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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF LONG TERM SUPPORTS AND SERVICES

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June 8, 2022

Dennis Powers
President/CEO
Community Crossroads
8 Commerce Drive
Atkinson, NH 03811

Dear Mr. Powers,

Please find enclosed the redesignation report for Community Crossroads. Redesignation is a fundamental aspect to the developmental services system and is required by State Statute RSA 171-A: 18 and He-M 505.08. Per He-M 505.08(a), an area agency is required to apply to the Bureau of Developmental Services (BDS) for redesignation every five years.

As outlined in He-M 505.08(e) (1) – (9), an area agency shall be considered successful and operating efficiently when it annually:

- 1) Demonstrates, through its services and supports, a commitment to a mission that embraces and emphasizes active community membership and inclusion for persons with disabilities;
- 2) Demonstrates, through multiple means, its commitment to individual rights, health promotion, and safety;
- 3) Provides individuals and families with information and supports to design and direct their services in accordance with their needs, preferences, and capacities and to decide who will provide them;
- 4) Involves those who use its services in area planning, system design, and development;
- 5) Assesses and continuously improves the quality of its services, and ensures that the recipients of services are satisfied with the services that they receive;
- 6) Demonstrates, through its board of directors and management team, effective governance, administration, and oversight of the area agency staff, providers, and, if applicable, subcontract agencies;
- 7) Is fiscally sound, manages resources effectively to support its mission, and utilizes generic community resources and proactive supports in assisting people;
- 8) Complies, along with its subcontractors, if applicable, with state and federal requirements; and
- 9) Achieves the goals identified in its area plan and implements the recommendations made in its previous redesignation report from the department.

BDS seeks information from the following sources to ensure that the requirements outlined in 1-9 (above) are being met:

- 1) Public comments generated by self-advocacy groups and the family support council regarding the area agency's demonstrated ability to provide local services and supports to individuals and their families;
- 2) A comprehensive self-assessment of the area agency's current abilities and past performance;
- 3) Input from a wide range of people, agencies, or groups who are either recipients, providers, or people who collaborate in the provision of services and supports;
- 4) Documentation pertaining to area agency operations available in the area and at the department; and,
- 5) Input from department staff who have direct contact with and knowledge of area agency operations.

Based on the information gathered through the redesignation process, BDS has determined that Community Crossroads met the standard for redesignation. Community Crossroads is redesignated for the next 5 years in accordance with He-M 505.08.

Sincerely Yours,



Sandy L. Feroz
Bureau Chief
Bureau of Developmental Services

cc. James Watson, Board President
Lori Shibinette, Commissioner, Department of Health and Human Services
Melissa A. Hardy, Director, Division of Long Term Supports and Services
Jennifer Doig, Business Manager, Division of Long Term Supports and Services
Melissa St. Cyr, Chief Legal Officer

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Executive Summary

In accordance with State of New Hampshire Administrative Rule He-M 505 Establishment of Area Agencies, review of an area agency (AA) occurs upon application and thereafter every five years. The purpose of He-M 505 is to define the criteria and procedures for approval and operation of state designated area agencies. A redesignation review of Community Crossroads in Atkinson, NH occurred between September 1, 2021 and January 31, 2022. The review team included staff from the Department of Health and Human Services (DHHS), including the Division of Long Term Supports and Services (DLTSS), Bureau of Developmental Services (BDS), Office of Legal and Regulatory Services, Health Facilities Administration and Bureau of Improvement and Integrity, Financial Compliance Unit.

The Summary of Redesignation Activities, Findings and Observations references the following sources of information:

- Annual Governance Audits
- Area Agency Financial Condition Summary
- Compliance with DHHS Program Certification Requirements
- Compliance with Family Centered Early Supports and Services (FCESS) Requirements
- Compliance with Medication Administration and Health Care Coordination Requirements
- Compliance with Requirements for Employment Supports for Individuals
- Developmental Disabilities (DD), Acquired Brain Disorder (ABD) and In Home Support (IHS) Waivers Service File Review Findings
- Summary of Stakeholder Engagement to Include:
 - Family Support Council Questionnaire
 - Individuals and Self-Advocate Redesignation Forum
 - Family and Guardian Redesignation Forum
 - Family and Guardian Redesignation Survey
 - Provider Redesignation Survey
 - Board of Directors Redesignation Forum
 - Board of Directors Redesignation Survey
 - Staff Redesignation Survey

Attachments

- Appendix A: The NH Department of Health and Human Services, Bureau of Developmental Services Governance Audit 2021 Statewide Results and the 2021 Governance Audit for Community Crossroads
- Appendix B: Developmental Services System Annual Report of Financial Condition Summary
- Appendix C: Area Agency Certification Statistics from 2017-2021

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Comprehensive Self-Assessment:

Standard	He-M 505.08 (f)
Status	Met

Findings:

Per He-M 505.08 (f), an area agency shall provide a comprehensive self-assessment, which evaluates its current abilities and past performance for the purpose of redesignation. This self-assessment is to be used in determining if an area agency is operating efficiently. Community Crossroads submitted an extensive and detailed self-assessment that clearly reflected the feedback gathered from a wide range of stakeholders and findings from the Department of Health and Human Services' Redesignation review.

Remediation: None Required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

2021 Governance Audit Summary:

Please refer to the NH Department of Health and Human Services, Bureau of Developmental Services Governance Audit 2021 Statewide Results and the 2021 Governance Audit for Community Crossroads. (See Appendix A).

Standard	RSA 126-A Department of Health and Human Services RSA 171-A Area Agency Responsibility and Operations He-M 505 Establishment and Operation of Area Agencies He-M 519 Family Support Services Contract, Exhibit A, Section 2: Scope of Services 1915(c)Waiver Sub assurance Performance Measures
Status	Met

Findings:

The BDS annual Governance Audit for 2021 measures area agency compliance with 26 indicators found in RSA 171-A, RSA 126-A, RSA 126-G, He-M 505, He-M 519, 1915 (c) Waiver sub assurance performance measures and the contracts between the area agencies and the Bureau of Developmental Services. In 2021, Community Crossroads met compliance with all categories.

Over the preceding five years, Community Crossroads has consistently met all compliance areas demonstrating a high level of commitment to the fidelity of the their mission in providing high quality, long term services to support individuals throughout their life span in leading meaningful lives.

Remediation: None Required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Area Agency Financial Condition Summary
DHHS, DLTSS, BDS: Bureau of Program Integrity
Prepared, May 2022

Please refer to the Developmental Services System Annual Report of Financial Condition for FY 2021 with Five-Year Trends Analysis report (See Appendix B).

Standard	Contract, Exhibit A, Section 2.14: Maintenance of Fiscal Integrity
Status	Met all except days of cash on hand

Days of cash on hand	06/30/2017	06/30/2018	06/30/2019	06/30/2020	06/30/2021
<i>(based on 365 days)</i>	21	27	31	3	14

As of July 1, 2017, a set of performance standards was incorporated into the BDS contract. Specifically, the agencies are required to maintain a minimum Current Ratio of 1.50:1 with a 10% variance and a minimum of thirty days (30) days for Days' of Expenses in Cash. During the fiscal year of 2019, the year-end audit indicated that the agency had thirty-one (31) of cash on hand which is in compliance of this requirement. However, fiscal years 2020 and 2021 the agency was not in compliance as the cash decreased to fourteen (14) days in the year 2021.

Current Ratio	06/30/2017	06/30/2018	06/30/2019	06/30/2020	06/30/2021
	1.73:1	1.88:1	1.86:1	1.70:1	1.70:1

The current ratio is an indication of a firm's liquidity. Liquidity refers to the entity's ability to maintain sufficient liquid assets, such as cash and account receivable, to meet its short-term obligations. Acceptable current ratios vary from industry to industry. Some suggest a current ratio between 1.5 and 2 as standard, i.e., a company would be financially sound if its current ratio is within that range. Community Crossroads Inc. is in compliance with this requirement.

Surplus (Deficit)	06/30/2017	06/30/2018	06/30/2019	06/30/2020	06/30/2021
	(\$134,478)	\$310,702	\$101,759	(\$220,222)	\$312,583

Community Crossroads has had inconsistent surpluses and deficits over the five years reported. During fiscal year 6/30/21 it maintained a reasonable surplus.

Remediation:

When revenues are not received timely, the cash on hand is vital to pay the day-to-day operational expenses. A minimum targeted outcome is 30 days to cover all of the Agency's expenses for a 30-day period. The June 30, 2021 year-end days of cash on hand ratio is 14 days. The Agency needs to devise a plan to increase this ratio.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Compliance with DHHS Program Certification Requirements
Office of Legal and Regulatory Services/Health Facilities Administration
Calendar Year: 7/1/2017 through 6/30/2021

Please refer to the Area Agency Certification Statistics Fiscal Year 2017 through 2021 report (See Appendix C).

Standard	He-M 1201 Medication Administration He-M 1001 Certification Standards for Developmental Services He-M 507 Certification for Community Participation Services He-M 506 State Qualifications and Staff Development Requirements for Developmental Services Agencies He-M 503 Eligibility and the Process of Providing Services He-M 310 Rights of Persons Receiving Developmental Services or Acquired Brain Disorder Services in the Community RSA 171-A Services for the Developmentally Disabled Contract, Exhibit A, Section 1: Provisions Applicable to all Services
Status	Met

Findings:

Community Crossroads currently contracts with vendor agencies to provide supports for individuals living in homes certified under He-M 1001 and/or receiving CPS services certified under He-M 507. A review of the Community Crossroads certification statistics below finds that their certification performance has been steadily improving, especially over the past 3 years.

In March of 2020, onsite inspections were temporary put on hold due to the pandemic and all certification inspections were conducted electronically for 3 months. In regard to Community Crossroads and their vendors, they all responded quickly to this change, finding ways to submit documents to the certification unit in a secure and timely manner in spite of many area agency and vendor agency staff working remotely. Their efforts are to be commended, as this change came with virtually no notice.

Some notable items from the chart below are as follows:

- Their average number of deficiencies per review has decreased each of the past 3 years.
- Their average number of deficiencies per review over the past 5 years is 3.21 deficiencies per review, compared to the state average of 2.10 deficiencies per review during this same period of time.
- Their number of He-M 503 deficiencies has remained steady over the past 2 years, while we have seen a significant increase in He-M 503 deficiencies over the past two years at many other area agencies.
- While their number of certification reviews has increased each of the last 2 years, their He-M 1001 deficiencies have decreased during this same period of time.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

	FY 17	FY 18	FY 19	FY 20	FY 21
REVIEWS	60	79	79	81	106
# DEFICIENCIES	216	340	287	217	241
AVG # DEF. PER REVIEW	3.60	4.30	3.63	2.68	2.27
ABBREVIATED	0	3	12	13	12
NEW	12	18	12	14	18
ANNUAL	30	33	40	41	49
BIENNIAL	18	25	15	11	4
FOLLOW-UP	0	0	0	0	3
SKIP	0	0	0	2	10
COMPLAINT	0	0	0	0	10
HE-M 310	8	10	7	5	3
HE-M 503	17	55	45	42	54
HE-M 506	3	3	11	5	4
HE-M 507	31	27	14	16	2
HE-M 1001	104	171	140	120	123
HE-M 1201	34	54	57	24	24

The ten most frequently cited administrative rules for Community Crossroads are as follows:

#10 - He-M 1201.04(i) (2): This rule indicates that “Authorized providers shall administer PRN medications in accordance with a PRN protocol”.

- This issue was cited 26 times over the past 5 years.

#9 – He-M 503.10(o) (1): This rule indicates that “Service agreements shall be reviewed and revised when the individual’s circumstances or needs change”.

- This issue was cited 27 times over the past 5 years.

#8 - He-M 1001.08(c) (6) (g): This rule indicates that “Each individual’s record shall include medical information, including known allergies, if any”.

- This issue was cited 33 times over the past 5 years.

#7 - He-M 1001.06(x): This rule indicates that “If a community residence for 3 or fewer individuals has been evacuated in 3 minutes or less during each of 6 consecutive monthly drills, one of which has been a sleep-time drill, the residence shall thereafter conduct a drill at least once quarterly, with one drill per year to be during sleep hours”.

- This issue was cited 35 times over the past 5 years.

#6 - He-M 503.10(n): This rule indicates that “Service agreements shall be renewed at least annually”.

- This issue was cited 39 times over the past 5 years.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

#5 - He-M 1001.07(b): This rule indicates that “A behavioral change program or any form of restrictive strategy shall only be implemented by a community residence when such has been approved in writing by the individual, his or her guardian, the individual’s team, and the area agency’s human rights committee, established pursuant to RSA 171-A:17. All behavioral change programs or forms of restrictive strategy shall be reviewed annually”.

- This issue was cited 46 times over the past 5 years.

#4 - He-M 1201.03(e): This rule indicates that “The provider shall review with the primary care physician or practitioner the health screening recommendations based on the individual’s age and diagnosis”.

- This issue was cited 48 times over the past 5 years.

#3 – He-M 1001.03(p) (7): This rule indicates that “Oil furnaces must be serviced annually. All other furnaces shall be serviced annually or as required/recommended by service provider or manufacturer”.

- This issue was cited 67 times over the past 5 years.

#2 – RSA 171-A:11,I: This RSA indicates that “The needs and services of every client in the service delivery system shall be subject to a periodic review under the supervision of the administrator, which shall include a thorough clinical examination including an annual health assessment”.

- This issue was cited 71 times over the past 5 years.

#1 – He-M 503.10(k)(1): This rule indicates that “Within 5 days of completion of the service agreement, the area agency shall send the individual, guardian, or representative a copy of the expanded service agreement signed by the area agency executive director or designee”.

- This issue was cited 89 times over the past 5 years.

Additional Community Crossroads Certification Data:

- Certification reviews without deficiencies ranged from a high of 24% of their reviews in the first half of 2021 to a low of 9% of their reviews in 2018, for an average of 18% over the past 5 years. The state average during that same period of time was 32%
- Certification reviews with deficiencies ranged from a high of 91% in 2018 to a low of 76% in the first half of 2021, for an average of 82% over the past 5 years. The state average during that same period of time was 68%.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Compliance with Family Centered Early Supports and Services Summary
DHHS, DLTSS, Bureau of Family Centered Services
Fiscal Years 2017, 2018, 2019, 2020 and 2021

Standard	He-M 510 Family-Centered Early Supports and Services Contract, Exhibit A, Section 4: Family Centered Early Supports and Services
Status	Met

Findings:

In region 10 the Area Agency (AA) contracts with two Family Centered Early Supports and Services (FCESS) programs, Easterseals in Salem (ES10) and The Children’s Pyramid (TCP10) with an office in Nashua, serving children birth through 2 years, who live in Region 10. The area agency has identified one Intake Coordinator to participate in monitoring both FCESS programs. Area agency and program staff are cooperative and consistently use feedback from their monitoring results to engage in quality improvement. Documentation is provided in a timely manner.

Licensure for the ES10 program and the TCP10 program are consistently up to date. Professional development plans for staff are consistent with the standards of our system. For the past five years, all required trainings have been completed for all staff working in the FCESS R10 programs.

The Individual Disabilities Education Act (IDEA) Part C requires 100% compliance for several indicators that are monitored annually through NH Leads data system and chart documentation review. Follow-up data reports and on-site chart reviews are completed as needed.

- Indicator 1 monitors the timely provision of services to children and families. Services identified in the Individual Family Support Plan (IFSP) are required to begin by the projected start date agreed upon with the family. Both ES10 and TCP10 FCESS programs achieved 100% compliance for the five years summarized in this report.
- Indicator 2 monitors the provision of services in the child’s natural environment(s). Both FCESS programs have successfully accomplished 100% compliance within the parameters allowed for this indicator during this five-year reporting period.
- Indicator 7 monitors the 45-day timeline from referral of a child to FCESS through family consent to a completed Individual Family Support Plan (IFSP). ES10 program achieved 100% compliance for the five years summarized in this report. However, in 2020 within the ES10 program, a discovery of noncompliance was noted in the initial data of 94% compliance. A 90-day follow-up data review indicated ES10 achieved 100% compliance for this indicator in FY20. TCP10 consistently demonstrated 100% compliance for this indicator during the five years summarized in this report.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

- Indicator 8 monitors the quality and timeliness of transitions for children from the Part C-FCESS program to their local Part B-Preschool Special Education program. For this indicator there are 3 subcategories of compliance.
 - **8a – Transition plans.** Both ES10 and TCP10 FCESS programs achieved 100% compliance for the past five years for all children transitioning to Preschool Special Education had completed transition plans within the expected timeframe.
 - **8b – Notifications.** Requires notifications to the local education agency (LEA, Preschool Sp. Ed. programs) and the state educational agency (SEA, Department of Education) in accordance with compliance guidelines (90-days or more prior to the child’s 3rd birthday).
 - ES10 achieved 100% compliance during FY17, 18, 20, and 21. A discovery of noncompliance was noted in ES10 initial data in FY19 83% compliance. Follow-up 90-day data review indicated the program achieved 100% compliance for this indicator.
 - TCP10 achieved 100% compliance for this indicator during the five years summarized in this report.
 - **8c – Transition Conference.** Requirements include scheduling transition conferences and inviting local school staff in accordance with compliance guidelines (90-days or more prior to the child’s 3rd birthday).
 - ES10 achieved 100% compliance during FY17, 18, and 21. A discovery of noncompliance was noted in this program’s initial data for FY19, 83% compliance and FY20 86% compliance. Follow-up 90-day data review indicated ES10 achieved 100% compliance for this indicator.
 - TCP10 achieved 100% compliance for this indicator during the five years summarized in this report.

The area agency in region 10 has a staff member (FCESS Intake Coordinator) dedicated to participate in Part C FCESS monitoring for quality and compliance regarding the two contracted FCESS programs. The Intake Coordinator contacts a random sample of families from each program to ensure they are happy with services. Family responses are always very positive for both programs. Documentation was clear and complete in this region for each of the five years reviewed. Each year the area agency and program staff have worked cooperatively with Bureau of Family Centered Services Part C staff to maintain quality and compliance for FCESS programs. For the five years summarized in this summary there have been no formal complaints or disputes for FCESS programs in this region.

Family outcome summaries (FOS) are used to further assess quality of services for families served by the FCESS program. Region 10 has consistently receives positive evaluation of services, as measured by the FOS. Families report that the programs in Region 10 have helped them to understand their rights, communicate their child’s needs, and help their child grow and learn.

The Community Crossroads area agency provides consistent quality and compliant services for the FCESS system through their contracted programs. The Bureau of Family Centered Early Supports and services is pleased to continue working with the Community Crossroads team, to serve children and families.

Remediation: None Required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Compliance with Medication Administration and Health Care Coordination Summary
DHHS, DLTSS, BDS Nurse Administrator
Fiscal Years 2016 – 2020

Standard	He-M 1201 Medication Administration Contract, Exhibit A, Section 1: Provisions Applicable to all Services
Status	Met

Fiscal Years 2017 – 2021:

Community Crossroads, the Area Agency for Region Ten, partners with various vendor agencies to provide community supports for the individuals that they work with. Nurse Trainers from the contracted vendor agencies oversee the medication administration, and healthcare needs for these programs in the community.

As outlined in He-M 1201.06, Nurse Trainers are responsible for delivering the State of New Hampshire approved education for medication administration to non-licensed providers and observing medication administration as part of the initial certification and annual renewal of all medication trained staff. Nurse Trainers work in collaboration with program managers, service coordinators, residential staff, home care providers, day program staff, and direct support professionals to provide a multi-disciplinary approach to the healthcare of the individuals served. The collected data, service considerations and other key elements that contribute to an individual’s overall health care status are captured in the Health Risk Screening Tool (HRST). The HRST is designed to detect those who are at risk for destabilization and intended to assist in preventing rapid decompensation. Nurses can be both raters and clinical reviewers within this system; they input data and also hold responsibility for reviewing some of the ratings assigned by Service Coordinators. When an individual is identified with a health care level three or higher, on the Health Risk Screening Tool scale ranging from one to six, a clinical review a nurse is required. This ensures that accurate information is available within the system and that appropriate oversight and interventions are initiated for the individual identified as being at risk. Nurse Trainers are encouraged to be active members of the Developmental Disabilities Nurses of New Hampshire (DDNNH). This statewide group meets monthly and offers updates, experiences and support to the nurses who work with individuals in New Hampshire with DD/IDD or ABD.

In accordance with He-M 1201.11, a medication committee is appointed by the Bureau of Developmental Services Administrator. The Medication Committee includes the Medical Director of the Bureau or designee, two Registered Nurses from provider agencies, two non-nurse representatives from provider agencies and a representative from the Bureau of Development Services. Nurse Trainers compile all medication error reports and submit a summarized six month report to the medication committee for review twice each year for the programs that they work with. The information captured in these reports identifies trends of errors, corrective action or approaches taken, systemic issues and actual or potential harmful outcomes. The Area Agency submits all of the individual reports and a comprehensive regional report to the Medication Committee. The Medication Committee responds to each submitted report with a letter outlining concerns, feedback and expectations of the Area Agency regarding medication administration. Then, in turn, the Area Agency submits a response and acknowledgement to the committee’s letter. By comparing previous submitted reports to most current, the Medication Committee is able to measure growth and capture ongoing themes as they occur.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Community Crossroads currently fills one of the non-nurse positions on the Medication Committee. This involvement allows for direct input to medication safety topics and discussions as well as update to date information regarding trends, challenges and successes happening statewide. Individual nursing competencies and trainings are facilitated at the employing vendor agency level. The Board of Directors at Community Crossroads has a Quality Assurance Committee that is chaired by the Director of Quality Improvement. The results of the Medication Error Report are reviewed twice a year by this committee and more frequent updates are brought to the committee if specific trends are identified.

Community Crossroads has demonstrated significant efforts in compliance with medication administration. Workforce shortage thru a pandemic and unprecedented times has been seen statewide and despite the significant challenges that this brings, Community Crossroads has been able to sustain and improve their medication safety and administration practices and implement new strategies to continue with this endeavor.

Summary of Findings:

FY 2017 Medication Administration Outcomes:

Report One: 05/01/2016- 10/31/2016

- This report outlined 112 medication errors with a total of 210,746 prescribed doses. This is an error to dosage ratio of 0.0005.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

Report Two: 11/01/2016- 04/30/2017

- This report outlined 138 medication errors with a total of 199,735 prescribed doses. This is an error to dosage ratio of 0.0007.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

FY 2018 Medication Administration Outcomes:

Report One: 05/01/2017- 10/31/2017

- This report outlined 370 medication errors with a total of 206,059 prescribed doses. This is an error to dosage ratio of 0.0018.
- Region wide, there was one error reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

Report Two: 11/01/2017- 04/30/2018

- This report outlined 232 medication errors with a total of 220,451 prescribed doses. This is an error to dosage ratio of 0.0011.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

FY 2019 Medication Administration Outcomes:

Report One: 05/01/2018- 10/31/2018

- This report outlined 91 medication errors with a total of 214,383 prescribed doses. This is an error to dosage ratio of 0.0004.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

Report Two: 11/01/2018- 04/30/2019

- This report outlined 348 medication errors with a total of 235,134 prescribed doses. This is an error to dosage ratio of 0.0015.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

FY 2020 Medication Administration Outcomes:

Report One: 05/01/2019- 10/31/2019

- This report outlined 299 medication errors with a total of 235,401 prescribed doses. This is an error to dosage ratio of 0.0013.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

Report Two: 11/01/2019- 04/30/2020

- This report outlined 52 medication errors with a total of 234,507 prescribed doses. This is an error to dosage ratio of 0.0002.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.
- This was an excellent reporting period with evidence of effective corrective steps over the last report and an overall very low ratio of errors to doses.

FY 2021 Medication Administration Outcomes:

Report One: 05/01/2020- 10/31/2020

- This report outlined 1,517 medication errors with a total of 207,728 prescribed doses. This is an error to dosage ratio of 0.0073.
- Significant increase over the last reporting period with number of doses decreasing. There were 1,427 errors in one program which was attributed to omission of medication. This was an isolated incident that was addressed with the one program involved with retraining and increased oversight.
- Region wide, there were no errors reflected in this report that were in the category of wrong person. There were no medication errors that resulted in actual harm or to any of the individuals served.

Report Two: 11/01/2020- 04/30/2021

- This report outlined 80 medication errors with a total of 254,087 prescribed doses. This is an error to dosage ratio of 0.0003.
- Region wide, there were two errors reflected in this report that were in the category of wrong person. However, there were no medication errors that resulted in actual harm or to any of the individuals served.

Remediation: None Required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Compliance with Employment Supports for Individuals Summary
DHHS, DLTSS, BDS Administrator of Strategic Initiatives (and Facilitator of NH Employment Leadership Committee)
Fiscal Years 2017-2021

Standard	He-M 518 Employment Services Contract, Exhibit A, Section 2.7: Employment Data System (EDS)
Status	Met

Findings:

In accordance with He-M 518 area agencies must make employment services available to individuals served in their region and must report quarterly data using the Employment Data System (EDS).

Employment Data Reports

This Redesignation Employment Summary refers to the Bureau of Development Services (BDS) Employment Data Reports (EDR) as the source of information. The purpose of the EDR is to increase awareness, serve as a resource, and leverage employment supports across the state. The EDR is provided by the NH DHHS, BDS, in partnership with the NH Employment Leadership Committee, and is prepared by the Institute at the University of New Hampshire through data collection efforts from NH's ten Area Agencies and numerous service providers. Please refer to the BDS EDRs on the DHHS webpage <https://www.dhhs.nh.gov/programs-services/disability-care/employment-individuals-disabilities>

Employment Data Report Date	Individuals Served	Individuals Working	Employment Rate	Average Hours per week	Average Hourly Wage per Job
1/1/17-6/30/17	not provided	96	not provided	11.24	\$10.44
7/1/17-12/31/17	351	93	26.04%	10.88	\$10.04
1/1/18-3/31/18	347	97	27.95%	10.88	\$10.03
4/1/18-6/30/18	334	98	29.34%	6 *	\$8.15 *
7/1/18-9/30/18	357	36	10.08%	6 *	\$8.00 *
7/1/19-9/30/19	354	88	24.09%	9.5	\$9.09
10/1/19-12/31/19	339	91	26.08%	9.2	\$9.35
1/1/20-12/31/20	434	75	17.03%	11	\$9.70
7/1/20-9/30/20	364	46	12.60%	14.4	\$10.21
10/1/20-12/31/20	369	41	11.01%	14.5	\$10.41
1/1/21- 3/31/21	361	61	16.90%	15.5	\$11.25
4/1/21-6/30/21	365	59	16.20%	13.2	\$10.70

**Data reported on median hours per week and median hourly wages*

Community Crossroads facilitates quarterly meetings to review employment data to identify trends and ensure the EDR is accurate.

Remediation: None required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Developmental Disabilities (DD), Acquired Brain Disorder (ABD) and In Home Support (IHS)
Waivers 2020 Service File Review Findings
Bureau of Developmental Services Program Planning and Review Specialist

Please refer to Standard	He-M 505.08 Redesignation
Status	Met

Service file reviews are part of an annual quality review process developed by the Bureau of Developmental Services (BDS) to monitor compliance with New Hampshire’s Home and Community Based Services waivers.

Community Crossroads prepared a self-assessment utilizing questions provided by BDS on 49 participant records that received services during the review period of January 1, 2020 to March 31, 2020. The participant records reviewed consisted of 28 Developmental Disability (DD) records for Waiver Year 4 (2020), 10 Acquired Brain Disorder (ABD) records for Waiver Year 4 (2020) and 11 In Home Support (IHS) records for Waiver Year 5 (2020). BDS conducted a review of the results Community Crossroads’ self-assessment and the substantiating documentation provided to determine if the service areas met compliance. Service compliance is measured by a rating of 86% or higher.

The Service File Review process includes a review of the following for each record:

- Service agreements for the review period, including amendments and supplemental forms.
- Progress notes from the review period.
- Service Coordination contact notes from the review period.
- Budgets for the review period.
- Services billed to Medicaid during the review period.
- Prior Authorizations during the review period.
- Invoices to support Medicaid billing during the review period.
- Provider qualifications
- Any other data to demonstrate quality service provision.

Summary of Service File Findings for DD Waiver Year 4 (2020)

Participant records for 28 individuals receiving services through the DD Waiver were reviewed. The service file portion for the review included 31 questions related to the overall quality of the services provided. Community Crossroads met or exceeded an 86% compliance rating for the 28 of the 31 service review questions,

The following areas fell below an 86% compliance rating requiring a plan of correction from the area agency.

- Documentation to support visits by the service coordinator to the participant’s home in accordance with the applicable rule, waiver or as specified in the service agreement
- Documentation to support that the Service Coordinator visited the individual and contacted the guardian, if any at least quarterly.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

- None of the participant Directed and Managed Services (PDMS) provider records included documentation to support that the family was provided a monthly budget report for the review period

Summary of Provider Qualification Findings for DD Waiver Year 4 (2020).

During the review period, a total of 16 unique providers were paid for the provision of services. These files were reviewed in regards to waiver requirements providers must meet prior to providing services and ongoing requirements. The provider qualification review included 24 questions related to provider qualifications and training requirements. Community Crossroads met or exceeded an 86% compliance rating for 20 of the 24 provider qualification questions.

The following areas fell below an 86% compliance rating requiring a plan of correction.

- Documentation to support that a check of the Office of Inspector General (OIG) exclusion database was completed prior to hiring staff and providers.
- Documentation that the employer provided the staff development elements in He-M 506.05.
- Documentation to support that non-family staff or providers received the orientation and trainings regarding staff development elements in He-M 506.05 selected by the Family Manager.
- Documentation that the employer provided staff development elements for staff providing as outlined in the applicable waiver.

Summary of Service File Findings for Acquired Brain Disorder (ABD) Waiver Year 4 (2020)

Participant records for 10 individuals receiving services through the ABD Waiver were reviewed the service file portion of the review included 31 questions related to the overall quality of the services provided. Community Crossroads met or exceeded an 86% compliance rating for 27 of the 31 service review questions.

The following areas fell below an 86% compliance rating requiring a plan of correction from the area agency.

- Documentation in the record to support the service coordinator documented quarterly individual and or guardian satisfaction.
- Documentation to support that the service coordinator visited the home in accordance with the applicable rule/waiver or as specified in the service agreement.
- Documentation to support that service coordinator visited the individual and contacted the guardian, if any at least quarterly.
- None of the participant Directed and Managed Services (PDMS) provider records included documentation to support that the family was provided a monthly budget report for the review period.

Summary of Provider Qualifications Findings for ABD Waiver Year 4 (2020)

Community Crossroads met or exceeded an 86% compliance rating in all staffing/provider qualification areas of the review.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Summary of Service File Findings for In Home Support (IHS) Waiver Year 5 (2020)

Participant records for 11 individuals receiving services through the IHS Waiver were reviewed. The service file portion of the review included 31 questions related to the overall quality of the services provided. Community Crossroads exceeded an 86% compliance rating for 27 of the 31 service review question.

The following areas fell below an 86% compliance rating requiring a plan of correction from the area agency.

- Documentation to support that all participant's service agreement was updated at least annually or have an approved extension on file
- Documentation of monthly progress notes that addressed the participant's individualized goals.
- Documentation to support the completion of the Support Intensity Scale (SIS), as required for individuals 16 and older.
- Documentation to support that families were notified of the roles and responsibilities of the area agency, family and providers.

Summary of Provider Qualifications File Findings for IHS Year 5 (2020)

Community Crossroads met or exceeded an 86% compliance rating in all staffing/provider qualification areas of the review

Plan of Correction:

As a result of the review findings Community Crossroads submitted a plan of correction to address areas that did not meet an 86% compliance rating to ensure future compliance and improvements. Community Crossroads plan of correction identified additional training for service coordinators and supervisors to ensure compliance with monitoring and documentation requirements. In addition Community Crossroads revised their monitoring forms and tools to assist staff with managing service and provider's requirements. BDS has accepted the plan of correction submitted by Community Crossroads.

Remediation: None further remediation is required

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Stakeholder Feedback Findings
BDS Program Planning and Review Specialist
November 2021

In accordance with He-M 505.08(f) as part of the redesignation process, the Department of Health and Human Services sought feedback from a variety of stakeholders. Methods for engagement include questionnaires, remote forums and online surveys. The feedback provided is included in the following sections.

Family Support Council (FSC) Redesignation Questionnaire Responses

As outlined in He-M 513.06 the area agency is required to have a Family Support Council (FSC). It is part of the FSC's role to make recommendations to the area agency with regard to their strategic plan as well as the utilization of respite. In accordance with He-M 505.08, the FSC was asked to respond collectively to the following questions. The responses are included below, as written by the FSC:

- 1. How does family Support Council contribute in the development of the area agency's Strategic Plan (Area Plan) including but not limited to the council's role in planning for the provision of respite services within the region?**

Family Support Council Chair represents the Council as a member on the Board of Directors. Chair attends and provides Council updates at board meetings. Council is invited to participate in the Agency's Strategic Plan process. With regard to respite, Council provides financial assistance to families from our discretionary funding, along with camperships, and related needs. Respite designation through the family support council is only for the non-Medicaid components.

- 2. How is the Council informed of issues and changes pertaining to Family Support or any other regional and statewide changes in laws or services?**

Council Chair, delegate, and/or other Council member(s) regularly attend State Family Support Council meetings. Family Support Council Liaison and CEO provides updates/reports. Council was receiving legislative updates from legislative liaison. CEO, as needed, attends Council meeting to review legislative laws and updates. Council informed on a limited basis through the State and directly from the area agency.

- 3. Briefly describe any outreach activities of the Council as they relate to informing and assisting the community on ways to include individuals with disabilities in full participation in their communities.**

Through Council "funding," parents requests for items/programs in their community. It's been impossible this year to provide live events to support our families. Council created a variety of inclusive activities by using ZOOM—Halloween, Santa scavenger hunts, Snowperson Contest, and "What Spring means to me?" activities. Currently planning first in-person movie activity at Chunky's to see Polar Express. Council communicates activities through the area agency website; flyers in public places (i.e., libraries, supermarkets, etc.), provide flyers to Family Support Coordinators and FS Council Liaison, social media through the Agency sites as well as other events in the region that focus attention on similar families (i.e., SASN, Bridging the Horizons, etc.).

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

4. How does the area agency share information, such as survey and audit results regarding quality of services provided, with the council?

To our knowledge, except for the “Redesignation” survey, no survey has been conducted by our Agency over the past five years. Council did an on-line survey to families. Agency CEO provides reports. Limited data is shared through the Family Support Liaison.

5. What opportunity is the council given to offer input regarding recommendations for improvement based on the results of the surveys and audits?

CEO has always made himself available for input and questions. CEO attended our Council meeting on COVID concerns, and Council able to provide opinions and recommendations regarding improving communication to families. An example, right now would be communicating with families regarding the cancellation of the upcoming Family Support Conference—not everyone has access to computers, social media, etc. Input to the CEO and others at the agency is welcomed and Agency staff attends Council meeting on a periodic basis for input.

6. Describe the council’s involvement in the selection and evaluation of the performance of family support staff?

Recently, Council given opportunity to participate in the interview/hiring process for Council Family Support Liaison. Council participates in Family Support Liaison performance evaluations. Council has not been asked to provide input into hiring, evaluations and performance of other Family Support Staff and Coordinators. Council would like to be involved in the future.

7. Describe the planning process used to determine annual spending of council funds.

Council oversees and distributes ‘discretionary’ funds. Budget monitored, discussed at monthly meetings. Council makes changes as needed, i.e., added “Covid” line item and redistribute funds from one category to another dependent on needs/requests of families—which this year, with COVID, have been many and challenging. Budget is determined by the State, without Council input. But Council has discussions and agreements which line item to list and fund appropriately as well as our own fundraising efforts.

8. Describe the process used to disperse family support council funds and resources to families.

The Family Support Council votes on family requests over \$200 that are brought to Council by FS Council Liaison. They are thoroughly discussed—all information obtained before Council votes.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

9. Explain the process used to resolve disputes between the family support council and the area agency.

Family Support Council and Community Crossroads have been able to work out their differences through the usual meeting process. In the event resolution cannot be achieved, one or more of the following people would be asked to attend a meeting for discussion and clarification: The Community Crossroads Executive Director;

Community Crossroads Chief Executive Officer; the Bureau of Developmental Services Agency Liaison; or the Director of Family Support at the Bureau of Developmental Services (BDS). If resolution is not attainable after the above-mentioned course has been taken, a professional facilitator will be hired to assist with the dispute resolution process. If this process is not successful, a professional mediator will be used to come to a binding resolution. Such resolution shall be submitted to BDS for review.

10. What information/educational opportunities does the area agency provide the council about rights and rights protection?

Council has not been asked to participate in any of the rights manual and/or updates. Council not aware of any. However, this would be excellent opportunity for Council to participate become more involved in.

11. How does the Family Support Council coordinate its efforts with other local public and private entities that serve children, adults, and families, including but not limited to Family Centered Early Supports and Services providers, Partners in Health and Special Medical Services?

Council works with and through Family Support Council Liaison as well as connect directly with other services. A good example is teaming up and supporting “Bridging Horizons” for Halloween and other dances, “Partners and Health” joint event(s) at Chunky’s, and partner with other Agencies to provide family activities.

12. Does the council feel that its activities and contributions are supported by the area agency? Please share examples.

Yes, Council is invited to participate in Agency activities and events such as Fundraising and legislative events.

13. Please use this space to offer any additional comments.

Overall, we have a good working relationship with the Agency and open communication connection points. There’s always room for improvement.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Family and Guardian Redesignation Forum Summary

A remote forum was held on October 18, 2021 and December 4, 2021 to gather feedback from families of individuals receiving services from Community Crossroads. Twenty-five (25) participants joined the Zoom calls and responded to the questions below.

1. Do you or your family member(s) receive the information you need from the area agency to make decisions about services and resources?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- One participant commented that they do not always receive the information they need to make decisions.

2. Do you get the information you need from your area agency regarding Family Support services? For example: Respite, home/vehicle modifications and advocacy.	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Yes for some things. For example, home & vehicle modifications, are publicized well. It does work well if you know what to ask for. But people may not know that they can ask for. Some families know what to ask for, maybe add to website etc.
- Sometimes we get contradictory information. We were given information that LNA services were not available to a family member on the IHS waiver and this was not correct.
- Information from every area agency is different. Information sent to families need to be streamlined.
- Many families do not know what family support entails. Most people don't know what supports are available to them through Family Support.

3. Do you get the information you need from your area agency regarding the Family Support Council?	Yes	Sometimes	No	No Response
	X	X	X	

Comments:

- One participant reported that she received email notifications, but no information about the services and supports that the council offers.
- I don't know if I'm qualified for other services provided in NH.
- When councils were first implemented, they were asked to mentor new families. Share information to help families know what family are available to them. I wonder if the council could discuss this to try a pilot program and use something that worked originally as an intended purpose but current FSC have gotten away from.
- Council does a good job about attempting to get information out to the families. I think it's easy for families to reach out to a council member than to call the AA. Easier to talk to a parent peer. Lots of families do not know what the council does. We need to get the word out there more.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

4. Do you get the information you need from your area agency regarding employment services?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Prior to COVID we partnered with the Office of Vocational Rehabilitation (VR) for pre-employment trainings offered to families. We also partnered with the schools and had opportunities available for parents to learn more about at job building skills as early as the 8th grade.
- Not sure what’s happening now, but in the past there was the initiative to build capacity in the employment arena.
- Most families know about VR but with all the budget cuts at VR, they have not been helpful to many families for multiple reasons. I don’t think our families are aware or know that there’s anything more than VR.

5. Do you get the information you need from your area agency regarding waiting lists for funding?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- The FSC receives a report from Chief Executive Officer on the Wait List numbers for individual in need of services and individuals who have been funded for services. As a council member I get see that report but it’s not posted anywhere for others to review.
- Families do not get that information.
- Service Coordinators should get the information to families when they are on the waitlist.

6. Do you get the information you need from your area agency regarding transitioning from high school to adult services?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Not sure what it is now, but when I went through it I think that I was sent a packet from the agency that got us started, but it was talking to fellow family members who shared information with me and the service coordinator is how I learned to navigate the process.
- I had to rely on others. I was just given guardianship paperwork to file, but by talking to other families I found out what was best. I would have liked more information.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

7. Do you get the support and information you need from your area agency at age 14 years and older regarding options available for your family member upon graduation?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- One participant reported that she had worked at Community Crossroads in the past and that transition coordinators would families with transition planning.
- When you child is in school with an IEP and the school district will tell families what the goals should be for the child. But when transitioning to adult services, families are expected to develop their own goals, Families need more training in transition planning.
- Workforce issues are leaving family with limited service options. More training for family directed services is needed to assist families when choosing a PDMS service model when they transition from school. Families think unless they do it themselves, it will be difficult to get your family member into a program. As a system we need to think of how to adapt to what’s going on and help families early on so they are prepared when their child leaves school.
- Community Crossroads needs to increase their PDMS service coordination capacity to better assist families.
- Maybe support groups to share experiences of other families that have gone through the transition process. This could start at age 14 to begin learning about transition planning and service options.

8. Are the area agency staff responsive? For example: Do they return your calls in a reasonable amount of time?	Yes	Sometimes	No	No Response
	X	X	X	

Comments:

- I’ve seen a decline. I think that the AA as a whole and service coordinators have been responsive previously, but now I feel it’s more when I escalate the issues. I feel like I have to scream a little louder. Maybe it’s part of the fact that I’m a parent forced into a PDMS program and don’t want to do one. I understand staff issues and challenges but I work full time and I don’t feel supported right now.
- FSC developed a survey 2 years ago and got a good response. The #1 issue was communication and getting AA staff to respond and get back to family members in timely manner and this was pre-COVID. It’s always been an issue with the AA.
- It used to be better. Staff with institutional knowledge and experience have left the agency. I feel as if something missing that used to be prominent is social role validation and it is crucial to understand the history of the DD rights movement and the values that must be infused into the services we provide to achieve our goals. I wonder if any of that fuels the way people take how serious people take their messages. Are the staff really connected to the people on the other end of that message? Feeling heard is where it begins. Not sure where if AA staff are getting training needed to help them understand and hear the individuals on the other end.
- I feel COVID has made things worse, but even emails have gotten worse. I’ve had to repeat and repeat and repeat even with a chain of people. No sure what’s happening. It would be nice when a service coordinator is out that someone else would be available to respond.
- At some point, we have to start getting back into doing things, might be different, but we have to stop using COVID as an excuse for everything and we need to adapt to COVID. Get back to the way it was and stop using it as a reason.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

9. Are you, your family member(s), and/or other family members and friends encouraged and supported to exercise choice and control over managing financial resources?	Yes	Sometimes	No	No Response
		X	X	

Comments:

- We worry that although you have more control over hiring staff, but you're pretty much an unpaid program manager. It's daunting. I foresee some families doing PDMS will say I'm tired and I'm not doing it anymore. AA need to start to have conversations about what that's going to look like. AA do not have to do oversight when PDMS is going on. When PDMS is going well AA doesn't really have to do anything. Burden to the agency is less, but it's not always going to work for me. There needs to be conversations when aging families need day programs.
- We do not get the monthly budget reports and it would be nice for the AA to send the budget to us so that we are up to date. They are weak in getting this information out. It would help families understand and manage their PDMS budgets. AA could help more to go over this with families. AA do not send this out very often. Would be helpful.
- During development of budgets, families could be more involved in. The PMDS managers is pretty good, but more could be done to assist families in having more control over their budgets.
- AA need to think of what might happen for individuals who may want to remain in a PDMS setting, but families eventually are no longer able to provide.
- DSP being paid \$9 an hour, no talk of raises into the budget increases. Expectation we need to keep up with inflation to allow and consideration of those who's had a budget that has been the same for 15-20 years and not keeping up with inflation.

10. Do you feel that the area agency considers the unique concerns, priorities and resources of your family member in providing services?	Yes	Sometimes	No	No Response
	X			

Comments:

- Yes, because I am able articulate and advocate for what my family member needs. I've spent a lot of years getting hyper educated on the system and know what to ask. We need to not assume every family we are serving is as savvy. We need some type of mechanism to say did you know you can ask for this? You don't know what you don't know. Restaurant / menu. It varies from AA to AA. Ex. Home modifications. We need to be careful and have to hold agencies to a high standard, but we need to be informed consumers, but multiple documents and not a single point that has all the information. People don't know what to ask for.
- Reaching out, we as a council try to make families aware to come to the trainings, getting families to show up and learn is a challenge.

11. Do you think that staff and providers respect your family members' choices regarding the services they receive?	Yes	Sometimes	No	No Response
	X			

No comments provided

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

12. Do you think that staff and providers respect your family members' choices regarding who provides services?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- One participant shared that she had a respite staff I wanted to hire, but she had moving violation 7 years prior and they did not allow me to hire her. Community Crossroads said their insurance company wouldn't allow that.

13. Do you think that staff and providers respect your family members' choices regarding where services are provided?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Not sure families are aware of the flexibility Appendix K offered. Lot of times it's overwhelming, sometimes a shorter synopsis could go out to families "what does this mean for me" uniform across all AA would be great.

14. Do you think that staff and providers respect your family members' choices regarding what goals are pursued in the service agreement?	Yes	Sometimes	No	No Response
	X			

- No comments provided

15. Are you satisfied with the services you and your family member are receiving from the area agency?	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Recently husband diagnosed with a condition and AA helped me support my daughter, they increased IHS because they knew I couldn't do everything I had been doing. They did that and came through without me having to knock on the door.
- I think there are a lot of things we could do to better serve our families and connect them so that they can understand how things work in the system and teach to better advocate. I think it starts with communication and getting information out effectively. Icontact system that Community Crossroads uses to send messages out to family doesn't always work.
- We need to work to improve communication between AA and families. Not everyone gets information.
- Everything starts with communication. To some degree satisfaction has to do with what they are asking for. You can't be upset at not getting something if you don't ask for it. People are afraid if I complain they will cut services. Having an awareness of some of the problems might enable the system at large and each AA nibble away at the barriers from getting what they need. Families need to understand what an AA is and what they are contracted to do and what they can ask for.
- Ex. Survey went through Icontact went through email and they found in junk/spam. Probably would have gotten more results if they had a better system. Could be more supports and trainings and sponsorships. Making families aware of trainings, reach out to us. The more everyone can work together and be consistent. Not all case workers do the same.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

16. Are you satisfied with the health related supports that are provided to your family member by the area agency? For example: Assistance in locating healthcare providers, specialists and supporting healthy living activities.	Yes	Sometimes	No	No Response
	X			

No comments provided

17. Are you satisfied with the safety related supports that are provided to your family member by the area agency? For example: Appropriate supervision supports, environmental modifications and assistive technology,	Yes	Sometimes	No	No Response
	X	X		

Comments:

- Again families need to understand what to advocate for what they need. Sometimes this is also dependent on the knowledge and experience of their service coordinator.
- There has been many changes to the waivers and families are not aware of the changes in assistive technology. Some AA have provided trainings and others have not.

18. Do you know whom to call if your family members' rights have been violated or they are not receiving the services they need and want?	Yes	Sometimes	No	No Response
	X			

Comments:

- My service coordinator is my first point of contact for assistance to file a complaint. The complaint number is available in the service agreement. Also, the number should be on Community Crossroads website

19. Is your family member supported to form and maintain relationships and become an active member of the community doing work/leisure activities of his/her choice?	Yes	Sometimes	No	No Response
	X	X		

No comments provided

20. Does the area agency ask the individual and/or guardian if they are satisfied with the quality of services received from them?	Yes	Sometimes	No	No Response
	X	X	X	

Comments:

- Every month on my 525 progress notes I document my satisfaction with services.
- It's hard to be objective because service coordinator is asking you the questions.
- Opportunity given but it can be hard if individual (service coordinator) providing the services is asking you.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
 Community Crossroads Redesignation Report
 Report Date: June 2022

21. If you have made suggestions regarding improving the quality of services, did the area agency follow up with you?	Yes	Sometimes	No	No Response
No comments provided				X

No comments provided

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Individual and Self-Advocate Redesignation Forum Responses

Two remote forums were held on December 2, at 1:30 pm and 6:00 pm to receive feedback from individuals who receive services. The Bureau of Developmental Services (BDS) facilitated the forums and 14 individuals who receive services participated.

1. Are you getting the support you need? For example: At home, during the day, at work or other places?	Yes	Sometimes	No	No Response
	14			

Comments:

- One participant reported that their service coordinator is helping them make arrangements to payback Medicaid.
- Nothing but good things to say. I am getting the supports I need.

2. Do you feel like you are part of the community?	Yes	Sometimes	No	No Response
	14			

Comments:

- One participant reported that they are working and participants in activities in their local community.

3. Does your service coordinator get back to you when you contact them?	Yes	Sometimes	No	No Response
	12	2		

Comments:

- One participant reported that they do not have a service coordinator but they can contact anyone at the agency and they will get back to them.
- I don't know who my service coordinator is.
- Overall my service coordinator gets back to me when I call.
- Eventually, it may be a few days.

4. Does your service coordinator help you get what you need?	Yes	Sometimes	No	No Response
	12	2		

Comments:

- One participant reported that they always gets the support they need.
- I didn't know that my service coordinator could help me to find employment.
- My prior service coordinator was excellent but they no longer work at Community Crossroads.
- I don't have a service coordinator at this time.
- Another participant responded that it was mostly up to them to reach out for what I need.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

5. Do you participate in your service agreement meetings?	Yes	Sometimes	No	No Response
	9			5

Comments: No additional comments

6. Did you help pick the goals in your service agreement?	Yes	Sometimes	No	No Response
	6			5

Comments:

- One participant reports that they always chooses the goals they want to work on.

7. Do you get to work on the goals in your service agreement regularly?	Yes	Sometimes	No	No Response
	8	1		5

Comments:

- One participant reported that they work on their goals with staff and changes the goal if needed.
- Another participant shared that they do not have staff.

8. Are you supported to stay healthy? For example: Supported to make healthy food choices, supported to exercise and supported to help schedule your health checkups.	Yes	Sometimes	No	No Response
	12			2

Comments:

- One participant reported that they were going to the gym but not so much due to COVID.

9. Do you feel you have choices about where you live and whom you live with?	Yes	Sometimes	No	No Response
	11		1	

Comments:

- One participant lives in a staffed home and wants to be closer to their family.
- Another participant shared that they are talking with their service coordinator and discussing future plans.

10. Do you feel you have choices about where you go in the community?	Yes	Sometimes	No	No Response
	12			2

Comments: No additional comments

11. Do you feel you have choices about where you work?	Yes	Sometimes	No	No Response
	5	2		7

Comments:

- One participant wants to find a job that is a right fit for me.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

12. Do you feel you have choices about the staff who support you?	Yes	Sometimes	No	No Response
	6	1		7

Comments:

- One participant shared that they live in a staff residence and does not always have a choice of staff to provide their supports

13. Do you feel you have the opportunity to meet and make friends?	Yes	Sometimes	No	No Response
	11	2		x

Comments:

- Several participants shared their needs to be more community activities and events in different communities.
- More opportunities to meet friends in weeknights and weekends.
- Another participants shared that limited opportunities to meet new friends.

14. Do you feel you are supported to keep your job or find a new/different job?	Yes	Sometimes	No	No Response
	2	2		10

Comments:

- One participant reported that they always get the support the need even when the job changes.

15. Does anyone from the area agency talk to you about your rights as a citizen?	Yes	Sometimes	No	No Response
	14			

Comments: No additional comments

16. Does anyone from the area agency talk to you about your rights as a person who receives services from an area agency?	Yes	Sometimes	No	No Response
	14			

Comments:

- One participant shared that their service coordinator review this information every year at their service agreement meeting.

17. Do you know whom to call if your rights are violated?	Yes	Sometimes	No	No Response
	14			

Comments:

- Several participants reported that they would call their service coordinator. Another mentioned that they would call the 800 phone number to report.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

18. Do people who support you treat you well? For example: Do they listen to you and do they help you get what you need?	Yes	Sometimes	No	No Response
	13	1		

Comments:

- One participant shared that staff may be dealing with other situations or are busy but for most of the time is supportive.

19. Does the area agency offer support for you to participate in self-advocacy groups? For example: Do they provide information about joining a group or offer rides to meetings?	Yes	Sometimes	No	No Response
	2	2		10

Comments:

- Several participants shared that they did not know about the self-advocacy groups.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Board of Directors Redesignation Forum Summary

A remote forum was held on October 14, 2021 to receive feedback from the Community Crossroads Board of Directors (BOD). The Bureau of Developmental Services (BDS) facilitated the forum.

1. How does the Board know that the agency is fulfilling its mission of helping people with disabilities to be active members of their communities?

- Monthly CEO reports are shared with BOD members reporting on agency activities and updating on progress on goals identified in the agency's strategic plan.
- BOD review progress on goals monthly to ensure they continue to align and progressing as identified in the plan. BOD also report that they hear on a regular basis for Community Crossroads Leadership and staff.
- BOD reports that every member is very involved in their community's activities and events.
- One board member shared an example that he is a dentist and provides services to many individuals and they bring up in conversation their engagement in their community life. He sees firsthand the agencies mission at the local level.

2. Do Board members have a role in carrying out the agency mission of community membership for people with disabilities?

- Seventy –five percent of the BOD membership are consumer family members. They are engaged community members and carry out the agency mission and seek opportunities to promote community membership for people with disabilities.
- One example shared by a BOD member was the internship program he introduced at his company for people with disabilities. The program focused on the development of day to day and specific work skills that led to opportunities for employment at his company and other businesses. The success of the program has been expanded throughout his company in other states.
- Another BOD member shared that she had completed the Leadership series and developed a transition to school presentation to assist school staff to assist individuals with the transition to adult services.

3. What involvement does the Board have in assessing/improving the quality of services provided by the area agency and its subcontract agencies?

- BOD meeting discussions focus on what is happening overall at the agency including recent accomplishments, service issues and critical incidents. Discussion include assessing/improving the quality of services.
- BOD members bring their personal experiences as family members to discuss recommendations for quality improvement. BOD are open minded to sharing of ideas and suggestions. There is a standing BOD Quality Improvement subcommittee that reviews data and reports on quality concerns and presents recommendation to the full board.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

- 4. Does the area agency share with the Board the results of surveys, assessments and reports related to quality of services?**
 - BOD subcommittee reports out monthly on the quality of services to the entire board on current issues, trends and areas that needed improvement.
 - Community Crossroads Leadership and staff provided information including Service file reviews, financial reports and other related reports related to quality of services provided.

- 5. What action does the Board take regarding recommendations that are made in reports related to quality of services?**
 - The BOD is routinely provided information on quality issues requiring improvement. They actively engage with Community Crossroads leadership team and provide recommendations to address quality improvement.
 - Community Crossroads leadership team informs the BOD on all critical incidents in a timely manner. BOD engages in active dialogue, requesting additional information as needed and providing recommendations.

- 6. How are new Board members oriented and what opportunities exist for ongoing educational/training for Board members?**
 - New BOD members meet the CEO. CEO provides an overview of the agency and the services provided. New members are also provided a new BOD packet. In addition, new members are also provided with for additional trainings opportunities such as the Leadership Series to broaden their skills and understanding.

- 7. Do Board members receive adequate information regarding the regional and state system to support you in your role as a Board member?**
 - Community Crossroads leadership and staff provide regular updates on statewide system and policy changes related to the agency.
 - One BOD member reported that she participates in many state policy and other state-wide committees and routinely shares information with board.

- 8. Describe how the Board receives information and input from the regional Family Support Council and self-advocacy group.**
 - Family Support Chair is a BOD member and provides updates of family support issues and activities to the full board routinely during the full board meetings,
 - Self-Advocate member is also a BOD member and provides regular updates on issues and concerns discusses at the Self-Advocate People Power meetings.

- 9. How does the Board support the area agency's community outreach and public education efforts?**
 - One BOD reported on the recent Resiliency Community Fair was an opportunity to share resources and promote community connections with other community members and businesses.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Family and Guardian Redesignation Survey Summary

BDS conducted a Family and/or Guardian Survey via Survey Monkey and via paper form. A total of 145 families and/or guardians and individuals responded anonymously to this survey. The responses are noted below. Not all will total 100% as the numbers were rounded.

1. Do you or your family member(s) receive the information you need from the Area Agency to make decisions about services and resources?

Answer Choices	Responses
Yes	77.93%
Sometimes	17.24%
No	4.14%
Not Applicable	0.69%

2. Do you get the information you need about:
- a. Family Support Services (such as respite, home/vehicle modification, advocacy)

Answer Choices	Responses
Yes	62.50%
Sometimes	20.83%
No	6.25%
Not Applicable	10.42%

- b. Family Support Council

Answer Choices	Responses
Yes	45.95%
Sometimes	18.92%
No	12.61%
Not Applicable	22.52%

- c. Employment Services

Answer Choices	Responses
Yes	27.19%
Sometimes	14.04%
No	14.04%
Not Applicable	44.74%

- d. Waiting Lists

Answer Choices	Responses
Yes	21.62%
Sometimes	9.01%
No	18.92%
Not Applicable	50.45%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

e. Transition from High School to adult services

Answer Choices	Responses
Yes	18.92%
Sometimes	9.91%
No	7.21%
Not Applicable	63.96%

f. Support and information at age 14 and older regarding options available upon graduation.

Answer Choices	Responses
Yes	15.60%
Sometimes	5.50%
No	11.93%
Not Applicable	66.97%

3. Are the area agency staff responsive? For example, do they return your calls in a reasonable amount of time?

Answer Choices	Responses
Yes	81.12%
Sometimes	11.19%
No	7.69%

4. Are you, your family member, and other family members and friends encouraged and supported to exercise choice and control over:

a. The planning of services?

Answer Choices	Responses
Yes	81.82%
Sometimes	9.79%
No	4.20%
Not Applicable	4.20%

b. Implementation of services?

Answer Choices	Responses
Yes	72.07%
Sometimes	18.02%
No	3.60%
Not Applicable	6.31%

c. Managing financial resources?

Answer Choices	Responses
Yes	57.89%
Sometimes	15.79%
No	9.65%
Not Applicable	16.67%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

5. Do you feel the area agency considers the unique concerns, priorities and resources of your family in providing services?

Answer Choices	Responses
Yes	75.69%
Sometimes	18.06%
No	5.56%
Not Applicable	0.69%

6. Do you think that staff and providers respect your family member's choices regarding:
a. The services they receive.

Answer Choices	Responses
Yes	90.21%
Sometimes	7.69%
No	2.10%

- b. Who provides the service?

Answer Choices	Responses
Yes	86.81%
Sometimes	8.04%
No	5.36%

- c. Where the services are provided?

Answer Choices	Responses
Yes	88.39%
Sometimes	8.93%
No	2.69%

- d. What goals are pursued in the service agreement?

Answer Choices	Responses
Yes	84.55%
Sometimes	12.73%
No	2.73%

7. Are you satisfied with the services you and your family member/ward are receiving from the area agency?

Answer Choices	Responses
Yes	79.86%
Sometimes	14.58%
No	5.56%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

8. Are you satisfied with the health related supports that are provided to your family member by the area agency (such as assistance in locating health care providers, specialists)?

Answer Choices	Responses
Yes	63.19%
Sometimes	6.25%
No	6.94%
Not Applicable	23.61%

9. Are you satisfied with the safety related supports that are provided to your family member by the area agency (such as appropriate supervision supports, environmental)?

Answer Choices	Responses
Yes	61.27%
Sometimes	11.27%
No	4.93%
Not Applicable	22.54%

10. Do you know whom to call if your family members' rights have been violated or they are not receiving the services they need and want?

Answer Choices	Responses
Yes	83.33%
Sometimes	3.47%
No	13.91%

11. Is your family member supported to form and maintain relationships and become an active member of the community, doing work/leisure activities of his/her choice?

Answer Choices	Responses
Yes	77.30%
Sometimes	13.48%
No	9.22%

12. Does the area agency ask the individual receiving services and/or the guardian if they are satisfied with the quality of services received from them?

Answer Choices	Responses
Yes	82.73%
No	17.27%
Not Applicable	0.0%

13. If you have made suggestion regarding improving quality of services, did the area agency follow-up with you?

Answer Choices	Responses
Yes	70.40%
Sometimes	14.40%
No	15.20%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Provider Redesignation Survey Summary

BDS conducted a provider survey via Survey Monkey and via paper form. Executive Directors from nine provider agencies responded to this survey.

Please choose one to rate the overall effectiveness of communication between your agency and the area agency:

Answer Choices	Responses: 9
Excellent	22.22%
Good	44.44%
Inconsistent	11.11%
Lacking	22.22%

Is there timely communication with Service Coordinators when there is an incident/issue/emergency involving an individual?

Answer Choices	Responses: 9
Yes	77.78%
No	0.00%
Sometimes	11.11%
No response	11.11%

Does the Area Agency communicate and explain policy and funding issues released by the Bureau of Developmental Services?

Answer Choices	Responses: 9
Yes	22.22%
No	0.00%
Sometimes	44.44%
No response	33.33%

How does the Area Agency communicate regular updates and changes to policy, funding, performance, etc.? Choose ALL that apply:

Answer Choices	Responses: 9
Email	44.44%
Phone Calls	11.11%
Regularly Scheduled Provider Meetings	33.33%
Special Meetings	22.22%
Letters	0.00%
Other	33.33%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Do you have a specific contact person to speak with regarding funding issues, crisis needs, and/or changes in funding with regard to individuals' needs?

Answer Choices	Responses: 9
Yes	66.67%
No	33.33%

When there is an issue with an individual, are there timely responses and meetings that meet the level of urgency?

Answer Choices	Responses: 9
Yes	55.56%
No	22.22%
Sometimes	22.22%

Overall, are area agency staff easily accessible and phone calls returned in a timely manner?

Answer Choices	Responses:9
Yes	67.67%
No	33.33%

Is your agency invited to participate in the development and ongoing assessment of the area agency's Area Plan (also possibly known as Biennial Plan or Strategic Plan)?

Answer Choices	Responses: 9
Yes	22.22%
No	33.33%
Not Sure	44.44%

Do you believe individuals and families are objectively given a choice of providers in the regional area?

Answer Choices	Responses: 9
Yes	66.67%
No	33.33%

How well is the RFP process working in your regional area?

Answer Choices	Responses:9
Very Well	22.22%
Good	33.33%
Inconsistent	33.33%
Needs Improvement	11.11%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Do you believe individuals and families understand their rights to choice and how to exercise these rights?

Answer Choices	Responses: 9
Yes	100%
No	0%

Overall, are the area agency service coordinators responsive to the needs of individuals?

Answer Choices	Responses: 9
Yes	88.89%
No	11.11%

In general, do you feel individuals (and their guardians/representatives) are adequately supported by the area agency to advocate for themselves in the service planning process and implementation of their services?

Answer Choices	Responses: 9
Yes	100%
No	0.00%

In general, do you believe individuals (and their guardians/representatives) are encouraged and supported by the area agency to request changes to their services?

Answer Choices	Responses: 9
Yes	100%
No	0.00%

Overall, do you believe area agency service coordinators are adequately trained in their role?

Answer Choices	Responses: 8
Yes	55.56%
No	44.44%

Has the Area Agency explained and made available the process for requesting funding changes for Individual service needs to your agency?

Answer Choices	Responses: 9
Yes	50.00%
No	50.00%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

In your opinion, has the area agency explained and made available the process for requesting funding changes for individual service needs to the individual, guardian/representative?

Answer Choices	Responses: 9
Yes	66.67%
No	33.33%

Does the Area Agency have processes in place to address underutilized services?

Answer Choices	Responses
Yes	11.11%
No	11.11%
Unsure	77.78%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Staff/Provider Redesignation Survey Summary

BDS conducted a staff/provider survey via Survey Monkey and via paper form. Fifty-one (51) Community Crossroad staff and area agency contracted providers responded to this survey. Participants that responded included service coordinators, family managed and direct support staff, program managers and contracted providers. The responses are noted below. Not all will total 100% as the numbers were rounded.

1. What is your role with the area agency?

Answer Choices	Responses
Service Coordinator	37.23%
Direct Support Professional	5.88%
Program Manager	9.80%
Family Managed Employees	25.49%
Early Supports	1.96%
Other	19.64%

2. Overall, how would you rate the support that you receive in in your role from the area agency?

Answer Choices	Responses
Very Satisfied	58.00%
Satisfied	32.00%
OK	2.00%
Dissatisfied	2.00%
Very Dissatisfied	6.00%

3. Are you satisfied with the training you received?

Answer Choices	Responses
Yes	93.88%
No	2.04%
Sometimes	4.08%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

4. Do you think the area agency training has given you sufficient information to know how to respond to the following?

a. Rights violations:

Answer Choices	Responses
Yes	93.75%
No	6.25%

b. Emergency supports and services:

Answer Choices	Responses
Yes	87.50%
No	12.50%

5. Are you asked for suggestions and ideas regarding improving the quality of services?

Answer Choices	Responses
Yes	52.08%
No	26.67%
Sometimes	31.25%

6. Are services provided to the people supported but he area agency based upon their needs and interests?

Answer Choices	Responses
Yes	90.00%
No	2.00%
Sometimes	8.00%

7. If you reported a rights violation, was the area agency responsive?

Answer Choices	Responses
Yes	21.57%
No	1.96%
Sometimes	0.00%
N/A	76.47%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

8. Does the area agency, in collaboration with families, assist the people they support and their guardians in exercising choice and control in:

a. Selecting, planning and designing individuals' services?

Answer Choices	Responses
Yes	79.17%
No	2.08%
Sometimes	2.08%
Unsure	4.17%
N/A	12.50%

b. Selecting providers and/or hiring, firing, supervising and training staff?

Answer Choices	Responses
Yes	63.83%
No	2.13%
Sometimes	10.64%
Unsure	17.02%

c. Deciding where and with whom individuals will live?

Answer Choices	Responses
Yes	70.83%
No	0.00%
Sometimes	6.25%
Unsure	6.25%
N/A	29.17%

d. Deciding in what activities individuals will participate.

Answer Choices	Responses
Yes	70.83%
No	0.00%
Sometimes	8.33%
Unsure	4.17%
N/A	16.67%

e. Selecting what goals will be pursued in the individual's service agreement.

Answer Choices	Responses
Yes	77.08%
No	0.00%
Sometimes	4.17%
Unsure	6.25%
N/A	12.50%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

f. Deciding how the funds allocated by the area agency for individuals will be spend?

Answer Choices	Responses
Yes	64.58%
No	0.00 %
Sometimes	8.33%
Unsure	12.50%
N/A	14.58%

9. Does the area agency provide information to the people they support, their families and their guardians relative to their ability to direct and manage their services?

Answer Choices	Responses
Yes	81.63%
No	0.00%
Unsure	8.16%
N/A	8.16%
Sometimes	2.04%

10. Is the area agency responsive when you represent the people you support and their families' requests and needs (i.e. work with you to meet these needs)?

Answer Choices	Responses
Yes	75.51%
No	2.04%
Sometimes	6.12%
N/A	16.33%

11. Do you think the healthcare needs of the people supported by the area agency are addressed appropriately?

Answer Choices	Responses
Yes	72.92%
No	2.08%
Sometimes	12.50%
Unsure	0.00%
N/A	12.50%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

12. Do you think the area agency has been successful in helping the people they support to establish and maintain relationships?

Answer Choices	Responses
Yes	72.34%
No	4.26%
Sometimes	10.64%
Unsure	12.77%

13. Does the area agency assist you in your efforts to help the people you support and their families to explore, identify and access community resources, both formal and informal?

Answer Choices	Responses
Yes	85.71%
No	4.08%
Sometimes	0.00%
Unsure	0.00%
N/A	10.20%

14. Does the area agency create a work atmosphere where you are encouraged to offer ideas, opinions and suggestions?

Answer Choices	Responses
Yes	80.85%
No	8.51%
Sometimes	10.64%

15. Are you satisfied with the supervision you receive?

Answer Choices	Responses
Yes	91.67%
No	2.08%
Sometimes	6.25%

16. Are area agency management staff and supervisors accessible and helpful when you have questions, problems or ideas that you wish to discuss?

Answer Choices	Responses
Yes	83.67%
No	4.08%
Sometimes	4.08%
N/A	8.16%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

Board of Directors Redesignation Survey Summary

BDS conducted a Board of Directors survey via Survey Monkey and via paper form. Four board members responded to this survey.

1. Are families/guardians and individuals made aware of and recruited for the Board of Directors?

Answer Choices	Responses
Yes	75.00%
No	25.00%
Unsure	0.00%

2. Are accommodations provided to individuals and families/guardians to support their participation in Board activities and committees?

Answer Choices	Responses
Yes	66.67%
No	0.00%
Unsure	33.33%

3. Does the Board have a role regarding the agency budget?

Answer Choices	Responses
Yes	75.00%
No	25.00%
Unsure	0.00%

4. Does the Board have a role in addressing the regional waiting list needs?

Answer Choices	Responses
Yes	75.00%
No	25.00%
Unsure	0.00%

5. Does the Board have a role in seeking and utilizing other/generic sources of revenue?

Answer Choices	Responses
Yes	100%
No	0.00%
Unsure	0.00%

6. Describe how the Board monitors and assesses the financial health of the area agency and its subcontractor?

No Comments provided.

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

7. Does the Board have a role in reviewing and revising the area agency policies, procedures, bylaws and organizational structure?

Answer Choices	Responses
Yes	100%
No	0.00%
Unsure	0.00%

8. Were you involved in the development and review of the area plan?

Answer Choices	Responses
Yes	75.00%
No	25.00%
Unsure	0.00%

9. Does the Board receive updates and information regarding:

- a. Governance audit reviews.

Answer Choices	Responses
Yes	100%
No	0.00%
Unsure	0.00%

- b. Annual service file review results?

Answer Choices	Responses
Yes	75.00%
No	0.00%
Unsure	25.00%

- c. National Core Indicator (NCI) survey data?

Answer Choices	Responses
Yes	75.00%
No	0.00%
Unsure	25.00%

- d. Family Centered Services, Early Supports and Services annual file review results.

Answer Choices	Responses
Yes	75.00%
No	0.00%
Unsure	25.00%

New Hampshire Department of Health and Human Services
Division of Long Term Supports and Services
Bureau of Developmental Services
Community Crossroads Redesignation Report
Report Date: June 2022

e. Incident management data?

Answer Choices	Responses
Yes	100%
No	0.00%
Unsure	0.00%

f. Human Rights Committee?

Answer Choices	Responses
Yes	100%
No	0.00%
Unsure	0.00%

**Community Crossroads - Region 10
Governance Desk Audit
July 1, 2020- June 30,2021**

#	Indicator	Rule citation	Met	Not Met
1	Current Board Composition:	RSA 171-A:18 He-M 505.03(m)	X	
2	Executive Director Qualifications	RSA 171-A:18 He-M 505.03(q); He-M 505.03(s)	X	
3	Current AA/BOD bylaws	He-M 505.03(h)-(l)	X	
4	Current Board polices and procedures	He-M 505.03(e)	X	
5	Last 12 months of Board of Director's meeting minutes		X	
6	Area Agency plan for the provision of services to individuals			
7	Provided a self-assessment summarizing current status on all area plan strategic goals	RSA 171A:18 He-M 505.03(t)-(u) He-M 519.07(a) & He-M 519.07(b)(1)-(2)	X	
8	Human Rights Committee Composition:		X	
9	Provided a summary of how the Human Rights Committee accomplishes the following duties with supporting documentation A) For each program or service with which the committee is concerned, evaluating the treatment and habilitation provided B) Regularly monitoring the implementation of individual service agreements C) Monitoring the use of restrictive or intrusive interventions designed to address challenging behavior D) Fostering the capacity of individuals served by the area agency to exercise more choice and control in their lives E) Promoting advocacy programs on behalf of the clients	RSA 171-A:17	X	
10	Last 12 months of Human Rights Committee minutes		X	
11	Provided policies regarding the use of restraint and prohibition of seclusion	Waiver performance measures	X	
12	Provided documentation demonstrating that policies regarding the use of restraint and prohibition of seclusion are followed	Waiver performance measures	X	
13	Provided the agency communication strategy for internal service providers and relaying information to external service providers concerning changes in policy, funding, statewide issues (quality initiatives, settings rule, direct billing, incident management, conflict free service provision, NCI results, audit results) and other related activities to plan, establish and maintain a comprehensive service delivery system.	He-M 505.03(a)(ac)	X	
14	Provided the agency process for ongoing quality assurance activities and trainings (settings rule, direct billing, conflict free services, incident management) to assess and continuously improve the quality of its services, and ensure that the recipients of services are satisfied with the services that they receive.	He-M 505.03(w)(6)	X	
15	Sub-Contracting for Services: For services which are provided by persons or organizations which are not the Area Agency, the Agency has entered into agreements for the provision of services.	He-M 505.03(z)(aa)	X	
16	If applicable, the area agency provided updates and/or completed its plan of correction from the last redesignation.	He-M 505.08(e)(9)	X	

**Community Crossroads - Region 10
Governance Desk Audit
July 1, 2020- June 30,2021**

17	Provide your agency policy to demonstrate compliance with the Department of Health and Human Services (DHHS) sentinel event policy and accurate and timely completion of the sentinel event form	RSA 126-A:4, AA Contract Section 1.5	X	
18	Provided your Memorandum of Understanding (MOU) with the local Community Mental Health Center	AA Contract with BDS: 2.5 & 2.5.1 - 2.5.1.6	X	
19	Submitted the area agency's detailed description and any updates in regards to the language assistance services provided to persons with Limited English Proficiency (LEP) to ensure meaningful access to available programs and/or services.	Contract, Exhibit A, 1:1.1 Contract Exhibit C:17	X	
20	National Core Indicator Interviews (NCI) For those individuals for whom an unmet need was identified, did the agency respond to the corrective action request within 15 working days	Contract, Exhibit A, 2.2.2	X	
21	Provided a statement documenting all required data and timely updates were entered in the Employment Data System by 9/30, 12/31, 3/31, 6/30 for the previous quarter's activities to generate the regional and statewide employment reports	Contract, Exhibit A, 2.9 & 2.9.1-2.9.3.	X	
22	Current FSC composition	He-M 519.05(b)	X	
23	Provided Family support council policies that addressed: A) Membership, rotation, and term limits on the council. B) A process for determining the chairperson, the state council delegate, and any other positions such as the council representative to the area agency board of directors. C) Orientation and mentoring of all council members.	He-M 519.05-C(1-3)	X	
24	Provided the formal agreement between the council and the area agency that identified: A) The parties' relationship, roles, and responsibilities B) The process to be used in resolving any conflicts which might arise between the parties C) The involvement of the council in the selection and evaluation of the performance of the family support staff D) The family support representative on the area agency management team and the mechanism for direct communication between this person and the council E) A mechanism for the council to be involved in the area agency monitoring of supports and services provided to families	He-M 519.05(c)(4)(6)	X	
25	Provided the process used to disperse family support council funds and other resources.	He-M 519.05(c)(5)	X	
26	Family Support Coordinator/Director: A) Job Description. B) Resume of designated staff person.	He-M 519.06(a)(b)	X	

Question #	Indicator	Rule citation	Met	Not Met
1	Current Board of Directors Composition	RSA 171-A:18 He-M 505.03(m)	8	2
2	Executive Director Qualifications	RSA 171-A:18 He-M 505.03(q); He-M 505.03(s)	10	0
3	Current AA/BOD bylaws	He-M 505.03(h)-(l)	8	2
4	Current Board polices and procedures	He-M 505.03(e)	10	0
5	Last 12 months of Board of Director's meeting minutes		10	0
6	Area Agency plan for the provision of services to individuals in the area	RSA 171A:18 He-M 505.03(t)-(u) He-M 519.07(a) & He-M 519.07(b)(1)-(2)	9	1
7	Provided a self-assessment summarizing current status on all area plan strategic goals		10	0
8	Human Rights Committee Composition	RSA 171-A:17	10	0
9	Provided a summary of how the Human Rights Committee accomplishes the following duties, included supporting documentation: A) For each program or service with which the committee is concerned, evaluating the treatment and habilitation provided B) Regularly monitoring the implementation of individual service agreements C) Monitoring the use of restrictive or intrusive interventions designed to address challenging behavior D) Fostering the capacity of individuals served by the area agency to exercise more choice and control in their lives E) Promoting advocacy programs on behalf of the clients	RSA 171-A:17	10	0
10	Last 12 months of Human Rights Committee minutes		10	0
11	Provided policies regarding the use of restraint and prohibition of seclusion	Waiver performance measures	10	0
12	Provided documentation demonstrating that policies regarding the use of restraint and prohibition of seclusion are followed	Waiver performance measures	10	0
13	Provided the agency communication strategy for internal service providers and relaying information to external service providers concerning changes in policy, funding, statewide issues (quality initiatives, settings rule, direct billing, incident management, conflict free service provision, NCI results, audit results) and other related activities to plan, establish and maintain a comprehensive service delivery system	He-M 505.03(a)(ac)	10	0
14	Provided the agency process for ongoing quality assurance activities and trainings (settings rule, direct billing, conflict free services, incident management) to assess and continuously improve the quality of its services, and ensure that the recipients of services are satisfied with the services that they receive	He-M 505.03(w)(6)	10	0

Question #	Indicator	Rule citation	Met	Not Met
15	Sub-Contracting for Services: For services which are provided by persons or organizations which are not the Area Agency, the Agency has entered into agreements for the provision of services	He-M 505.03(z)(aa)	10	0
16	If applicable, the area agency provided updates and/or completed its plan of correction from the last redesignation	He-M 505.08(e)(9)	10	0
17	Provided policy to demonstrate compliance with the Department of Health and Human Services (DHHS) sentinel event policy and accurate and timely completion of the sentinel event form	RSA 126-A:4, AA Contract Section 1.5	10	0
18	Provided Memorandum of Understanding (MOU) with the local Community Mental Health Center	AA Contract with BDS: 2.5 & 2.5.1 - 2.5.1.6	10	0
19	Submitted detailed description and any updates in regards to the language assistance services provided to persons with Limited English Proficiency (LEP) to ensure meaningful access to available programs and/or services	Contract, Exhibit A, 1:1.1 Contract Exhibit C:17	9	1
20	National Core Indicator Interviews (NCI) For those individuals for whom an unmet need was identified, did the agency respond to the corrective action request within 15 working days	Contract, Exhibit A, 2.2.2	10	0
21	Provided a statement documenting all required data and timely updates were entered in the Employment Data System by 09/30, 12/31, 03/31, 06/30 for the previous quarter's activities to generate the regional and statewide employment reports	Contract, Exhibit A, 2.9 & 2.9.1-2.9.3.	10	0
22	Current FSC composition	He-M 519.05(b)	10	0
23	Provided Family support council policies which addressed: A) Membership, rotation, and term limits on the council B) A process for determining the chairperson, the state council delegate, and any other positions such as the council representative to the area agency board of directors C) Orientation and mentoring of all council members	He-M 519.05-C(1-3)	10	0
24	Provided the formal agreement between the council and the area agency which identified: A) The parties' relationship, roles, and responsibilities B) The process to be used in resolving any conflicts which might arise between the parties C) The involvement of the council in the selection and evaluation of the performance of the family support staff D) The family support representative on the area agency management team and the mechanism for direct communication between this person and the council E) A mechanism for the council to be involved in the area agency monitoring of supports and services provided to families	He-M 519.05(c)(4)(6)	9	1
25	Provide the process used to disperse family support council funds and other resources	He-M 519.05(c)(5)	9	1
26	Family Support Coordinator/Director: A) Job Description B) Resume of designated staff person	He-M 519.06(a)(b)	9	1

Section A

Comparative Analysis of DSAA Liquidity

**Five Year Trends and Highlights
(2017-2021)**

REGION/AREA AGENCY	Current Ratio					Avg.	Days Expenses in Cash					Avg.
	Fiscal Year						Fiscal Year					
	2017	2018	2019	2020	2021		2017	2018	2019	2020	2021	
X. Community Crossroads	1.73	1.88	1.86	1.70	1.70	1.77	20.5	27.2	30.9	3.4	13.6	19.1
Performance Standard				1.5:1						min 30		

**STATEWIDE AREA AGENCY CERTIFICATION STATISTICS
2017-2021**

	FY 17	FY 18	FY 19	FY 20	FY 21
# REVIEWS	60	79	79	81	106
# DEFICIENCIES	216	340	287	217	241
AVG # DEF. PER REVIEW	3.6	4.3	3.63	2.68	2.27
ABBREVIATED	0	3	12	13	12
NEW	12	18	12	14	18
ANNUAL	30	33	40	41	49
BIENNIAL	18	25	15	11	4
FOLLOW-UP	0	0	0	0	3
SKIP	0	0	0	2	10
COMPLAINT	0	0	0	0	10
HE-M 310	8	10	7	5	3
HE-M 503	17	55	45	42	54
HE-M 506	3	3	11	5	4
HE-M 507	31	27	14	16	2
HE-M 1001	104	171	140	120	123
HE-M 1201	34	54	57	24	24