

PROVIDER AGENCY QUESTIONNAIRE

Last Updated:

AGENCY INFORMATION

1. How many years has your agency been in business?
2. List licenses.
3. List other certifications/credentials.
4. Is your agency accredited Yes or No
5. If your agency is accredited, by whom?
6. Has your agency had an external audit/survey? Yes or No
7. If your agency had an external audit/survey was it voluntary? Yes or No
8. If your agency has had an external audit/survey, were there any deficiencies? Yes or No
9. If there were any deficiencies, were they resolved? Yes or No

SERVICES PROVIDED

10. Does your agency provide direct care services? Yes or No
11. If yes, select all that apply and identify the number of persons supported in each
 - Supported Independent Living
 - Individual and Family Support
 - In-home Respite
 - Center-based Respite
 - Supported Employment
 - Day Program
 - Transportation
 - Other: (specify services)
12. If your agency provides Supported Employment Services, how many persons supported are competitively employed?
13. What is the average rate of pay for the persons supported that are working competitively? (Select one of the following)

EMPLOYEES

14. How many people are employed by your agency? (Select one of the following)

51 +

15. What types of professionals are employed by your agency? (Select all that apply)

Psychologist

Behavior Specialist

Registered Nurse

Licensed Social Worker

Other (Specify)

16. What is the average rate of pay for the direct care professionals working for your agency for Individual and Family Support (IFS) day services? (Select one of the following)

\$7.25-\$8.25

17. What is the average rate of pay for the direct care professionals working for you agency for IFS night services? (Select one of the following)

\$7.25-\$8.25

18. Does your agency reimburse staff for mileage when they are providing transportation to persons supported in their own vehicle? Yes or No

19. If your agency reimburses for mileage, how much do they reimburse?

Staff transporting supported persons are given gas stipends depending on distance traveled.

20. If your agency provides direct care services, what is your annual direct support professional turnover rate?

Our turnover rate is very low. Estimated at 5% turnover. We have had workers in the same position

21. What are the common reasons for agency turnover?

Our turnovers usually happen soon after employment when the worker decides the job isn't what they expected or desire to do. Also if they determine the supported person is "to difficult."

22. How many hours of training per year are provided to your direct support professionals?

22 hours annually.

23. What training topics are provided to your direct support professionals?

Direct Support Worker Comprehensive Curriculum, Policy & Procedures, Abuse & Neglect, Infection Control, HIPPA, Accidents & Incidents, Documentation, People First Language, Job Descriptions, Gentle Teaching

24. How many hours of training are provided to your professional staff?

We do at least two to three hours of training with professional staff monthly

25. What training topics are provided to your professional staff?

Job Ethics, Accurate Supervisory Skills, Effective leadership Skills, Documentation Across Disciplines, Team Approach to Coordinated Services, Abuse & Neglect, Aging & Alzheimers/Dementia, Behavior Modification

26. Does your agency have a written policy regarding expectations of employee's behavior when providing services? Yes or No

27. If yes, how can persons interested in your agency access this information?

Interested persons/families are welcome to come by our office to view a copy of our employee policy & procedure addressing our agencies policy specific to expectations of employee's behavior when providing services. In some instances we may be able to satisfy a request by mailing a copy of the policy.

INDIVIDUALS SERVED

28. Identify the total number of persons served by your agency?

29. Does your agency serve children? Yes or No

30. Does your agency serve persons that require support with medication administration and/or non-complex tasks? Yes or No

31. Does your agency serve persons with more intense behavioral support needs, such as aggression, pica, self-injurious behaviors, etc.? Yes or No

32. Does your agency serve persons with more intense medical support needs, such as medical vents, tube feeding, etc.? Yes or No

33. Does your agency specialize in services for specific populations (Autism, Prader-Willi, etc.)? Yes or No If Yes, specify specialties.

QUALITY ASSURANCE

34. Is your agency's Quality Assurance Plan available for current persons supported and potential persons interested in your agency to review? Yes or No

35. If yes, how can persons that are interested access this information?

Current support persons can either visit our office or request their supervisor to bring a copy to the home. Interested persons may visit the office as well. In some instances we may be able to satisfy the request by sending a copy of the plan via mail.

36. How does your agency assess individual and/or their families satisfaction with the services provided?

The agency supervisor personally delivers Satisfaction Survey Forms to supported persons or family members to be completed and returned to the office. In addition, our supervisors are encouraged to always make themselves available to supported persons/families to hear concerns & assess need for improvement.

37. How often does your agency assess an individual and/or their family's satisfaction? (Select one of the following)

38. What is your agency's process for receiving individual complaints?

Complaints are handled using the agency Grievance Policy.

39. How are complaints resolved?

The Program Director & Human Resources Director will speak face to face with the person making complaint & all involved. Written statements will be obtained and all information presented to Interdisciplinary Team at which time a decision will be made regarding the complaint.

40. Does your agency report overall individual satisfaction? Yes or No

41. Who is overall satisfaction reported to?

Supported Persons Support Coordination Agency.

42. How often is overall satisfaction reported? (Select one of the following)

Quarterly

Service providers should submit this form electronically to the Office for Citizens with Developmental Disabilities, attention Christy Johnson at christy.johnson@la.gov.