMRP status
- . same training as above for direct care staff

Average Number of Individuals Served:

- . 28 clients

Number of Administrative Staff:

- . 5

Average Length of Service:

- . 9.5 years

Service Recipient References:	Family/Guardian/Advocate References:
Name: upon request due to confidentiality Address: City, State, Zip: Telephone:	Name upon request due to confidentiality Address: City, State, Zip: Telephone:
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Additional Information About the Agency:

Agency Mission/Philosophy:

Community Options, Inc. is a family owned business that began due to a family member needing services over an extended period of time with no potential for residential services necessitating the establishment of our own support system to assist us and other families and individuals in need of services. The agency's mission and philosophy is to assist individuals realize the highest level of independence and self direction as possible . We believe in the family as the source of the necessary information and expertise needed to assist in the most meaningful manner. We have been serving this population in southwest Ohio for over 15 years and will continue to expand and provide wide ranges of services that will enable growth and independence.

Organizational Structure: (Attach copy of Agency's Table of Organization)

See attached

Supervision/Support Provided to Direct Service Staff:

Each site in which services are provided have direct oversight by a home team leader. Support and management staff include home team leader to oversight direct day to day operations; Regional Program Coordinator to act as QMRP and review all client programs; Office Manager/Scheduler to assist with hiring, scheduling, coverage; Medical Coordinator to facilitate medical appointments, pharmacy needs, other medical concerns; Administrator; and Accounting Staff. We also contract for RN and dietary services as necessary, as well as, maintenance.

All direct service staff have contact lists for all levels of administrative staff.

Accreditation/Licensure Status: (if applicable)

COI operates three licensed sites in two other counties and are certified to provide the services previously listed.

Internal System for Quality Assurance:

All sites are directly managed by a designated home team leader. The home team leader is required to provide a minimum number of direct care hours to ensure that he/she knows the clients services to be provided so as to train any new staff. All sites are to be visited by administrative/management staff at least twice monthly and more if necessary. All paperwork is reviewed at least weekly to ensure that the systems are in place. In addition, staff are inserviced at least every alternate month and recertified at least annually in all important areas of service delivery.

Additional Information About the Agency Continued...

System for Accounting and Auditing Individual Finances:

The office manager is directly responsible for inservicing all direct staff and home team leaders on the policy and procedures for personal financial tracking. All personal financial documentation is submitted and reviewed weekly. If assistance with payeeship, payment of bills, or other direct client financial services are required, COI also provides experienced and accountable advice and service.

Additional Agency Information:

Agency is certified by ODMRDD as:

- x Supported Living provider
- x Individual Options Waiver Services provider
- x Transportation provider for Supported living
- x Other:
 - Level I Waiver
 - IO Waiver - HPC
 - Mileage Waiver
 - Nonmedical Transportation
 - Adult Services/Day Habilitation
 - Social Services
 - Environmental Modifications
 - Nutritional Services

3-7-03