

Citizens with Developmental Disabilities

PROVIDER AGENCY QUESTIONNAIRE

Last Updated: 09/03/2014

AGENCY INFORMATION
1. How many years has your agency been in business? 29
2. List licenses. LCD; PCA; NOW; Community Choice Waiver; Children's Choice;
3. List other certifications/credentials. We are an Independent Living Center,
4. Is your agency accredited ⊙Yes or ○No
5. If your agency is accredited, by whom? BBB
6. Has your agency had an external audit/survey? ⊙Yes or ONo
7. If your agency had an external audit/survey was it voluntary? •Yes or ONo
8. If your agency has had an external audit/survey, were there any
deficiencies? OYes or ONo
9. If there were any deficiencies, were they resolved? •Yes or ONo
SERVICES PROVIDED
10. Does your agency provide direct care services? • Yes or ONo
11. If yes, select all that apply and identify the number of persons supported in each
✓ Supported Independent Living 13
✓ Individual and Family Support 46
☐In-home Respite ☐
Center-based Respite
Supported Employment 81
Day Program
✓ Transportation
✓ Other: (specify services) For hard of hearing & The deaf, Independent Living.
12. If your agency provides Supported Employment Services, how many persons supported are
competitively employed? 54
13. What is the average rate of pay for the persons supported that are working competitively? (Select
one of the following) \$8.26-\$9.25

EM	PLOYEES							
14. How many people are employed by your agency? (Select one of the following)								
	51 +							
15. What types of professionals are employed by your agency? (Select all that apply)								
	☐Psychologist ☐Behavior Specialist							
	✓ Registered Nurse ☐ Licensed Social Worker							
	Other (Specify)							
	What is the average rate of pay for the direct care professionals working for your agency for							
Ind	ividual and Family Support (IFS) day services? (Select one of the following)							
	\$8.26-\$9.25							
	17. What is the average rate of pay for the direct care professionals working for you agency for IFS							
nigi	st services? (Select one of the following) \$7.25-\$8.25							
10								
	Does your agency reimburse staff for mileage when they are providing transportation to persons ported in their own vehicle? OYes or ONo							
19.	If your agency reimburses for mileage, how much do they reimburse?							
	.34 per mile							
20	If your agency provides direct care services, what is your annual direct support professional							
turi	nover rate?							
	38%							
21. What are the common reasons for agency turnover?								
	Consumer dies, DSW no longer wants to work in the home of the Consumer, DSW finds other							
	employment employment							
22.	How many hours of training per year are provided to your direct support professionals?							
	first year 16 hours plus 4 hours each quarter. 16 hours Med. Admin.							
23.	What training topics are provided to your direct support professionals?							
	2008 DSW MONTHLY TRAININGS							
	SEPTEMBER: HUMAN & CIVIL RIGHTS OCTOBER: GETTING TO KNOW SWLA INDEPENDENCE							
24.	How many hours of training are provided to your professional staff?							
	40 hours a year							

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

Medication Administration – OCDD

Incident Reporting Supervisory Training

26. Does your agency have a written policy regarding expectations of employee's behavior when providing services? •Yes or ONo
27. If yes, how can persons interested in your agency access this information? They can ask for the information.
INDIVIDUALS SERVED
 28. Identify the total number of persons served by your agency? 774 this year 29. Does your agency serve children? Yes or ONo
30. Does your agency serve persons that require support with medication administration and/or non-complex tasks? •Yes or ONo
31. Does your agency serve persons with more intense behavioral support needs, such as aggression, pica, self-injurious behaviors, etc.? • Yes or ONo
32. Does your agency serve persons with more intense medical support needs, such as medical vents, tube feeding, etc.? •Yes or ONo
33. Does your agency specialize in services for specific populations (Autism, Prader-Willi, etc.)? OYes or ONo If Yes, specify specialties.
QUALITY ASSURANCE
34. Is your agency's Quality Assurance Plan available for current persons supported and potential persons interested in your agency to review? •Yes or ONo
35. If yes, how can persons that are interested access this information?
ask for it
36. How does your agency assess individual and/or their families satisfaction with the services
provided?
We send a survey every year. We also have a Quality Assurance person call consumers randomly to make sure people are happy with our services.
37. How often does your agency assess an individual and/or their family's satisfaction? (Select one of
the following)
Quarterly
38. What is your agency's process for receiving individual complaints?
If a consumer has a complaint about the DSW they can inform the Case Coordinator. If the consumer has a complaint about the Case Coordinator, they can inform the Office Administrator. then the Assistant Director, then the Executive Director.

39. H	ow are	comp	laints	resolved?
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SLIC has a team to discuss the complaints and come up with a resolution.

- 40. Does your agency report overall individual satisfaction? •Yes or ONo
- 41. Who is overall satisfaction reported to?

Executive Director, Board of Directors & Quality Assurance team

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

Annually

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

Rocky Fuselier Assistant Director