



**October 16<sup>th</sup>, 2017**

**Camden County Senate Bill 40 Board  
(dba) Camden County Developmental  
Disability Resources**

**Open Session Board Meeting**

# Agenda

Camden County Senate Bill 40 Board  
D/b/a Camden County Developmental Disability Resources  
100 Third Street  
Camdenton, MO 65020

Tentative Agenda for Open Session Board Meeting on October 16<sup>th</sup>, 2017, 4:00 PM

**This Board Meeting will be held at:**

**255 Keystone Industrial Park Drive**

**Camdenton, MO 65020**

Call to Order/Roll Call

Approval of Agenda

Approval of Open Session Board Meeting Minutes for September 18<sup>th</sup>, 2017

Acknowledgement of Distributed Materials to Board Members

- CLC Monthly Reports
- LAI Monthly Reports
- September 2017 Support Coordination Report
- September 2017 CARF Reports
- September 2017 Employment Report
- September 2017 Agency Economic Report
- August 2017 Credit Card Statement
- Resolutions 2017-53, 2017-54, 2017-55, 2017-56, 2017-57, 2017-58, 2017-59, 2017-60, 2017-61, 2017-62, 2017-63, 2017-64, 2017-65, 2017-66, 2017-67, 2017-68, 2017-69, 2017-70, 2017-71, 2017-72, and 2017-73

Speakers/Guests

- NONE

Monthly Reports

- Lake of the Ozarks Developmental Center (LODC)
- Children's Learning Center (CLC)
- Lake Area Industries (LAI)

Old Business for Discussion

- TCM Contract Negotiations
- CARF Survey & Board Member Availability

New Business for Discussion

- Keystone Facility - OATS

September Support Coordination Report

September CARF Reports

September Employment Report

September Agency Economic Report

August 2017 Credit Card Statement

Discussion & Conclusion of Resolutions:

1. Resolution 2017-53: Approval of Amended Policy #1
2. Resolution 2017-54: Approval of Amended Policy #2
3. Resolution 2017-55: Approval of Amended Policy #3
4. Resolution 2017-56: Approval of Amended Policy #4
5. Resolution 2017-57: Approval of Amended Policy #5
6. Resolution 2017-58: Approval of Amended Policy #6
7. Resolution 2017-59: Approval of Amended Policy #7
8. Resolution 2017-60: Approval of Amended Policy #8
9. Resolution 2017-61: Approval of Amended Policy #9
10. Resolution 2017-62: Approval of Amended Policy #14
11. Resolution 2017-63: Approval of Amended Policy #17
12. Resolution 2017-64: Approval of Amended Policy #18
13. Resolution 2017-65: Approval of Amended Policy #19
14. Resolution 2017-66: Approval of Amended Policy #20
15. Resolution 2017-67: Approval of Amended Policy #21
16. Resolution 2017-68: Approval of Amended Policy #25
17. Resolution 2017-69: Approval of Amended Policy #27
18. Resolution 2017-70: Approval of Amended Policy #28
19. Resolution 2017-71: Approval of Amended Policy #30
20. Resolution 2017-72: Approval of Amended Policy #35
21. Resolution 2017-73: New Policy 43 - Staff Training

Public Comment

Pursuant to **ARTICLE IV, "Meetings"**, Section 5. Public Comment:

"The Board values input from the public. There shall be opportunity for comment by the public during the portion of the Board agenda designated for "Public Comment". Public comment shall be limited to no more than 3 minutes per person to allow all who wish to participate to speak. It is the policy of the Board that the Board shall not respond to public comment at the Board meeting."

"Only comments related to agency-related matters will be received, however such comments need not be related to specific items of the Board's agenda for the meeting. The Board shall not receive comments related to specific client matters and/or personnel grievances, which are addressed separately per Board policies and procedures."

Adjournment

**The news media may obtain copies of this notice by contacting:**

**Ed Thomas, CCDDR Executive Director**

**5816 Osage Beach Parkway, Suite 108, Osage Beach, MO 65065**

**Office: 573-693-1511 Fax: 573-693-1515 Email: [director@ccddr.org](mailto:director@ccddr.org)**

**September 18<sup>th</sup>, 2017**  
**Open Session Minutes**

**CAMDEN COUNTY DEVELOPMENTAL DISABILITY RESOURCES**  
**Open Session Minutes of September 18, 2017**

**Members Present** Shana Weber, Chris Bothwell, Lisa Jackson,  
Jim Powell, Brian Willey via telephone

**Members Absent** Angela Sellers, Paul DiBello, Max Fisher, Suzanne Perkins

**Others Present** Ed Thomas, Executive Director

**Guests Present** Natalie Couch, Lillie Smith (LAI)  
Susan Daniels, Lisa Berkstresser(CLC)  
Marilyn Martin (LODC)  
Jeanna Booth, Linda Gifford, Marcie Vansyoc, Myrna Blaine,  
Rachel Baskerville, Linda Simms (CCDDR)

**Approval of Agenda**

Motion by Chris Bothwell, second Jim Powell, to approve the agenda as presented.

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey,  
Jim Powell

NO: None

**Approval of Open Session Board Minutes for August 21st, 2017**

Motion by Shana Weber, second Brian Willey, to approve the August 21st, 2017 minutes as presented.

AYE: Shana Weber, Brian Willey, Lisa Jackson

NO: None

Abstain: Chris Bothwell, Jim Powell, as they were not present  
at the August 21<sup>st</sup>, 2017 meeting.

**Approval of Special Open Session Board Minutes for August 28th, 2017**

Motion by Chris Bothwell, second Shana Weber, to approve the August 28th, 2017 minutes as presented.

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey

NO: None

Abstain: Jim Powell as he was not present at the August 28th, 2017  
meeting.

## **Acknowledgement of Distributed Materials to Board Members**

- CLC Monthly Reports
- LAI Monthly Reports
- LODC Monthly Reports
- August 2017 Support Coordination Report
- August 2017 CARF Reports
- August 2017 Employment Report
- August 2017 Agency Economic Report
- July 2017 Credit Card Statement
- Resolution 2017-33, 2017-34, 2017-35, 2017-36, 2017-37, 2017-38, 2017-39  
2017-40, 2017-41, 2017-42, 2017-43, 2017-44, 2017-45, 2017-46  
2017-47, 2017-48, 2017-49, 2017-50, 2017-51, 2017-52

## **Speakers/Guests**

- None

## **Monthly Reports**

### **Lake of the Ozarks Developmental Center (LODC) Marilyn Martin**

LODC did not have a representative present.

### **Children's Learning Center (CLC) Susan Daniels**

Numbers were down for the month of August. There are a few part time openings. Busy promoting 2 upcoming events, the Lip Sync will be Friday, October 27<sup>th</sup> and The Frosty Float will be Sunday, December 3 and Sunday, December 10<sup>th</sup>. CLC will be one of the recipients of The Pumpkin Chunkin Palooza funds.

### **Lake Area Industries (LAI) Natalie Couch**

August was an uneventful month but ended net income was a little skewed at \$21,000. LAI busy with new products assembling sleds for Laker, took in 2 small loads of foam, a little work from Slumberland, and some cardboard was picked up. Grant is being written for funding to purchase a couple new trailers. Shredding is busy having almost a full load of recycles to send out. Garden Center sales are not as high this season but partnering with the hospital on mums. Participating in Pumpkin Chunkin Palooza and will be selling mums. CCDDR/LAI joint committee meeting will be Thursday, September 21<sup>st</sup>.

## **Old Business for Discussion**

- TCM Contract Negotiations

State has extended for a year but an amendment to the contract is being negotiated.

## **New Business for Discussion**

- None

## **August Support Coordination Report**

At August end, the agency had 324 clients; however, eligibilities are coming in, but there are current clients relocating to other counties. One support coordinator resigned in September but the position will be filled on September 25<sup>th</sup>. The new Support Coordinator is experienced in many aspects and has knowledge and experience in the IEP process.

Chris Bothwell had a question regarding how the event reporting system worked. Myrna and Ed explained the event reporting system.

## **August CARF Reports**

Staff is working hard on CARF survey to get infrastructures up to standards. Policies, plans, and procedures are being or have already been revised, and additional amended or new policies will be introduced to the Board at the October meeting for approval.

## **August Employment Report**

A couple of CCDDR clients lost jobs at Tan-Tar-A's end of season but one found a new job on his own.

## **August Agency Economic Report**

Grant/tax side, and some POS agreements were below budget in first quarter but exceeded budget in 2<sup>nd</sup> and 3<sup>rd</sup> quarters.

Motion by Jim Powell, second Chris Bothwell, to approve all reports as presented.

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey,  
Jim Powell

NO: None

## **July 2017 Credit Card Statement**

No Questions and a vote not necessary.



**Discussion & Conclusion of Resolutions:**

**Resolution 2017-33: Revised 2017 Budget**

Income was adjusted for TCM to reflect what was done this year as far as non-Medicaid, which averages out for first eight months and projects what it would look like at end of year. The budget variance is about \$16,000 to \$18,000 below budget. Budget is in line for TCM Medicaid claims. A reduction may occur during training period of new support coordinator as training time is not usually billable. With experienced staff, budgetary expectations would probably have been met; however budget was adjusted to reflect the training of the new support coordinator. A different type of formatting will be used on the creation of the 2018 income budget, which will be introduced at the November meeting. The 2018 budget will be based on an assumption of the allocation formula and not based on the percentage of Medicaid eligible individuals. The baseline will be a statistical average over the last 3 years, focusing on average units provided per person. Health insurance will increase in 2018. Not a great deal of adjustments were made on either side of budget.

Motion by Shana Weber, second Chris Bothwell, to approve Resolution 2017-33 as presented.

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey,  
Jim Powell

NO: None

- Resolution 2017-34: Approval of Rescinded & Replaced Policy #11**
- Resolution 2017-35: Approval of Amended Policy #12**
- Resolution 2017-36: Approval of Amended Policy #13**
- Resolution 2017-37: Approval of Amended Policy #15**
- Resolution 2017-38: Approval of Amended Policy #16**
- Resolution 2017-39: Approval of Amended Policy #22**
- Resolution 2017-40: Approval of Amended Policy #23**
- Resolution 2017-41: Approval of Amended Policy #24**
- Resolution 2017-42: Approval of Amended Policy #26**
- Resolution 2017-43: Approval of Amended Policy #33**
- Resolution 2017-44: Approval of Amended Policy #34**
- Resolution 2017-45: Approval of Amended Policy #39**
- Resolution 2017-46: Approval of Amended Policy #32**
- Resolution 2017-47: Approval of Amended Policy #36**
- Resolution 2017-48: Approval of Amended Policy #37**
- Resolution 2017-49: Approval of Amended Technology Plan**
- Resolution 2017-50: Approval of Amended Risk Management Plan**
- Resolution 2017-51: Approval of Amended Agency Disaster Plan**
- Resolution 2017-52: Approval of Amended Cultural Competency & Diversity Plan**

Motion by Chris Bothwell, second Jim Powell, to approve resolutions 34 thru 52 as presented:

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey,

Jim Powell

NO: None

**Adjournment:**

Motion by Chris Bothwell, second Shana Weber, to adjourn meeting.

AYE: Shana Weber, Chris Bothwell,  
Lisa Jackson, Brian Willey,  
Jim Powell

NO: None

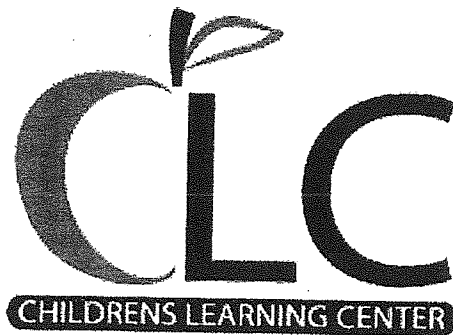
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Board Chairman

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Secretary

# **CLC Monthly Report**



**SB40/CCDDR Funding Request  
for  
OCTOBER 2017**

**Utilizing SEPTEMBER 2017 Records**

# **FINANCIAL REPORTS**

**INCLUDING:**

- **STATEMENT OF ACTIVITY, BY CLASS—LAST MONTH & YTD (P&L)**
- **STATEMENT OF CASH FLOWS—LAST MONTH & YTD**
- **STATEMENT OF FINANCIAL POSITION (BALANCE SHEET)**
- **ACCOUNTS RECEIVABLE-AGING**
- **ACCOUNTS PAYABLE**

**CHILDREN'S LEARNING CENTER**  
**Statement of Activity**  
September 2017

	First Steps	Step Ahead	Not Specified	TOTAL
Revenue				0.00
40000 INCOME				0.00
41000 Contributions & Grants				12,759.26
41200 Camden County SB40	1,287.00	11,472.26		12,759.26
Total 41000 Contributions & Grants	\$ 1,287.00	\$ 11,472.26	\$ 0.00	\$ 12,759.26
42000 Program Services				0.00
Total 42100 First Steps	\$ 6,993.90	\$ 4,224.00	\$ 0.00	\$ 11,217.90
Total 42000 Program Services	\$ 6,993.90	\$ 4,224.00	\$ 0.00	\$ 11,217.90
43000 Tuition				0.00
43100 Dining				0.00
43120 Lunch		230.00		230.00
43130 Snack		45.00		45.00
Total 43100 Dining	\$ 0.00	\$ 275.00	\$ 0.00	\$ 275.00
43500 Tuition		2,766.60		2,766.60
43505 Subsidy Tuition		559.26		559.26
Total 43500 Tuition	\$ 0.00	\$ 3,325.86	\$ 0.00	\$ 3,325.86
Total 43000 Tuition	\$ 0.00	\$ 3,600.86	\$ 0.00	\$ 3,600.86
45000 Other Revenue				0.00
45200 Fundraising Income		39.86		39.86
45270 Frosty Float Fundraiser		200.00		200.00
45285 Lip Sync Battle		340.00		340.00
Total 45200 Fundraising Income	\$ 0.00	\$ 579.86	\$ 0.00	\$ 579.86
45300 Miscellaneous Revenue		10.00		10.00
45310 Donations		1,296.29		1,296.29
Total 45300 Miscellaneous Revenue	\$ 0.00	\$ 1,306.29	\$ 0.00	\$ 1,306.29
Total 45000 Other Revenue	\$ 0.00	\$ 1,886.15	\$ 0.00	\$ 1,886.15
Total 40000 INCOME	\$ 8,280.90	\$ 21,183.27	\$ 0.00	\$ 29,464.17
Total Revenue	\$ 8,280.90	\$ 21,183.27	\$ 0.00	\$ 29,464.17
Gross Profit	\$ 8,280.90	\$ 21,183.27	\$ 0.00	\$ 29,464.17
Expenditures				0.00
50000 EXPENDITURES				0.00
51000 Payroll Expenditures				16,692.74
Total 51100 Employee Salaries	\$ 0.00	\$ 16,692.74	\$ 0.00	\$ 16,692.74
Total 51500 Employee Taxes	\$ 0.00	\$ 1,355.21	\$ 0.00	\$ 1,355.21
Total 51600 Health Insurance	\$ 0.00	\$ 954.68	\$ 0.00	\$ 954.68
51950 Employee Garnishments		42.10		42.10
Total 51000 Payroll Expenditures	\$ 0.00	\$ 19,044.73	\$ 0.00	\$ 19,044.73
52000 Advertising/Promotional		184.68		184.68
54000 Fundraising/Grants				0.00
54200 Summer Night Glow 5K		24.87		24.87
54400 Scholastic, Inc.		20.00		20.00
54600 Frosty Float Fundraiser		25.00		25.00

Total 54000 Fundraising/Grants	\$	0.00	\$	69.87	\$	0.00	\$	69.87
57000 Office/General Administrative Expenditures								0.00
57100 Accounting Fees								0.00
57150 Online Accounting Software Service				55.50				55.50
Total 57100 Accounting Fees	\$	0.00	\$	55.50	\$	0.00	\$	55.50
57160 QuickBooks Payments Fees		15.00		35.00				50.00
57200 Bank Charges								0.00
57220 Stop Payment/Return Check Fees				-0.05				-0.05
Total 57200 Bank Charges	\$	0.00	\$	0.05	\$	0.00	\$	0.05
57400 Child Management Software				35.00				35.00
57600 License/Accreditation/Permit Fees				560.90				560.90
57900 Seminars/Training				100.00				100.00
57960 Janitorial/Custodial				400.00				400.00
Total 57000 Office/General Administrative Expenditures	\$	15.00	\$	1,186.35	\$	0.00	\$	1,201.35
58000 Operating Supplies				166.16				166.16
58100 Consumables				69.34				69.34
58200 Dining				1,219.88				1,219.88
58400 Sanitizing				204.23				204.23
Total 58000 Operating Supplies	\$	0.00	\$	1,659.61	\$	0.00	\$	1,659.61
59000 Program Service Fees								0.00
Total 59100 First Steps	\$	9,541.91	\$	0.00	\$	0.00	\$	9,541.91
Total 59000 Program Service Fees	\$	9,541.91	\$	0.00	\$	0.00	\$	9,541.91
61000 Repair & Maintenance				19.94				19.94
62000 Safety & Security		18.00		10.48				28.48
63000 Utilities								0.00
63100 Electric		110.68		258.24				368.92
63200 Internet		18.00		41.99				59.99
63300 Telephone		38.55		89.95				128.50
63400 Trash Service				72.74				72.74
63500 Water Softener				24.00				24.00
Total 63000 Utilities	\$	167.23	\$	486.92	\$	0.00	\$	654.15
Total 50000 EXPENDITURES	\$	9,742.14	\$	22,662.58	\$	0.00	\$	32,404.72
Total Expenditures	\$	9,742.14	\$	22,662.58	\$	0.00	\$	32,404.72
Net Operating Revenue	-\$	1,461.24	-\$	1,479.31	\$	0.00	-\$	2,940.55
Net Revenue	-\$	1,461.24	-\$	1,479.31	\$	0.00	-\$	2,940.55

**CHILDREN'S LEARNING CENTER**  
**Statement of Activity**  
 January - September, 2017

	First Steps	Step Ahead	Not Specified	TOTAL
Revenue				0.00
40000 INCOME				0.00
41000 Contributions & Grants				0.00
41100 CACFP		7,503.10		7,503.10
41200 Camden County SB40	20,329.00	79,527.50		99,856.50
41600 Misc. Grant Revenue		3,462.44		3,462.44
Total 41000 Contributions & Grants	\$ 20,329.00	\$ 90,493.04	\$ 0.00	\$ 110,822.04
42000 Program Services				0.00
Total 42100 First Steps	\$ 88,186.75	\$ 32,971.00	\$ 0.00	\$ 121,157.75
Total 42000 Program Services	\$ 88,186.75	\$ 32,971.00	\$ 0.00	\$ 121,157.75
43000 Tuition				0.00
43100 Dining				0.00
43110 Birthday		10.00		10.00
43120 Lunch		1,715.00		1,715.00
43130 Snack		345.00		345.00
Total 43100 Dining	\$ 0.00	\$ 2,070.00	\$ 0.00	\$ 2,070.00
43200 Enrollment Fees		450.00		450.00
43600 Tuition		23,599.80		23,599.80
43505 Subsidy Tuition		13,349.15		13,349.15
Total 43500 Tuition	\$ 0.00	\$ 36,948.95	\$ 0.00	\$ 36,948.95
Total 43000 Tuition	\$ 0.00	\$ 39,468.95	\$ 0.00	\$ 39,468.95
45000 Other Revenue		214.15		214.15
45200 Fundraising Income		39.86		39.86
45220 Summer Night Glow 5K		11,947.33		11,947.33
45221 Raffle-Summer Night Glow		365.00		365.00
Total 45220 Summer Night Glow 5K	\$ 0.00	\$ 12,312.33	\$ 0.00	\$ 12,312.33
45240 Scholastic, Inc.		36.00		36.00
45270 Frosty Float Fundraiser		2,500.00		2,500.00
45280 Pizza For A Purpose		3,643.27		3,643.27
45285 Lip Sync Battle		840.00		840.00
Total 45200 Fundraising Income	\$ 0.00	\$ 19,371.46	\$ 0.00	\$ 19,371.46
45300 Miscellaneous Revenue		89.00		89.00
45310 Donations		5,255.34		5,255.34
45312 Community Rewards		620.77		620.77
45350 WetSteps		1,793.00		1,793.00
Total 45310 Donations	\$ 0.00	\$ 7,669.11	\$ 0.00	\$ 7,669.11
Total 45300 Miscellaneous Revenue	\$ 0.00	\$ 7,758.11	\$ 0.00	\$ 7,758.11
Total 45000 Other Revenue	\$ 0.00	\$ 27,343.72	\$ 0.00	\$ 27,343.72
Total 40000 INCOME	\$ 108,515.75	\$ 190,276.71	\$ 0.00	\$ 298,792.46
Total Revenue	\$ 108,515.75	\$ 190,276.71	\$ 0.00	\$ 298,792.46
Gross Profit	\$ 108,515.75	\$ 190,276.71	\$ 0.00	\$ 298,792.46
Expenditures				0.00
50000 EXPENDITURES				0.00
51000 Payroll Expenditures				0.00
Total 51100 Employee Salaries	\$ 0.00	\$ 142,675.65	\$ 0.00	\$ 142,675.65
Total 51500 Employee Taxes	\$ 0.00	\$ 13,218.92	\$ 0.00	\$ 13,218.92
Total 51600 Health Insurance	\$ 131.06	\$ 8,660.33	\$ 0.00	\$ 8,791.39
51800 Payroll Bank/Electronic Transaction Fees		-11.00		-11.00
51900 Workermans Comp Insurance		2,564.00		2,564.00
51950 Employee Garnishments		105.25		105.25
Total 51000 Payroll Expenditures	\$ 131.06	\$ 167,213.15	\$ 0.00	\$ 167,344.21
52000 Advertising/Promotional		958.19		958.19
53000 Equipment		3,107.22		3,107.22
54000 Fundraising/Grants		9.85		9.85
54200 Summer Night Glow 5K		4,002.42		4,002.42



54400 Scholastic, Inc.		56.00		56.00
54600 Frosty Float Fundraiser		291.80		291.80
54700 Pizza For A Purpose		137.81		137.81
54800 Lip Sync Battle Fundraiser		372.38		372.38
Total 54000 Fundraising/Grants	\$	0.00	\$ 4,870.26	\$ 0.00 \$ 4,870.26
55000 Insurance				0.00
55100 Brokerage/Other Fees		66.00		66.00
55200 Commercial General Liability		632.00		632.00
55300 Commercial Property		512.00		512.00
55400 Director's & Officers		478.00		478.00
55500 Hired & Non-Owned Auto		52.00		52.00
55600 Professional Liability		933.00		933.00
55700 Crime Policy		533.00		533.00
Total 55000 Insurance	\$	0.00	\$ 3,206.00	\$ 0.00 \$ 3,206.00
56000 Office Expenditures				0.00
56100 Copy Machine	1,051.81	3,004.26		4,056.07
56200 Miscellaneous		196.00		196.00
56300 Office Supplies		1,819.70		1,819.70
56400 Postage & Delivery	19.20	231.60		250.80
Total 56000 Office Expenditures	\$	1,071.01	\$ 5,251.56	\$ 0.00 \$ 6,322.57
57000 Office/General Administrative Expenditures				0.00
57100 Accounting Fees		2,000.00		2,000.00
57150 Online Accounting Software Service		585.40		585.40
Total 57100 Accounting Fees	\$	0.00	\$ 2,585.40	\$ 0.00 \$ 2,585.40
57160 QuickBooks Payments Fees	101.94	237.76		339.70
57200 Bank Charges				0.00
57220 Stop Payment/Return Check Fees		-0.05		-0.05
Total 57200 Bank Charges	\$	0.00	\$ 0.05	\$ 0.00 -\$ 0.05
57400 Child Management Software		315.00		315.00
57600 License/Accreditation/Permit Fees		2,684.95		2,684.95
57900 Seminars/Training		290.00		290.00
57960 Janitorial/Custodial		3,883.59		3,883.59
Total 57000 Office/General Administrative Expenditures	\$	101.94	\$ 9,996.65	\$ 0.00 \$ 10,098.59
58000 Operating Supplies		1,885.88		1,885.88
58100 Consumables		3,094.80		3,094.80
58200 Dining		8,213.04		8,213.04
58400 Sanitizing		552.32		552.32
Total 58000 Operating Supplies	\$	0.00	\$ 13,746.04	\$ 0.00 \$ 13,746.04
59000 Program Service Fees				0.00
Total 59100 First Steps	\$	85,657.31	\$ 0.00	\$ 0.00 \$ 85,657.31
Total 59000 Program Service Fees	\$	85,657.31	\$ 0.00	\$ 0.00 \$ 85,657.31
61000 Repair & Maintenance		1,044.30		1,044.30
62000 Safety & Security	63.00	303.74		366.74
63000 Utilities				0.00
63100 Electric	759.78	2,444.78		3,204.56
63200 Internet	162.00	377.91		539.91
63300 Telephone	341.55	796.95		1,138.50
63400 Trash Service		363.70		363.70
63500 Water Softener		192.00		192.00
Total 63000 Utilities	\$	1,263.33	\$ 4,178.34	\$ 0.00 \$ 5,438.67
65000 Other Expenditures				0.00
65100 Miscellaneous Expenditures		0.00		0.00
Total 65000 Other Expenditures	\$	0.00	\$ 0.00	\$ 0.00 \$ 0.00
Total 60000 EXPENDITURES	\$	88,287.65	\$ 213,872.45	\$ 0.00 \$ 302,160.10
Total Expenditures	\$	88,287.65	\$ 213,872.45	\$ 0.00 \$ 302,160.10
Net Operating Revenue	\$	20,228.10	-\$ 23,595.74	\$ 0.00 -\$ 3,367.64
Net Revenue	\$	20,228.10	-\$ 23,595.74	\$ 0.00 -\$ 3,367.64

**CHILDREN'S LEARNING CENTER**  
**Statement of Cash Flows**  
September 2017

	First Steps	Step Ahead	Not Specified	TOTAL
<b>OPERATING ACTIVITIES</b>				
Net Revenue	-1,461.24	-1,479.31		-2,940.55
Adjustments to reconcile Net Revenue to Net Cash provided by operations:				0.00
Accounts Receivable (A/R)			13.40	13.40
Accounts Payable (A/P)			-534.71	-534.71
21000 CBOLO MasterCard -8027		-2,154.82	1,137.48	-1,017.34
21200 Kroger-DS1634 CLC			1,205.58	1,205.58
22100 Payroll Liabilities:Anthem			73.06	73.06
22200 Payroll Liabilities:Childcare Tuition			150.00	150.00
22300 Payroll Liabilities:Federal Taxes (941/944)			25.46	25.46
22400 Payroll Liabilities:MO Income Tax			-2.00	-2.00
22500 Payroll Liabilities:MO Unemployment Tax			89.53	89.53
Direct Deposit Payable			-231.81	-231.81
Payroll Liabilities:Health Care (United HealthCare)			0.00	0.00
Payroll Liabilities:US Department of Education			42.10	42.10
Total Adjustments to reconcile Net Revenue to Net Cash provided by operations:	\$ 0.00	-\$ 2,154.82	\$ 1,968.09	-\$ 186.73
Net cash provided by operating activities	-\$ 1,461.24	-\$ 3,634.13	\$ 1,968.09	-\$ 3,127.28
Net cash increase for period	-\$ 1,461.24	-\$ 3,634.13	\$ 1,968.09	-\$ 3,127.28
Cash at beginning of period			32,923.49	32,923.49
Cash at end of period	-\$ 1,461.24	-\$ 3,634.13	\$ 34,891.58	\$ 29,796.21

**CHILDREN'S LEARNING CENTER**  
**Statement of Cash Flows**  
January - September, 2017

	First Steps	Step Ahead	Not Specified	TOTAL
<b>OPERATING ACTIVITIES</b>				
Net Revenue	20,228.10	-23,595.74	0.00	-3,367.64
Adjustments to reconcile Net Revenue to Net Cash provided by operations:				0.00
Accounts Receivable (A/R)			-1,220.55	-1,220.55
Accounts Payable (A/P)			-24.00	-24.00
21000 CBOLO MasterCard -8027		-9,163.19	8,452.35	-710.84
21200 Kroger-DS1634 CLC		-9,634.47	10,528.41	891.94
22100 Payroll Liabilities:Anthem			328.77	328.77
22200 Payroll Liabilities:Childcare Tuition			990.00	990.00
22300 Payroll Liabilities:Federal Taxes (941/944)			25.46	25.46
22400 Payroll Liabilities:MO Income Tax			59.00	59.00
22500 Payroll Liabilities:MO Unemployment Tax			-16.75	-16.75
Direct Deposit Payable			-688.70	-688.70
Payroll Liabilities:Health Care (United HealthCare)			172.50	172.50
Payroll Liabilities:US Department of Education			126.30	126.30
Total Adjustments to reconcile Net Revenue to Net Cash provided by operations:	\$ 0.00	-\$ 18,797.66	\$ 18,730.79	-\$ 66.87
Net cash provided by operating activities	\$ 20,228.10	-\$ 42,393.40	\$ 18,730.79	-\$ 3,434.51
Net cash increase for period	\$ 20,228.10	-\$ 42,393.40	\$ 18,730.79	-\$ 3,434.51
Cash at beginning of period			33,230.72	33,230.72
Cash at end of period	\$ 20,228.10	-\$ 42,393.40	\$ 51,961.51	\$ 29,796.21

**CLC AGENCY  
PROGRESS  
REPORT  
(Step Ahead/First  
Steps)**

**CHILDREN'S LEARNING CENTER**  
AGENCY UPDATE/PROGRESS REPORT  
SEPTEMBER 2017

○ **CHILD COUNT/ATTENDANCE**

Step Ahead currently has 23 children enrolled  
13 of the 23 with special needs/dd (5 one-on-ones)  
(Camden =25 Miller = 1)

○ **COMMUNITY EVENTS**

**Attended:**

9/7 - CLC Board Meeting  
9/18 - SB40 Board Meeting  
9/19 - LA Chamber Social / Ozark Distillery  
9/21 - Guest Speaker at Kiwani's (Noon @ Hyvee)  
9/22 - Spoke on 92.7 Radio  
9/26 - Spoke to BNI Lake of the Ozarks Business Builders (11:30)  
9/27 - Attended Fundraising Institute  
9/30 - Pumpkin Chunkin Palooza (11-6)

**Current / Upcoming:**

10/4 - Family Forum  
10/12 & 20 - CLC Student Photos  
10/13 - Field Trip To Mecca Farms  
10.18 - CADV Brunch  
10/24 & 26 - CLC Parent Teacher Conferences  
10/26 - Lake Area Chamber - Healthcare Coverage  
10/27 - CLC Lip Sync Battle 7pm  
12/3 & 12/10 - Frosty Float (Tentative???)

○ **GENERAL PROGRAM NEWS**

\* Received \$1,000 from Kiwanis

○ **FUNDRAISING/GRANTS**

Lip Sync Battle  
Frosty Float

# FROSTY FLOAT



a fundraiser for  
**Children's Learning Center**

*Please jump aboard the Frosty Float as we go on a magical journey cruising the Lake for some holiday fun! Take a boat ride on the Celebration Cruise boat, take part in children's activities, face painting, enjoy the cash bar, listen to Christmas music and of course, Santa will make a special appearance giving all of our little guests a special gift.*



in collaboration with



**CELEBRATION  
CRUISES**

## CRUISE WITH US ON DECEMBER 3RD OR 10TH

**DOUGHNUTS  
WITH SANTA**

**10:00 AM**

**COOKIES  
WITH SANTA**

**1:30 PM**

**COOKIES  
WITH SANTA**

**5:00 PM**

Tickets are \$25/each  
The cruise is approximately 1.5 hours.

For more information, call 573.346.0660 or visit our Facebook Event Page.  
For tickets, call 573.480.3212 or purchase online at [cruiselakeoftheoarks.com](http://cruiselakeoftheoarks.com).

All funds go towards providing services to young children with special needs and developmental delays.

# **LAI Monthly Report**



## **Monthly Financial Reports**

**Lake Area Industries, Inc.**

**September 30, 2017**



**Lake Area Industries, Inc.**  
**Balance Sheet Comparison**  
As of September 30, 2017

	As of Sep 30, 2017	As of Sep 30, 2016 (PY)
<b>ASSETS</b>		
<b>Current Assets</b>		
Total Bank Accounts	\$88,963	\$17,449
Accounts Receivable		
ACCOUNTS RECEIVABLE	\$66,890	\$67,494
Total Accounts Receivable	\$66,890	\$67,494
Other Current Assets		
GIFTED GARDEN CASH	\$500	\$500
INVENTORY	\$11,133	\$48,331
PETTY CASH	\$150	\$220
THRIFT STORE CASH	\$0	\$240
Total Other Current Assets	\$11,783	\$49,291
Total Current Assets	\$167,636	\$134,233
<b>Fixed Assets</b>		
ACCUMULATED DEPRECIATION	(\$750,580)	(\$693,672)
AUTO AND TRUCK	\$217,090	\$217,090
BUILDING	\$366,571	\$356,718
FURN & FIX ORIGINAL VALUE	\$18,584	\$18,584
GH RETAIL STORE	\$16,505	\$16,505
GREENHOUSE EQUIPMENT	\$10,341	\$10,341
GREENHOUSE FACILITY	\$145,872	\$145,872
LAND	\$33,324	\$33,324
LAND IMPROVEMENT	\$25,502	\$25,502
MACHINERY & EQUIPMENT	\$206,905	\$204,210
OFFICE EQUIPMENT	\$11,563	\$13,988
SHREDDING EQUIPMENT	\$45,572	\$45,572
Total Fixed Assets	\$347,248	\$394,033
<b>Other Assets</b>		
CURRENT CAPITAL IMPROVEMENT	\$33,490	\$11,053
SALES TAX BOND	\$1,060	\$1,060
UTILITY DEPOSITS	\$845	\$845
Total Other Assets	\$35,395	\$12,958
<b>TOTAL ASSETS</b>	<b>\$550,279</b>	<b>\$541,224</b>
<b>LIABILITIES AND EQUITY</b>		
<b>Liabilities</b>		
<b>Current Liabilities</b>		
Accounts Payable	\$20,956	\$32,972
Total Accounts Payable	\$20,956	\$32,972
Total Credit Cards	\$1,041	\$3,572
Other Current Liabilities		
ACCRUED WAGES	\$7,023	\$0
AFLAC DEDUCTIONS PAYABLE	(\$31)	(\$11)
FIRST NATIONAL BANK CREDIT LINE-4096	\$86,310	\$86,310
Gift Certificate Payable	\$51	(\$695)
Missouri Department of Revenue Payable	\$65	\$0
SALES TAX PAYABLE	\$197	(\$1)
Total Other Current Liabilities	\$93,615	\$85,603
Total Current Liabilities	\$115,612	\$122,148
Total Liabilities	\$115,612	\$122,148
<b>Equity</b>		
Opening Balance Equity	\$524	
Unrestricted Net Assets	\$316,060	\$356,403
Net Income	\$118,083	\$62,673
Total Equity	\$434,667	\$419,076
<b>TOTAL LIABILITIES AND EQUITY</b>	<b>\$550,279</b>	<b>\$541,224</b>

**Lake Area Industries, Inc.**  
**Profit and Loss**  
**September 2017**

	Sep 2017	Jan - Sep, 2017 (YTD)
<b>Income</b>		
CONTRACT PACKAGING	\$29,498	\$243,504
FOAM RECYCLING	\$438	\$29,354
GREENHOUSE SALES	\$3,623	\$55,505
SECURE DOCUMENT SHREDDING	\$2,378	\$23,259
<b>Total Income</b>	<b>\$35,936</b>	<b>\$351,621</b>
<b>Cost of Goods Sold</b>		
Cost of Goods Sold	\$6,101	\$24,434
GG PLANTS & SUPPLIES		\$30,271
MANUFACTURING SUPPLIES		\$13
SHIPPING AND DELIVERY		\$2,722
WAGES-EMPLOYEES	\$19,331	\$179,912
<b>Total Cost of Goods Sold</b>	<b>\$25,432</b>	<b>\$237,352</b>
<b>Gross Profit</b>	<b>\$10,504</b>	<b>\$114,269</b>
<b>Expenses</b>		
ACCTG. & AUDIT FEES		\$9,336
ALL OTHER EXPENSES	\$1,507	\$13,357
CASH OVER/SHORT	\$0	\$107
EQUIP. PURCHASES & MAINTENANCE	\$1,624	\$45,437
INSURANCE	\$354	\$12,646
NON MANUFACTURING SUPPLIES		\$5,409
PAYROLL	\$22,265	\$201,530
PAYROLL EXP & BENEFITS	\$5,030	\$44,874
PROFESSIONAL SERVICES	\$2,701	\$23,955
SALES TAX		(\$71)
TRANSPORTATION EXPENSES	\$16	\$662
UTILITIES	\$1,510	\$16,130
<b>Total Expenses</b>	<b>\$35,006</b>	<b>\$373,373</b>
<b>Net Operating Income</b>	<b>(\$24,502)</b>	<b>(\$259,104)</b>
<b>Other Income</b>		
INTEREST INCOME	\$8	\$42
OTHER CONTRIBUTIONS	\$107	\$16,416
SB-40 REVENUE	\$24,590	\$218,831
STATE AID	\$15,613	\$141,899
<b>Total Other Income</b>	<b>\$40,317</b>	<b>\$377,188</b>
<b>Other Expenses</b>		
<b>Net Other Income</b>	<b>\$40,317</b>	<b>\$377,188</b>
<b>Net Income</b>	<b>\$15,815</b>	<b>\$118,083</b>

**Lake Area Industries, Inc.**  
**Statement of Cash Flows**  
September 2017

<b>OPERATING ACTIVITIES</b>	
Net Income	\$15,815
Adjustments to reconcile Net Income to Net Cash provided by operations:	
ACCOUNTS RECEIVABLE	\$6,348
INVENTORY:GG PLANT & SUPPLIES INVEN	\$2,343
INVENTORY:RAW MATERIAL INVENTORY	\$201
Accounts Payable	\$2,393
CBOLO CC - 5203 Lillie	(\$26)
CBOLO CC - 5229 Kevin	\$59
CBOLO CC - 5237 Natalie	\$105
AFLAC DEDUCTIONS PAYABLE	\$0
Gift Certificate Payable	\$362
SALES TAX PAYABLE	\$188
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	\$11,973
Net cash provided by operating activities	\$27,788
Net cash increase for period	\$27,788
Cash at beginning of period	\$61,175
Cash at end of period	\$88,963

**Lake Area Industries, Inc.**  
**A/P Aging Summary**  
As of September 30, 2017

	Current	1 - 30	31 - 60	61 - 90	91 and over	Total
<b>TOTAL</b>	\$2,902.64	\$6,811.68	\$1,515.19	\$9,735.00	-\$ 8.40	\$20,956.11

**Lake Area Industries, Inc.**  
**A/R Aging Summary**  
As of September 30, 2017

	Current	1 - 30	31 - 60	61 - 90	91 and over	Total
<b>TOTAL</b>	\$45,595.51	\$16,725.90	\$156.17	\$4,412.70	\$ 0.00	\$66,890.28

**Lake Area Industries, Inc.**  
**Statement of Cash Flows**  
January 1 - October 6, 2017

	Total
<b>OPERATING ACTIVITIES</b>	
Net Income	\$123,097
Adjustments to reconcile Net Income to Net Cash provided by operations:	
ACCOUNTS RECEIVABLE	(\$5,250)
GIFTED GARDEN CASH: DRAWER CASH - GG	(\$300)
GIFTED GARDEN CASH: SAFE CASH - GG	(\$200)
INVENTORY: GG PLANT & SUPPLIES INVEN	\$271
INVENTORY: RAW MATERIAL INVENTORY	(\$3,420)
PETTY CASH	(\$62)
Accounts Payable	\$5,520
CBOLO CC - 5203 Lillie	\$0
CBOLO CC - 5229 Kevin	\$0
CBOLO CC - 5237 Natalie	\$0
US BANK CC - 1669 (deleted)	(\$455)
US BANK CC - 1727 (deleted)	(\$849)
US BANK CC - 5017 (deleted)	\$4
AFLAC DEDUCTIONS PAYABLE	(\$31)
Gift Certificate Payable	\$51
Missouri Department of Revenue Payable	\$0
SALES TAX PAYABLE	(\$41)
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	(\$4,764)
Net cash provided by operating activities	\$118,334
<b>INVESTING ACTIVITIES</b>	
CURRENT CAPITAL IMPROVEMENT	(\$33,490)
Net cash provided by investing activities	(\$33,490)
<b>FINANCING ACTIVITIES</b>	
Opening Balance Equity	\$524
Net cash provided by financing activities	\$524
Net cash increase for period	\$85,368
Cash at beginning of period	\$8,459
Cash at end of period	\$93,827

# Support Coordination Report

September 2017

# Consumer Caseloads

- Number of Caseloads as of September 30<sup>th</sup>, 2017: 319
- Budgeted Number of Caseloads: 300
- Pending Number of New Intakes: 12
- Medicaid Eligibility: 85.58%

## Caseload Counts

Rachel Baskerville - 10

Cynthia Brown - 39

Jennifer Clemons - 37

Lori Cornwell - 37

Linda Gifford - 26

Sharla Jenks - 31

Ryan Johnson - 37

Dawn Evans - 38

Annie Meyer - 37

Nicole Whittle - 27

**CARF Report  
Medicaid Eligible  
Clients**

# Outcome Measurement Report



## TCM

[TCM: % of the time new consumers will be contacted by their Support Coordinator \(SC\) within 5 business days of their eligibility determination \(1\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	14	0	0	100.00 %
<b>Total</b>	14	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

[TCM: Planning meeting is held within 30 days of eligibility date \(2\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	11	1	0	91.67 %
<b>Total</b>	11	1	0	91.67 %
<b>Goal</b>				<b>100 %</b>

[TCM: % of all annual Medicaid Waiver plans and plans subject to the Regional Office Utilization Review \(UR\) will be submitted via fax and email at least 22 calendar days prior to the plan implementation date. \(3\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters: Is Waiver: Yes;

	Yes	No	NA	Percentage
Targeted Case Management	39	43	0	47.56 %
<b>Total</b>	39	43	0	47.56 %
<b>Goal</b>				<b>80 %</b>

[TCM: % of all annual non-waiver plans will be emailed to the Regional Office at least 15 calendar days prior to the plan implementation date \(4\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	26	25	0	50.98 %
<b>Total</b>	26	25	0	50.98 %
<b>Goal</b>				<b>80 %</b>



# Outcome Measurement Report



TCM: % of IP outcomes/action steps will be met (5)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	654	1907	0	25.54 %
<b>Total</b>	654	1907	0	25.54 %
<b>Goal</b>				<b>80 %</b>

TCM: % of Quarterly Reports met (6)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
Targeted Case Management	269	128	0	67.76 %
<b>Total</b>	269	128	0	67.76 %
<b>Goal</b>				<b>95 %</b>

TCM: % that shall have Outcomes implemented in their Individual Support Plan that encourage or support active participation in typical community events and activities (7)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	228	57	0	80.00 %
<b>Total</b>	228	57	0	80.00 %
<b>Goal</b>				<b>75 %</b>

TCM: % of time Billable (8)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Billable Hrs	Non-Billable Hrs	NA	Percentage
Targeted Case Management	8298	6356	0	56.63 %
<b>Total</b>	8298	6356	0	56.63 %
<b>Goal</b>				<b>70 %</b>

# Outcome Measurement Report



[Consumer Forms \(% of consumers will report being satisfied or very satisfied with the services provided by their SC, as indicated on the Consumer Survey. \(9\)\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
Targeted Case Management	126	0	4	100.00 %
<b>Total</b>	126	0	4	100.00 %
<b>Goal</b>				<b>90 %</b>

[Consumer Forms \(% of consumers or parent/guardians of consumers served shall indicate their SC is available when needed, as indicated on the Consumer Survey. \(10\)\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
Targeted Case Management	128	0	4	100.00 %
<b>Total</b>	128	0	4	100.00 %
<b>Goal</b>				<b>90 %</b>

[TCM: % of Individual Support Plans chosen for TCM Reviews conducted by RRO will not require remediation \(11\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management				
<b>Total</b>				
<b>Goal</b>				<b>80 %</b>

[TCM: % of consumers will be given the resources or education to formulate a personal plan for personal safety and risk reduction to better protect them from abuse, neglect or exploitation \(12\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	223	62	0	78.25 %
<b>Total</b>	223	62	0	78.25 %
<b>Goal</b>				<b>100 %</b>

# Outcome Measurement Report



[TCM: Will host at least one event per year designed to educate the community on abuse, neglect and financial exploitation of vulnerable persons; and how to report it. \(13\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	1	0	0	100.00 %
<b>Total</b>	1	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

[TCM: Provider demonstrates a commitment to community employment opportunities for persons served by making at least 15 referrals to Vocational Rehabilitation through the Outcomes and Action Steps included in the ISP. \(14\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
Targeted Case Management	77	0	0	100.00 %
<b>Total</b>	77	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

**CARF Report**  
**Medicaid Ineligible**  
**Clients**

# Outcome Measurement Report



## TCM

[TCM: % of the time new consumers will be contacted by their Support Coordinator \(SC\) within 5 business days of their eligibility determination \(1\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	7	0	0	100.00 %
<b>Total</b>	7	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

[TCM: Planning meeting is held within 30 days of eligibility date \(2\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	7	0	0	100.00 %
<b>Total</b>	7	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

[TCM: % of all annual Medicaid Waiver plans and plans subject to the Regional Office Utilization Review \(UR\) will be submitted via fax and email at least 22 calendar days prior to the plan implementation date. \(3\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters: Is Waiver: Yes;

	Yes	No	NA	Percentage
CCDDR	0	1	0	0.00 %
<b>Total</b>	0	1	0	0.00 %
<b>Goal</b>				<b>80 %</b>

[TCM: % of all annual non-waiver plans will be emailed to the Regional Office at least 15 calendar days prior to the plan implementation date \(4\)](#)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	13	5	0	72.22 %
<b>Total</b>	13	5	0	72.22 %
<b>Goal</b>				<b>80 %</b>

# Outcome Measurement Report



TCM: % of IP outcomes/action steps will be met (5)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	39	165	0	19.12 %
<b>Total</b>	39	165	0	19.12 %
<b>Goal</b>				<b>80 %</b>

TCM: % of Quarterly Reports met (6)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
CCDDR	42	7	0	85.71 %
<b>Total</b>	42	7	0	85.71 %
<b>Goal</b>				<b>95 %</b>

TCM: % that shall have Outcomes implemented in their Individual Support Plan that encourage or support active participation in typical community events and activities (7)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	24	15	0	61.54 %
<b>Total</b>	24	15	0	61.54 %
<b>Goal</b>				<b>75 %</b>

TCM: % of time Billable (8)

For Services: Case Closure, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement

For Events:

Parameters:

	Billable Hrs	Non-Billable Hrs	NA	Percentage
CCDDR	507	1279	0	28.39 %
<b>Total</b>	507	1279	0	28.39 %
<b>Goal</b>				<b>70 %</b>

# Outcome Measurement Report



[Consumer Forms \(% of consumers will report being satisfied or very satisfied with the services provided by their SC, as indicated on the Consumer Survey. \(9\)\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
CCDDR	12	0	0	100.00 %
<b>Total</b>	12	0	0	100.00 %
<b>Goal</b>				<b>90 %</b>

[Consumer Forms \(% of consumers or parent/guardians of consumers served shall indicate their SC is available when needed, as indicated on the Consumer Survey. \(10\)\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters: Age: 0 - 1000;

	Yes	No	NA	Percentage
CCDDR	12	0	0	100.00 %
<b>Total</b>	12	0	0	100.00 %
<b>Goal</b>				<b>90 %</b>

[TCM: % of Individual Support Plans chosen for TCM Reviews conducted by RRO will not require remediation \(11\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR				
<b>Total</b>				
<b>Goal</b>				<b>80 %</b>

[TCM: % of consumers will be given the resources or education to formulate a personal plan for personal safety and risk reduction to better protect them from abuse, neglect or exploitation \(12\)](#)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	23	16	0	58.97 %
<b>Total</b>	23	16	0	58.97 %
<b>Goal</b>				<b>100 %</b>

# Outcome Measurement Report



TCM: Will host at least one event per year designed to educate the community on abuse, neglect and financial exploitation of vulnerable persons; and how to report it. (13)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

Parameters:

	Yes	No	NA	Percentage
CCDDR	1	0	0	100.00 %
<b>Total</b>	1	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>

TCM: Provider demonstrates a commitment to community employment opportunities for persons served by making at least 15 referrals to Vocational Rehabilitation through the Outcomes and Action Steps included in the ISP. (14)

For Services: Case Closure, Case Transition/Transfer, Documentation, Linking Resources, Planning Supports, Quarterly Review of Progress on ISPs, Service Monitoring/Quality Enhancement, Transfer of case responsibility

For Events:

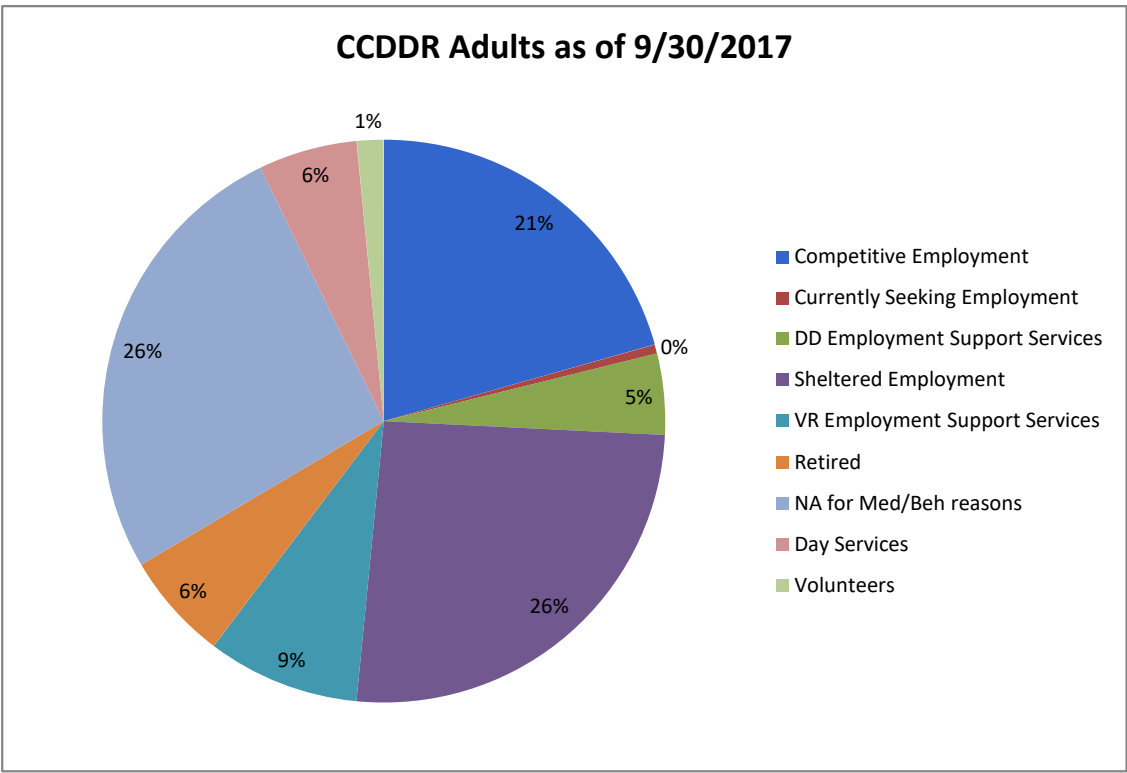
Parameters:

	Yes	No	NA	Percentage
CCDDR	9	0	0	100.00 %
<b>Total</b>	9	0	0	100.00 %
<b>Goal</b>				<b>100 %</b>



# **Employment Report**

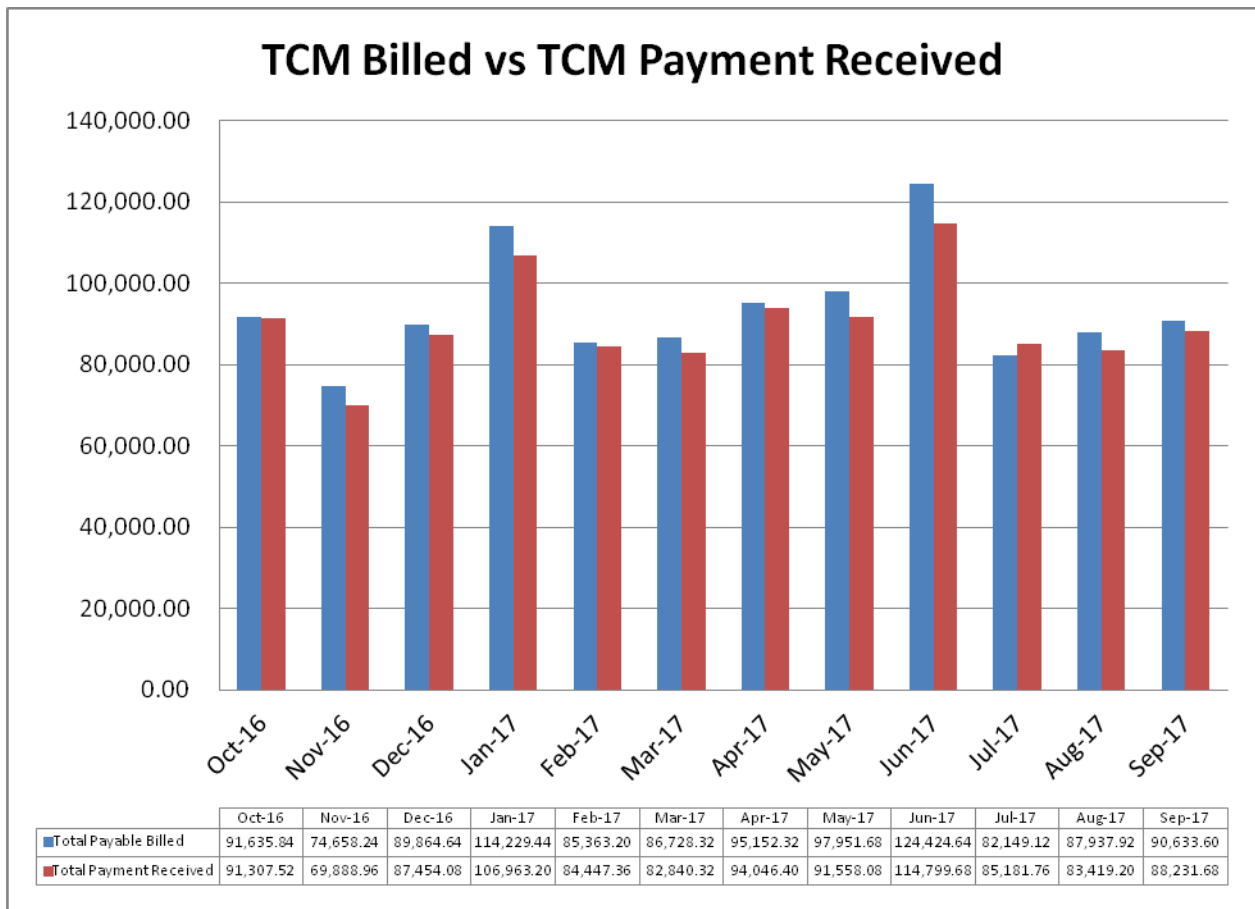
SC Name	Competitive Employment	Currently Seeking Employment	DD Employment Support Services	Sheltered Employment	VR Employment Support Services	Retired	NA for Med/Beh reasons	Day Services	Volunteers	Total Adults
<b>Agency Total</b>	40	1	9	50	17	12	51	11	3	194
Percent of Total	20.62%	0.52%	4.64%	25.77%	8.76%	6.19%	26.29%	5.67%	1.55%	100.00%
Baskerville	4	0	0	1	0	1	0	0	0	
Brown	5	0	0	4	4	1	2	1	0	
Lyon	4	0	0	8	2	2	7	0	0	
Cornwell	6	0	1	8	2	0	6	2	0	
Gifford	7	0	0	2	3	2	1	0	0	
Jenks	2	0	0	4	0	1	3	6	0	
Johnson	3	1	1	6	3	2	5	0	2	
Joseph	5	0	2	5	1	0	11	0	0	
Meyer	1	0	2	10	0	3	14	1	1	
Whittle	3	0	3	2	2	0	2	1	0	



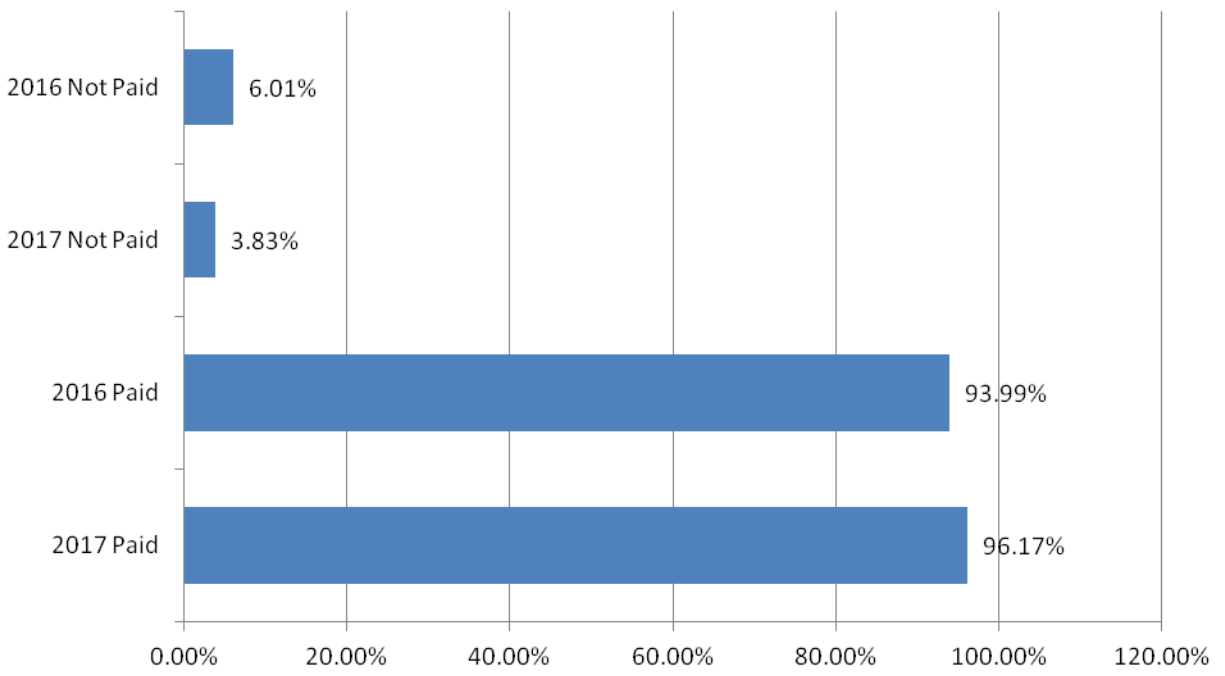
Agency Economic  
Report  
(Unaudited)

September 2017

## Targeted Case Management Income



### 2017 vs 2016 Percentage Comparison Medicaid Billed vs Medicaid Paid



## Budget vs. Actuals: FY2017 - FY17 P&L Departments

September 2017

	Grants			TCM		
	Actual	Budget	Variance	Actual	Budget	Variance
<b>Income</b>						
4000 SB 40 Tax Income	4,880	7,480	(2,600)			0
4500 Targeted Case Management Income			0	98,058	88,685	9,373
<b>Total Income</b>	<b>4,880</b>	<b>7,480</b>	<b>(2,600)</b>	<b>98,058</b>	<b>88,685</b>	<b>9,373</b>
<b>Gross Profit</b>	<b>4,880</b>	<b>7,480</b>	<b>(2,600)</b>	<b>98,058</b>	<b>88,685</b>	<b>9,373</b>
<b>Expenses</b>						
5000 Payroll & Benefits			0	77,857	79,019	(1,162)
5100 Repairs & Maintenance			0	40	485	(445)
5500 Contracted Business Services			0	4,869	6,458	(1,589)
5600 Presentations/Public Meetings			0	1,864	525	1,339
5700 Office Expenses			0	1,203	2,850	(1,647)
5800 Other General & Administrative			0	1,617	740	877
5900 Utilities			0	1,156	1,150	6
6100 Insurance			0	1,187	1,225	(38)
6500 Medicaid Match		0	0			0
6700 Partnership for Hope	3,500	4,931	(1,431)			0
6900 Targeted Case Management	9,340	10,138	(798)			0
7100 Housing Programs	9,329	10,700	(1,371)			0
7200 CLC	12,759	13,509	(750)			0
7300 Sheltered Employment Programs	22,188	22,400	(212)			0
7500 Community Employment Programs	95	1,050	(955)			0
7900 Special/Additional Needs	5,395	8,178	(2,783)			0
<b>Total Expenses</b>	<b>62,606</b>	<b>70,906</b>	<b>(8,300)</b>	<b>89,794</b>	<b>92,452</b>	<b>(2,658)</b>
<b>Net Operating Income</b>	<b>(57,726)</b>	<b>(63,426)</b>	<b>5,700</b>	<b>8,263</b>	<b>(3,767)</b>	<b>12,030</b>
<b>Other Expenses</b>						
8500 Depreciation			0	2,489	2,500	(11)
<b>Total Other Expenses</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2,489</b>	<b>2,500</b>	<b>(11)</b>
<b>Net Other Income</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(2,489)</b>	<b>(2,500)</b>	<b>11</b>
<b>Net Income</b>	<b>(57,726)</b>	<b>(63,426)</b>	<b>5,700</b>	<b>5,775</b>	<b>(6,267)</b>	<b>12,042</b>

### Budget Variance Report

Total Income: During September of 2017, Tax Receipts were lower than projected, and TCM Program income was higher than projected. CCDDR continues to monitor several individuals/guardians/families who have not yet submitted all information to re-certify annual Medicaid eligibility and several individuals/guardians/families who have not been submitting Medicaid spend-down invoices to CCDDR for payment, causing lapses in Medicaid coverage. CCDDR is working with families, individuals, and guardians to submit spend-down invoices to CCDDR immediately upon receipt and assist with Medicaid re-certification completion/submission.

Total Expenses: During September of 2017, overall Grants Programs are lower than budgeted expectations mainly because Housing Program expenses, Special/Additional Needs program expenses, and Partnership for Hope Match expenses were lower than projected. Overall TCM Program expenses were equivalent to budgeted expectations with minor variances in all categories.

# Budget vs. Actuals: FY2017 - FY17 P&L Departments

January - September, 2017

	Grants			TCM		
	Actual	Budget	Variance	Actual	Budget	Variance
<b>Income</b>						
<b>4000 SB 40 Tax Income</b>	915,083	909,235	5,848			0
<b>4500 Targeted Case Management Income</b>			0	936,738	913,374	23,364
<b>Total Income</b>	<b>915,083</b>	<b>909,235</b>	<b>5,848</b>	<b>936,738</b>	<b>913,374</b>	<b>23,364</b>
<b>Gross Profit</b>	<b>915,083</b>	<b>909,235</b>	<b>5,848</b>	<b>936,738</b>	<b>913,374</b>	<b>23,364</b>
<b>Expenses</b>						
<b>5000 Payroll &amp; Benefits</b>			0	727,894	742,562	(14,668)
<b>5100 Repairs &amp; Maintenance</b>			0	2,912	4,365	(1,453)
<b>5500 Contracted Business Services</b>			0	54,112	53,723	389
<b>5600 Presentations/Public Meetings</b>			0	3,977	4,725	(748)
<b>5700 Office Expenses</b>			0	19,180	25,250	(6,070)
<b>5800 Other General &amp; Administrative</b>	0		0	25,178	24,810	368
<b>5900 Utilities</b>			0	10,374	10,350	24
<b>6100 Insurance</b>			0	10,544	11,025	(481)
<b>6500 Medicaid Match</b>	7,340	7,071	269			0
<b>6700 Partnership for Hope</b>	27,953	30,983	(3,030)			0
<b>6900 Targeted Case Management</b>	150,912	151,704	(792)			0
<b>7100 Housing Programs</b>	82,457	86,400	(3,943)			0
<b>7200 CLC</b>	99,857	103,581	(3,725)			0
<b>7300 Sheltered Employment Programs</b>	226,620	236,223	(9,603)			0
<b>7500 Community Employment Programs</b>	4,067	9,450	(5,383)			0
<b>7600 Community Resources</b>	0		0			0
<b>7900 Special/Additional Needs</b>	57,044	70,352	(13,308)			0
<b>Total Expenses</b>	<b>656,250</b>	<b>695,764</b>	<b>(39,514)</b>	<b>854,172</b>	<b>876,810</b>	<b>(22,638)</b>
<b>Net Operating Income</b>	<b>258,833</b>	<b>213,471</b>	<b>45,362</b>	<b>82,566</b>	<b>36,564</b>	<b>46,002</b>
<b>Other Expenses</b>						
<b>8500 Depreciation</b>			0	22,320	22,500	(180)
<b>Total Other Expenses</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22,320</b>	<b>22,500</b>	<b>(180)</b>
<b>Net Other Income</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(22,320)</b>	<b>(22,500)</b>	<b>180</b>
<b>Net Income</b>	<b>258,833</b>	<b>213,471</b>	<b>45,362</b>	<b>60,245</b>	<b>14,064</b>	<b>46,181</b>

## Budget Variance Report

Total Income YTD: Tax Receipts are slightly higher than projections, and TCM Program income are higher than projections. Projections were modified in anticipation of lower TCM billings for the final quarter of 2017. CCDDR continues to monitor several individuals/guardians/families who have not yet submitted all information to re-certify annual Medicaid eligibility and several individuals/guardians/families who have not been submitting Medicaid spend-down invoices to CCDDR for payment, causing lapses in Medicaid coverage. CCDDR is working with families/individuals/guardians to submit spend-down invoices to CCDDR immediately upon receipt and assist with Medicaid re-certification completion/submission.

Total Expenses YTD: Overall Grants Programs are lower than budgeted. The full amount of the \$15,000 allocated to LAI's capital expense line item has not yet been realized and Special/Additional Needs expenses have not yet been realized, which is the largest portion of the overall variance. SDS program Personal

Assistance units paid by DMH and 100% reimbursed by CCDDR for clients who are not participating in a Waiver have yet to be billed to CCDDR by DMH. Community Employment supports have yet to be realized; however, new authorizations are expected. New Housing Vouchers have been issued to reduce the HVP Wait list, which will increase Housing expenses. YTD Partnership for Hope Waiver Match services and supports are lower than projected. Payroll and Office Expenses have been less than budgeted in the TCM Program, which accounts for the largest portion of the variance.

## Balance Sheet

As of September 30, 2017

	Grants	TCM
<b>ASSETS</b>		
<b>Current Assets</b>		
<b>Bank Accounts</b>		
<b>1000 Bank Accounts</b>		
<b>1005 Grant Bank Accounts</b>		
1010 Grant Account (County Tax Funds) - First Nat'l Bank	15,280	0
1015 Grant Reserve Account (County Tax Funds) - Central Bank	229	
1020 Grant Certificate of Deposit (County Tax Funds)	0	
1025 Grant Account (County Tax Funds) - Sullivan Bank	469,448	
1030 Grant Operating Reserves Account (Tax Funds) - Sullivan Bank	229,015	
<b>Total 1005 Grant Bank Accounts</b>	<b>713,973</b>	<b>0</b>
<b>1050 TCM Bank Accounts</b>		
1055 TCM Account (TCM Funds) - 1st Nat'l Bank	0	252,092
1060 TCM Certificate of Deposit (TCM Funds)		0
<b>Total 1050 TCM Bank Accounts</b>	<b>0</b>	<b>252,092</b>
<b>Total 1000 Bank Accounts</b>	<b>713,973</b>	<b>252,092</b>
<b>Total Bank Accounts</b>	<b>713,973</b>	<b>252,092</b>
<b>Accounts Receivable</b>		
<b>1200 Targeted Case Management Services</b>		
1210 Medicaid TCM Direct Service		81,423
1215 Non-Medicaid TCM Direct Service		21,565
<b>Total 1200 Targeted Case Management Services</b>	<b>0</b>	<b>102,989</b>
<b>1300 Property Taxes</b>		
1310 Property Tax Receivable	1,040,717	
1315 Allowance for Doubtful Accounts	(6,254)	
<b>Total 1300 Property Taxes</b>	<b>1,034,463</b>	<b>0</b>
1350 Allowance for Doubtful Accounts	0	
<b>Total Accounts Receivable</b>	<b>1,034,463</b>	<b>102,989</b>
<b>Other Current Assets</b>		
1389 TCM Claim Confirmations (A/R)	0	
1399 TCM Remittance Advices (In-Transit Payments)	0	0
<b>1400 Other Current Assets</b>		
1410 Other Deposits	0	
1430 Deferred Outflows Related to Pensions		41,868
1435 Net Pension Asset (Liability)		1,048
<b>Total 1400 Other Current Assets</b>	<b>0</b>	<b>42,916</b>
1450 Prepaid Expenses		0
1455 Prepaid-Insurance	0	8,727



Total 1450 Prepaid Expenses	0	8,727
Total Other Current Assets	0	51,643
Total Current Assets	1,748,437	406,724
Fixed Assets		
1500 Fixed Assets		
1510 100 Third Street Land		47,400
1511 Keystone Land		14,000
1520 100 Third Street Building		431,091
1521 Keystone		163,498
1525 Accumulated Depreciation - 100 Third Street		(132,619)
1526 Accumulated Depreciation - Keystone		(13,535)
1530 100 Third Street Remodeling		126,736
1531 Keystone Remodeling		46,069
1535 Acc Dep - Remodeling - 100 Third Street		(44,357)
1536 Acc Dep - Remodeling - Keystone		(1,747)
1540 Equipment		64,209
1545 Accumulated Depreciation - Equipment		(41,797)
1550 Vehicles		6,740
1555 Accumulated Depreciation - Vehicles		(6,740)
Total 1500 Fixed Assets	0	658,946
Total Fixed Assets	0	658,946
TOTAL ASSETS	1,748,437	1,065,670
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
1900 Accounts Payable	0	19,894
Total Accounts Payable	0	19,894
Other Current Liabilities		
2000 Current Liabilities		
2005 Accrued Accounts Payable	0	0
2006 DMH Payable	0	
2007 Non-Medicaid TCM Payable	21,565	
2010 Accrued Payroll Expense	0	0
2015 Accrued Compensated Absences	0	(1,017)
2025 Prepaid Services	0	
2030 Deposits	0	17
2050 Prepaid Tax Revenue	0	
2055 Deferred Inflows - Property Taxes	904,980	
2060 Payroll Tax Payable		0
2061 Federal W / H Tax Payable	0	65
2062 Social Security Tax Payable	0	15
2063 Medicare Tax Payable	0	(10)
2064 MO State W / H Tax Payable	0	1,949
Total 2060 Payroll Tax Payable	0	2,019
2070 Payroll Clearing		
2071 AFLAC Pre-tax W / H	0	986

2072 AFLAC Post-tax W / H	0	127
2073 Vision Insurance W / H	0	(109)
2074 Health Insurance W / H	0	28
2075 Dental Insurance W / H	0	(219)
2076 Savings W / H		0
2078 Misc W / H		349
2079 Other W / H		0
<b>Total 2070 Payroll Clearing</b>	<b>0</b>	<b>1,162</b>
<b>Total 2000 Current Liabilities</b>	<b>926,546</b>	<b>2,180</b>
<b>Total Other Current Liabilities</b>	<b>926,546</b>	<b>2,180</b>
<b>Total Current Liabilities</b>	<b>926,546</b>	<b>22,074</b>
<b>Total Liabilities</b>	<b>926,546</b>	<b>22,074</b>
<b>Equity</b>		
<b>3000 Restricted Grant Fund Balances</b>		
3001 Operational	0	
3005 Operational Reserves	228,411	
3010 Transportation	33,291	
3015 New Programs	0	
3030 Special Needs	2,207	
3040 Sheltered Workshop	159,688	
3045 Traditional Medicaid Match	790	
3050 Partnership for Hope Match	3,952	
3055 Building/Remodeling/Expansion	0	
3065 Legal	5,236	
3070 TCM	0	
3075 Community Resource	0	
<b>Total 3000 Restricted Grant Fund Balances</b>	<b>433,575</b>	<b>0</b>
<b>3500 Restricted TCM Fund Balances</b>		
3501 Operational		0
3505 Operational Reserves		200,000
3510 Transportation		0
3515 New Programs		0
3530 Special Needs		0
3550 Partnership for Hope Match		0
3555 Building/Remodeling/Expansion		51,729
3560 Sponsorships		0
3565 Legal		2,890
3599 Other		653,147
<b>Total 3500 Restricted TCM Fund Balances</b>	<b>0</b>	<b>907,765</b>
<b>3900 Unrestricted Fund Balances</b>	<b>0</b>	<b>0</b>
<b>3950 Prior Period Adjustment</b>	<b>0</b>	<b>0</b>
<b>3999 Clearing Account</b>	<b>91,801</b>	<b>113,268</b>
<b>Net Income</b>	<b>258,833</b>	<b>60,245</b>
<b>Total Equity</b>	<b>784,209</b>	<b>1,081,278</b>
<b>TOTAL LIABILITIES AND EQUITY</b>	<b>1,710,754</b>	<b>1,103,352</b>

# Statement of Cash Flows

September 2017

	Grants	TCM
<b>OPERATING ACTIVITIES</b>		
Net Income	(57,726)	5,775
Adjustments to reconcile Net Income to Net Cash provided by operations:		
1210 Targeted Case Management Services:Medicaid TCM Direct Service		1,996
1215 Targeted Case Management Services:Non-Medicaid TCM Direct Service		(9,340)
1455 Prepaid Expenses:Prepaid-Insurance		1,974
1525 Fixed Assets:Accumulated Depreciation - 100 Third Street		898
1526 Fixed Assets:Accumulated Depreciation - Keystone		341
1535 Fixed Assets:Acc Dep - Remodeling - 100 Third Street		528
1536 Fixed Assets:Acc Dep - Remodeling - Keystone		94
1545 Fixed Assets:Accumulated Depreciation - Equipment		627
1900 Accounts Payable	(6,108)	19,894
2007 Current Liabilities:Non-Medicaid TCM Payable	9,340	
2061 Current Liabilities:Payroll Tax Payable:Federal W / H Tax Payable		0
2062 Current Liabilities:Payroll Tax Payable:Social Security Tax Payable		0
2063 Current Liabilities:Payroll Tax Payable:Medicare Tax Payable		0
2064 Current Liabilities:Payroll Tax Payable:MO State W / H Tax Payable		64
2071 Current Liabilities:Payroll Clearing:AFLAC Pre-tax W / H		(55)
2072 Current Liabilities:Payroll Clearing:AFLAC Post-tax W / H		(12)
2073 Current Liabilities:Payroll Clearing:Vision Insurance W / H		(9)
2075 Current Liabilities:Payroll Clearing:Dental Insurance W / H		(36)
2076 Current Liabilities:Payroll Clearing:Savings W / H		0
2078 Current Liabilities:Payroll Clearing:Misc W / H		13
<b>Total Adjustments to reconcile Net Income to Net Cash provided by operations:</b>	<b>3,232</b>	<b>16,978</b>
<b>Net cash provided by operating activities</b>	<b>(54,494)</b>	<b>22,752</b>
<b>INVESTING ACTIVITIES</b>		
1531 Fixed Assets:Keystone Remodeling		(23,394)
<b>Net cash provided by investing activities</b>	<b>0</b>	<b>(23,394)</b>
<b>FINANCING ACTIVITIES</b>		
3555 Restricted TCM Fund Balances:Building/Remodeling/Expansion		(19,894)
3999 Clearing Account		19,894
<b>Net cash provided by financing activities</b>	<b>0</b>	<b>0</b>
<b>Net cash increase for period</b>	<b>(54,494)</b>	<b>(642)</b>
<b>Cash at beginning of period</b>	<b>768,467</b>	<b>252,734</b>
<b>Cash at end of period</b>	<b>713,973</b>	<b>252,092</b>

# Statement of Cash Flows

January - September, 2017

	Grants	TCM
<b>OPERATING ACTIVITIES</b>		
Net Income	258,833	60,245
Adjustments to reconcile Net Income to Net Cash provided by operations:		
1210 Targeted Case Management Services:Medicaid TCM Direct Service		(32,340)

1215 Targeted Case Management Services:Non-Medicaid TCM Direct Service		(21,565)
1455 Prepaid Expenses:Prepaid-Insurance		8,175
1525 Fixed Assets:Accumulated Depreciation - 100 Third Street		8,083
1526 Fixed Assets:Accumulated Depreciation - Keystone		3,066
1535 Fixed Assets:Acc Dep - Remodeling - 100 Third Street		4,753
1536 Fixed Assets:Acc Dep - Remodeling - Keystone		730
1545 Fixed Assets:Accumulated Depreciation - Equipment		5,689
1900 Accounts Payable	(678)	19,782
2005 Current Liabilities:Accrued Accounts Payable	0	
2007 Current Liabilities:Non-Medicaid TCM Payable	21,565	
2015 Current Liabilities:Accrued Compensated Absences		(1,017)
2061 Current Liabilities:Payroll Tax Payable:Federal W / H Tax Payable		96
2062 Current Liabilities:Payroll Tax Payable:Social Security Tax Payable		(73)
2063 Current Liabilities:Payroll Tax Payable:Medicare Tax Payable		3
2064 Current Liabilities:Payroll Tax Payable:MO State W / H Tax Payable		(387)
2071 Current Liabilities:Payroll Clearing:AFLAC Pre-tax W / H		(19)
2072 Current Liabilities:Payroll Clearing:AFLAC Post-tax W / H		30
2073 Current Liabilities:Payroll Clearing:Vision Insurance W / H		(20)
2075 Current Liabilities:Payroll Clearing:Dental Insurance W / H		(145)
2076 Current Liabilities:Payroll Clearing:Savings W / H		0
2078 Current Liabilities:Payroll Clearing:Misc W / H		(301)
<b>Total Adjustments to reconcile Net Income to Net Cash provided by operations:</b>	<b>20,887</b>	<b>(5,462)</b>
<b>Net cash provided by operating activities</b>	<b>279,720</b>	<b>54,784</b>
<b>INVESTING ACTIVITIES</b>		
1531 Fixed Assets:Keystone Remodeling		(28,120)
<b>Net cash provided by investing activities</b>	<b>0</b>	<b>(28,120)</b>
<b>FINANCING ACTIVITIES</b>		
3005 Restricted Grant Fund Balances:Operational Reserves	9,994	
3010 Restricted Grant Fund Balances:Transportation	13,332	
3030 Restricted Grant Fund Balances:Special Needs	4,019	
3040 Restricted Grant Fund Balances:Sheltered Workshop	159,688	
3045 Restricted Grant Fund Balances:Traditional Medicaid Match	(2,226)	
3050 Restricted Grant Fund Balances:Partnership for Hope Match	4,469	
3055 Restricted Grant Fund Balances:Building/Remodeling/Expansion	(42,165)	
3065 Restricted Grant Fund Balances:Legal	(4,790)	
3070 Restricted Grant Fund Balances:TCM	0	
3075 Restricted Grant Fund Balances:Community Resource	0	
3505 Restricted TCM Fund Balances:Operational Reserves		5,051
3555 Restricted TCM Fund Balances:Building/Remodeling/Expansion		30,092
3565 Restricted TCM Fund Balances:Legal		(5,200)
3900 Unrestricted Fund Balances	(330,026)	6,512
3999 Clearing Account	79,641	(41,655)
<b>Net cash provided by financing activities</b>	<b>(108,064)</b>	<b>(5,200)</b>
<b>Net cash increase for period</b>	<b>171,656</b>	<b>21,464</b>
<b>Cash at beginning of period</b>	<b>542,317</b>	<b>230,628</b>
<b>Cash at end of period</b>	<b>713,973</b>	<b>252,092</b>

# Check Detail

September 2017

1025 Grant Account (County Tax Funds) - Sullivan Bank

Date	Transaction Type	Num	Name	Amount
09/01/2017	Bill Payment (Check)	4231	Wright Services , LLC	(545.00)
09/06/2017	Bill Payment (Check)	4232	Ozark Inn & Suites	(199.00)
09/07/2017	Bill Payment (Check)	4233	OATS, Inc.	(6,108.00)
09/07/2017	Bill Payment (Check)	4234	MO HealthNet	(552.00)
09/08/2017	Bill Payment (Check)	4235	Childrens Learning Center	(12,759.26)
09/08/2017	Bill Payment (Check)	4236	Lake Area Industries	(16,526.69)
09/13/2017	Bill Payment (Check)	4237	Ozark Inn & Suites	(199.00)
09/14/2017	Bill Payment (Check)	4238	DMH Local Tax Matching Fund	(3,500.28)
09/14/2017	Bill Payment (Check)	4239	Missouri Ozarks Community Action, Inc.	(225.00)
09/14/2017	Bill Payment (Check)	4240	MO HealthNet	(35.00)
09/14/2017	Bill Payment (Check)	4241	MO HealthNet	(40.00)
09/14/2017	Bill Payment (Check)	4242	MO HealthNet	(40.00)
09/14/2017	Bill Payment (Check)	4243	MO HealthNet	(246.00)
09/14/2017	Bill Payment (Check)	4244	MO HealthNet	(261.00)
09/14/2017	Bill Payment (Check)	4245	MO HealthNet	(274.00)
09/14/2017	Bill Payment (Check)	4246	MO HealthNet	(381.00)
09/14/2017	Bill Payment (Check)	4247	MO HealthNet	(228.00)
09/19/2017	Bill Payment (Check)	4248	MO HealthNet	(2.00)
09/19/2017	Bill Payment (Check)	4249	Ozark Inn & Suites	(199.00)
09/21/2017	Bill Payment (Check)	4250	Brookview Apartments of Camdenton	(100.00)
09/21/2017	Bill Payment (Check)	4251	Camden Manors, Inc.	(100.00)
09/21/2017	Bill Payment (Check)	4252	Camdenton Apartments dba Lauren's Place	(100.00)
09/21/2017	Bill Payment (Check)	4253	Clifford Smith	(861.00)
09/21/2017	Bill Payment (Check)	4254	Darryll Euler	(202.00)
09/21/2017	Bill Payment (Check)	4255	David A Schlenfort	(689.00)
09/21/2017	Bill Payment (Check)	4256	Glen Donnach, LLC	(100.00)
09/21/2017	Bill Payment (Check)	4257	Hillcrest Inc. DBA Bridgeview Inc.	(650.00)
09/21/2017	Bill Payment (Check)	4258	JC Sutton LLC	(406.00)
09/21/2017	Bill Payment (Check)	4259	Maryann VanCleave	(652.00)
09/21/2017	Bill Payment (Check)	4260	Revelation Construction & Development, LLC	(306.00)
09/21/2017	Bill Payment (Check)	4261	Twenter Properties	(100.00)
09/21/2017	Bill Payment (Check)	4262	Tyler J Bishop	(100.00)
09/21/2017	Bill Payment (Check)	4263	Jacob and/or Lana Kentner	(1,316.00)
09/21/2017	Bill Payment (Check)	4264	MO HealthNet	(101.00)
09/21/2017	Bill Payment (Check)	4265	Bankcard Center	(121.75)
09/21/2017	Bill Payment (Check)	4266	Camden Manors, Inc.	(100.00)
09/21/2017	Bill Payment (Check)	4267	Camdenton Apartments dba Lauren's Place	(226.00)
09/21/2017	Bill Payment (Check)	4268	Revelation Construction & Development, LLC	(375.00)
09/21/2017	Bill Payment (Check)	4269	MO HealthNet	(178.00)
09/21/2017	Bill Payment (Check)	4270	Revelation Construction & Development, LLC	(687.00)
09/21/2017	Bill Payment (Check)	4271	Revelation Construction & Development, LLC	(693.00)

09/22/2017	Bill Payment (Check)	4272	MO HealthNet	(896.00)
09/22/2017	Bill Payment (Check)	4273	MO HealthNet	(4.00)
09/25/2017	Bill Payment (Check)	4274	MO HealthNet	(216.00)
09/25/2017	Bill Payment (Check)	4275	MO HealthNet	(511.00)
09/26/2017	Bill Payment (Check)	4276	Ozark Inn & Suites	(199.00)
09/28/2017	Bill Payment (Check)	4277	OATS, Inc.	(5,780.00)
09/29/2017	Bill Payment (Check)	4278	MO HealthNet	(642.00)
09/29/2017	Bill Payment (Check)	4279	MO HealthNet	(642.00)

**1055 TCM Account (TCM Funds) - 1st Nat'l Bank**

Date	Transaction Type	Num	Name	Amount
09/01/2017	Bill Payment (Check)	7668	All American Termite & Pest Control	(100.00)
09/01/2017	Bill Payment (Check)	7669	Ameren Missouri	(492.61)
09/01/2017	Bill Payment (Check)	7670	Connie L Baker	(38.03)
09/01/2017	Bill Payment (Check)	7671	G G Maha	(67.32)
09/01/2017	Bill Payment (Check)	7672	Linda Gifford	(156.71)
09/01/2017	Bill Payment (Check)	7673	Ryan Johnson	(53.33)
09/01/2017	Bill Payment (Check)	7674	Sharla Jenks	(77.42)
09/07/2017	Bill Payment (Check)	7675	Aflac	(869.66)
09/07/2017	Bill Payment (Check)	7676	AT&T	(82.32)
09/07/2017	Bill Payment (Check)	7677	Camden County PWSD #2	(49.33)
09/07/2017	Bill Payment (Check)	7678	Janine's Flowers	(57.00)
09/07/2017	Bill Payment (Check)	7679	Jennifer Lyon	(128.43)
09/07/2017	Bill Payment (Check)	7680	LaClede Electric Cooperative	(462.44)
09/07/2017	Bill Payment (Check)	7681	Lake Area Industries	(40.00)
09/07/2017	Bill Payment (Check)	7682	Linda Simms	(202.66)
09/07/2017	Bill Payment (Check)	7683	Rachel K Baskerville	(144.74)
09/07/2017	Bill Payment (Check)	7685	TruClean Innovations	(110.00)
09/07/2017	Bill Payment (Check)	7686	US Department of Education - Tracking # 1017780285	(335.40)
09/07/2017	Bill Payment (Check)	7687	G G Maha	(1,234.98)
09/07/2017	Bill Payment (Check)	7688	Linda Simms	(1,257.39)
09/08/2017	Expense	151979	Connie L Baker	(901.99)
09/08/2017	Expense	151980	Rachel K Baskerville	(1,098.99)
09/08/2017	Expense	151981	Myrna Blaine	(1,457.83)
09/08/2017	Expense	151982	Jeanna K Booth	(992.67)
09/08/2017	Expense	151983	Cynthia Brown	(1,216.50)
09/08/2017	Expense	151984	Lori Cornwell	(872.90)
09/08/2017	Expense	151985	Linda Gifford	(861.56)
09/08/2017	Expense	151986	Sharla Jenks	(893.99)
09/08/2017	Expense	151987	Ryan Johnson	(1,141.71)
09/08/2017	Expense	151988	Micah J Joseph	(1,135.12)
09/08/2017	Expense	151989	Jennifer Lyon	(998.59)
09/08/2017	Expense	151990	Annie Meyer	(1,090.71)
09/08/2017	Expense	151991	Edmond J Thomas	(1,156.80)
09/08/2017	Expense	151992	Eddie L Thomas	(2,373.06)
09/08/2017	Expense	151993	Marcie L. Vansyoc	(1,117.59)

09/08/2017	Expense	151994	Nicole M Whittle	(1,076.59)
09/08/2017	Expense	09/08/2017	Edward Jones	(100.00)
09/08/2017	Expense	09/08/2017	Internal Revenue Service	(6,565.99)
09/13/2017	Bill Payment (Check)	7689	Direct Service Works	(795.00)
09/13/2017	Bill Payment (Check)	7690	Ezard's, Inc.	(92.52)
09/13/2017	Bill Payment (Check)	7691	City Of Camdenton	(60.34)
09/13/2017	Bill Payment (Check)	7692	Lake Area Industries	(40.00)
09/13/2017	Bill Payment (Check)	7693	Missouri Dept of Revenue	(1,959.00)
09/13/2017	Bill Payment (Check)	7694	MSW Interactive Designs LLC	(405.00)
09/14/2017	Bill Payment (Check)	7695	Myrna Blaine	(137.01)
09/14/2017	Bill Payment (Check)	7696	Refills Ink	(54.99)
09/14/2017	Bill Payment (Check)	7697	TruClean Innovations	(55.00)
09/14/2017	Bill Payment (Check)	7698	KMB Technical Group, Inc.	(416.00)
09/22/2017	Expense	151997	Connie L Baker	(901.99)
09/22/2017	Expense	151998	Rachel K Baskerville	(1,243.36)
09/22/2017	Expense	151999	Myrna Blaine	(1,457.83)
09/22/2017	Expense	152000	Jeanna K Booth	(1,127.93)
09/22/2017	Expense	152001	Cynthia Brown	(1,178.14)
09/22/2017	Expense	152002	Lori Cornwell	(874.63)
09/22/2017	Expense	152003	Linda Gifford	(899.79)
09/22/2017	Expense	152004	Sharla Jenks	(988.37)
09/22/2017	Expense	152005	Ryan Johnson	(1,077.34)
09/22/2017	Expense	152006	Micah J Joseph	(1,135.12)
09/22/2017	Expense	152007	Jennifer Lyon	(997.27)
09/22/2017	Expense	152008	Annie Meyer	(1,147.34)
09/22/2017	Expense	152009	Edmond J Thomas	(1,156.80)
09/22/2017	Expense	152010	Eddie L Thomas	(2,373.06)
09/22/2017	Expense	152011	Marcie L. Vansyoc	(1,132.59)
09/22/2017	Expense	152012	Nicole M Whittle	(1,007.35)
09/22/2017	Expense	09/22/2017	Internal Revenue Service	(6,732.11)
09/22/2017	Expense	09/22/2017	Edward Jones	(100.00)
09/22/2017	Bill Payment (Check)	7699	Ezard's, Inc.	(1,800.00)
09/22/2017	Bill Payment (Check)	7700	AT&T TeleConference Services	(36.71)
09/22/2017	Bill Payment (Check)	7701	Conaway Contracting	(3,500.00)
09/22/2017	Bill Payment (Check)	7702	Cynthia Brown	(54.19)
09/22/2017	Bill Payment (Check)	7703	Films for Humanity, LLC	(1,065.61)
09/22/2017	Bill Payment (Check)	7704	Micah J Joseph	(232.28)
09/22/2017	Bill Payment (Check)	7705	Tree 197 Ministries	(220.56)
09/22/2017	Bill Payment (Check)	7706	Bankcard Center	(1,901.23)
09/22/2017	Bill Payment (Check)	7707	Delta Dental of Missouri	(472.38)
09/22/2017	Bill Payment (Check)	7708	Lakeside Office Supply	(332.81)
09/22/2017	Bill Payment (Check)	7709	Mo Consolidated Health Care	(12,092.80)
09/22/2017	Bill Payment (Check)	7710	Mo Department Of Revenue	(2.88)
09/22/2017	Bill Payment (Check)	7711	Mo State Highway Patrol	(32.00)
09/22/2017	Bill Payment (Check)	7712	G G Maha	(1,068.64)
09/22/2017	Bill Payment (Check)	7713	Linda Simms	(1,317.67)

09/22/2017	Bill Payment (Check)	7714	Camdenton Area Chamber Of Commerce	(395.00)
09/22/2017	Bill Payment (Check)	7715	Janine's Flowers	(70.00)
09/22/2017	Bill Payment (Check)	7716	Principal Life Ins	(261.12)
09/22/2017	Bill Payment (Check)	7717	TruClean Innovations	(120.00)
09/25/2017	Bill Payment (Check)	7718	TruClean Innovations	(55.00)
09/26/2017	Bill Payment (Check)	7719	Vital Graphics LLC	(250.00)
09/28/2017	Bill Payment (Check)	7720	E-Z Disposal	(22.00)
09/28/2017	Bill Payment (Check)	7721	Lake Sun Leader	(40.60)
09/28/2017	Bill Payment (Check)	7722	All Seasons Services	(330.00)
09/28/2017	Bill Payment (Check)	7723	AT&T	(74.24)
09/28/2017	Bill Payment (Check)	7724	Charter Business	(529.87)
09/28/2017	Bill Payment (Check)	7725	Ollie K. Moore R. N.	(50.00)
09/28/2017	Bill Payment (Check)	7726	Annie Meyer	(306.35)
09/28/2017	Bill Payment (Check)	7727	Lagers	(4,019.84)
09/28/2017	Bill Payment (Check)	7728	Office Business Equipment	(63.12)
09/28/2017	Bill Payment (Check)	7729	Summit Natural Gas of Missouri, Inc.	(15.00)
09/28/2017	Bill Payment (Check)	7730	TruClean Innovations	(55.00)



**August 2017**  
**Credit Card Statement**

CENTRAL BANK



**SCORECARD**

Bonus Points Available  
**48,687**

**Account Summary**

Billing Cycle		09/04/2017
Days In Billing Cycle		31
Previous Balance		\$3,177.69
Purchases	+	\$2,024.29
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$1.31-
Payments	-	\$3,177.69-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00

**NEW BALANCE \$2,022.98**

**Credit Summary**

Total Credit Line	\$10,000.00
Available Credit Line	\$7,977.02
Available Cash	\$6,000.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

**Account Inquiries**



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 65102-0779

**Payment Summary**

NEW BALANCE	<b>\$2,022.98</b>
MINIMUM PAYMENT	<b>\$61.00</b>
PAYMENT DUE DATE	<b>10/02/2017</b>

*NOTE: Grace period to avoid a finance charge on purchases. pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.*

**Corporate Activity**

TOTAL CORPORATE ACTIVITY				\$3,177.69-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
08/21	08/22	13114307	PAYMENT - THANK YOU	\$3,177.69-

**Cardholder Account Summary**

MYRNA BLAINE ##### 6176	Payments & Other Credits \$0.99-	Purchases & Other Charges \$221.13	Cash Advances \$0.00	Total Activity \$220.14
----------------------------	-------------------------------------	---------------------------------------	-------------------------	----------------------------

**Cardholder Account Detail**

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/10	08/11	PBUS01	55432867222100903993800	HILTON GARDEN INN NASH NASHVILLE TN 001403 6152513013	\$16.39 ✓
08/09	08/13	PBUS01	25247807223001739024195	ARRIVAL 08/10/17 DEPART 08/10/17 MARTINS BBQ JOINT NASHVILLE TN	\$22.26 ✓

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT.

CENTRAL BANK  
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 JEFFERSON CTY MO 65102-0779

Account Number  
 ##### 5386

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
09/04/17	\$2,022.98	\$61.00	10/02/17

\$

BL ACCT 00000256-10000000  
 CAMDEN CO DD RES  
 ATTN ACCOUNTS PAYABLE  
 PO BOX 722  
 CAMDENTON MO 65020-0722



MAKE CHECK PAYABLE TO:

BANKCARD SERVICES  
 PO BOX 8000  
 JEFFERSON CTY MO 65102-8000



Cardholder Account Detail Continued					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/14	08/15	PBUS01	25536067227102013648688	WILKINSON PHARMACY CAMDENTON MO	\$79.53 X
08/23	08/25	PBUS01	55310207236200688300096	ON THE BORDER INDEPENDENCE MO	\$24.75 X
08/25	08/27	PBUS01	05436847238400039039824	WM SUPERCENTER #89 CAMDENTON MO	\$35.98 X
08/28	08/29	PBUS01	25536067241101032120440	WILKINSON PHARMACY CAMDENTON MO	\$42.22 X
08/26	08/29		05587457238000000396826	RBT ON THE BORDER EasySavings NY	\$0.99 X

Cardholder Account Summary				
EDDIE THOMAS ##### 0953	Payments & Other Credits \$0.00	Purchases & Other Charges \$261.53	Cash Advances \$0.00	Total Activity \$261.53

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/23	08/24	PBUS01	25247807235003920168167	HEREFORD HOUSE HH4 IND INDEPENDENCE MO	\$55.44 X
08/25	08/28	PBUS01	75337007238399900561144	HILTON GARDEN INN INDE INDEPENDENCE MO 00005081	\$116.09 X
09/01	09/03	PBUS01	55429507244719062038718	ARRIVAL 08/23/17 DEPART 08/25/17 EB VICTIMIZATION ITS 8014137200 CA	\$90.00 X

Cardholder Account Summary				
LINDA SIMMS ##### 0961	Payments & Other Credits \$0.00	Purchases & Other Charges \$1,355.03	Cash Advances \$0.00	Total Activity \$1,355.03

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/04	08/06	PBUS01	55432867216100133060055	INTUIT *QB ONLINE 800-286-6800 CA	\$50.00 X
08/10	08/11	PBUS01	55483827223400000223254	WAL-MART #0089 CAMDENTON MO	\$9.99 X
08/12	08/14	PBUS01	05410197225105001537870	STAPLES 00111781 OSAGE BEACH MO	\$79.57 X
08/14	08/15	PBUS01	05436847227000335992677	USPS PO 2860360829 OSAGE BEACH MO	\$147.00 X
08/15	08/16	PBUS01	65230977228000000666537	EZARDS ACE HARDWARE ST OSAGE BEACH MO	\$23.99 X
08/18	08/20	PBUS01	05436847231000352113904	USPS PO 2860360829 OSAGE BEACH MO	\$7.29 X
08/21	08/23	PBUS01	05140487234710025165532	WOODS MARKET 2068 OSAGE BEACH MO	\$48.47 X
08/21	08/23	PBUS01	05410197234255206949120	SUBWAY 00172569 OSAGE BEACH MO	\$22.00 X
08/22	08/23	PBUS01	55429507234717715541825	EB VICTIMIZATION ITS 8014137200 CA	\$15.00 X
08/22	08/23	PBUS01	55429507234717715542633	EB VICTIMIZATION ITS 8014137200 CA	\$75.00 X
08/22	08/23	PBUS01	05436847235000335106377	USPS PO 2860360829 OSAGE BEACH MO	\$7.50 X
08/24	08/25	PBUS01	05134377237600028567677	APPLICATION USER FEE 801-620-5191 UT	\$275.00 X
08/24	08/27	PBUS01	55488727237200992201347	COMPLIANCE SIGNS.COM 08005781245 IL	\$168.50 X
08/25	08/27	PBUS01	55436877238122382443112	SOCIETY FOR HUMAN RESO 703-5483440 VA	\$179.00 X
08/26	08/28	PBUS01	05416017238141001393609	SAMSLUB #8296 SPRINGFIELD MO	\$16.46 X
08/28	08/30	PBUS01	05140487241710023300231	WOODS MARKET 2068 OSAGE BEACH MO	\$30.26 X
09/02	09/03	PBUS01	55432867245100234996392	GOOGLE *SVCSAPPS_ccddr cc@google.com CA	\$200.00 X

Cardholder Account Summary				
GLENDA MAHA ##### 3221	Payments & Other Credits \$0.32-	Purchases & Other Charges \$186.60	Cash Advances \$0.00	Total Activity \$186.28

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/08	08/09	PBUS01	05436847220300135283583	GERBES #0119 CAMDENTON MO	\$22.71 X
08/07	08/09	PBUS01	05410197220685076702629	CENEX LAKERS E07083850 CAMDENTON MO	\$39.00 X
08/09	08/10	PBUS01	05436847222000337851553	USPS PO 2812420020 CAMDENTON MO	\$26.65 X
08/10	08/13	PBUS01	05410197223685077004279	CENEX LAKERS E07083850 CAMDENTON MO	\$30.74 X
08/18	08/21	PBUS01	05410197223685077802515	CENEX LAKERS E07083850 CAMDENTON MO	\$35.01 X
08/29	08/31	PBUS01	55308767242547265025085	SHELL OIL 10015411001 CAMDENTON MO	\$32.49 X

OVER

**Cardholder Account Detail Continued**

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
09/02	09/03		0558745724500000414281	RBT SHELL OIL 10015411 EasySavings NY	\$0.32

**Additional Information About Your Account**

MANAGE YOUR CARD ACCOUNT ONLINE. IT'S FREE! IT'S EASY! SIMPLY GO TO [WWW.BANKCARDCENTER.NET](http://WWW.BANKCARDCENTER.NET) AND ENROLL IN OUR ONLINE SERVICE. YOU CAN REVIEW ACCOUNT INFORMATION, TRACK SPENDING, SET ALERT NOTIFICATIONS, DOWNLOAD FILES, AND MUCH MORE. MANAGING YOUR ACCOUNT IS FAST, SECURE AND EASY. ENROLL TODAY!

**ScoreCard Bonus Points Information as of 09/03/2017**

SCORECARD	Beginning Balance	Points Earned	Points Adjusted	Points Redeemed	Ending Balance
	46,129	2,558	0	0	48,687

**Finance Charge Summary / Plan Level Information**

Plan Name	Plan Description	FCM <sup>1</sup>	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
<b>Purchases</b>									
PBUS01 001	PURCHASE	E	\$0.00	0.76250%(M)	9.1500%(V)	\$0.00	\$0.00	0.0000%	\$2,022.98
<b>Cash</b>									
CBUS01 001	CASH	A	\$0.00	2.16583%(M)	25.9900%(V)	\$0.00	\$0.00	0.0000%	\$0.00

\* Periodic Rate (M)=Monthly (D)=Daily

\*\* includes cash advance and foreign currency fees

Days In Billing Cycle: 31

APR = Annual Percentage Rate

<sup>1</sup> FCM = Finance Charge Method

(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.

CHECK

23-770

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Departure Date:

Adult/Child  
Room Rate

Rate Plan  
Hi #  
AI:  
Car:

*Parking  
for  
CARF  
Wkshop*



8/9/2017

DATE	DESCRIPTION	ID	REF NO	CHARGES	CREDITS	BALANCE
8/9/2017	*PAVILION PANTRY	BRWI	564211	\$7.00		
8/9/2017	CASH	BRWI	564212		(\$7.00)	
8/9/2017	*PAVILION PANTRY	TDUNN2	564229	\$3.00		
8/9/2017	CASH	TDUNN2	564230		(\$3.00)	
8/9/2017	*PAVILION PANTRY	CHDI	564231	\$4.00		
8/9/2017	SALES TAX-MISC	CHDI	564231	\$0.37		
8/9/2017	VS *5393	CHDI	564232		(\$4.37)	
8/9/2017	EVENT PARKING	CHDI	564238	\$15.00		
8/9/2017	SALES TAX-MISC	CHDI	564238	\$1.39		
8/9/2017	CASH	CHDI	564240		(\$16.39)	
8/9/2017	EVENT PARKING	CHDI	564241	\$15.00		
8/9/2017	SALES TAX-MISC	CHDI	564241	\$1.39		
8/9/2017	VS *8332	CHDI	564242		(\$16.39)	
8/9/2017	EVENT PARKING	TDUNN2	564243	\$15.00		
8/9/2017	SALES TAX-MISC	TDUNN2	564243	\$1.39		
8/9/2017	VS *8717	TDUNN2	564244		(\$16.39)	
8/9/2017	EVENT PARKING	CHDI	564247	\$15.00		
8/9/2017	SALES TAX-MISC	CHDI	564247	\$1.39		
8/9/2017	MC *6176	CHDI	564248		(\$16.39)	
8/9/2017	*PAVILION PANTRY	CHDI	564251	\$12.00		
8/9/2017	SALES TAX-MISC	CHDI	564251	\$1.11		
8/9/2017	VS *2022	CHDI	564252		(\$13.11)	
8/9/2017	EVENT PARKING	CHDI	564263	\$15.00		
8/9/2017	SALES TAX-MISC	CHDI	564263	\$1.39		
8/9/2017	CASH	CHDI	564264		(\$16.39)	



ACCOUNT NO.

CARD MEMBER NAME

ESTABLISHMENT NO. & LOCATION (ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT)  
Thank you for choosing the HGI Nashville Downtown!

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

CARD MEMBER'S SIGNATURE  
**X**

DATE OF CHARGE

FOR: NO./CHECK NO.  
140372 A

AUTHORIZATION

INITIAL

PURCHASES & SERVICES

TAXES

TIPS & MISC.

TOTAL AMOUNT **-16.39**

MERCHANDISE AND SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

Lunch is  
N Asheville -  
Only Restaurant  
in walking distance

Martin's BBQ Joint  
Downtown

Server:  
12:29 PM  
808/1

DOB: 08/09/2017  
08/09/2017  
10/100033

SALE

M/C  
Card #XXXXXXXXXXXX6176  
Magnetic card present:  
Card Entry Method: S

10485771

Approval: 69586C

Amount: \$ 20.26

+ Tip: <sup>2.00</sup>

= Total: 22.26

I agree to pay the above  
total amount according to the  
card issuer agreement.

X \_\_\_\_\_

>>>CUSTOMER COPY<<<

Client  
\$59.96

08/14/2017

04:11pm

**Wilkinson Pharmacy #10**

113 EAST HWY 54  
CAMDENTON, MO 65020  
Phone:(573) 346-3396

1 RX0835206_00 COLE, SABRI	16.53
1 RX0418738_02 COLE, SABRI	60.00
1 RX0835207_00 COLE, SABRI	3.00

\$ 79.53

Sales Tax:

0.00

Amount Due:

**\$ 79.53**

# Items: 3  
Clerk ID: CHARLES JO  
Register #: 2  
Drawer #: 1

Call your doctor for medical  
advice about side effects.  
You may report side effects  
to FDA at: 1-800-FDA-1088.

\$ 79.53  
Charged to: BLAINE/MYRNA  
MasterCard  
XXXXXXXXXXXX 6176  
Auth: 61296C

THANK YOU FOR CHOOSING  
WILKINSON PHARMACY  
Tim Moore, Store Mngr  
www.wilkinsonpharmacy.com



Lunch @  
Maddox TCM  
Mtg

THANK YOU

ON THE BORDER  
Mexican Grill & Cantina  
19921 E Jackson Dr.  
816-759-2110

Server: LOUIS  
Table 24/1  
Guests: 1  
Order Type: Dine In  
08/23/2017  
12:36 PM  
20004

ON THE BORDER  
Mexican Grill & Cantina  
19921 E Jackson Dr.  
816-759-2110

Server: LOUIS  
12:41 PM  
Table 24/1  
DOB: 08/23/2017  
08/23/2017  
2/20004

Bowl Queso Blanco 5.99  
Water 0.00  
Carnita Fajitas 13.99

SALE

M/C 4194320  
Card #XXXXXXXXXX6176  
Magnetic card present: BLAINE MYRNA  
Card Entry Method: S  
Approval: 61067C

\*\*\*\*\*  
YOUR OPINION MATTERS  
Thanks for dining with us!  
Let us know how we did by reviewing us  
on Facebook, Google or Yelp.  
If you have any other questions, please  
contact us at [ontheborder.com/contact](http://ontheborder.com/contact)

Amount: \$ 21.75  
+ Tip: 3.00  
= Total: 24.75

Subtotal 19.98  
Tax 1.77  
Total 21.75  
Balance Due 21.75

I agree to pay the above  
total amount according to the  
card issuer agreement.

THANK YOU!  
We welcome your comments  
(888) 682-6882  
[www.ontheborder.com](http://www.ontheborder.com)

X \_\_\_\_\_



Refreshments  
for MacDAS  
Work Group

See back of receipt for your chance  
to win \$1000

ID #: 7L1V9HZ271

**Walmart**   
Save money. Live better.

( 573 ) 346 - 3588  
MANAGER PAUL GARDNER  
94 CECIL ST  
CAMDENTON MO 65020

ST# 00089 OP# 004128 TE# 06 TR# 05870  
APL CHS TRAY 082676625402 F 11.88 0  
FRUIT BOWL 082676625421 F 8.98 0  
COKE 004900005011 F 1.56 0  
GV MIXED NUT 007874225983 F 9.32 0  
10 LB ICE 004127197110 F 2.12 0  
10 LB ICE 004127197110 F 2.12 0  
SUBTOTAL 35.98  
TOTAL 35.98  
MCARD TEND 35.98

MasterCard \*\*\*\* \* 6176 1 21  
APPROVAL # 68205C  
REF # 1042000314

AID A000000041010  
TC 6750853535BD7F52  
TERMINAL # SC011121  
\*NO SIGNATURE REQUIRED

08/25/17 11:28:27  
CHANGE DUE 0.00  
# ITEMS SOLD 6  
TC# 8303 8361 9248 6647 292



Low Prices You Can Trust. Every Day.  
08/25/17 11:28:44  
\*\*\*CUSTOMER COPY\*\*\*



Client # 559 196

08/28/2017

02:11pm

**Wilkinson Pharmacy #10**

113 EAST HWY 54  
CAMDENTON, MO 65020  
Phone: (573) 346-3396

1 RX0418923_00 COLE, SABRI	20.00
1 RX0418920_00 COLE, SABRI	4.00
1 RX0835213_00 COLE, SABRI	6.00
1 RX0835359_00 COLE, SABRI	6.00
1 VIT B-6 TAB 25MG WA	5.79

Sales Tax:

\$ 41.79

Amount Due:

\$ 42.22

# Items: 5  
Clerk ID: SHANNON  
Register #: 2  
Drawer #: 1

Call your doctor for medical  
advice about side effects.  
You may report side effects  
to FDA at: 1-800-FDA-1088.

\$ 42.22

Charged to: BLAINE/MYRNA  
MasterCard  
XXXXXXXXXXXX 6176  
Auth: 61264C

THANK YOU FOR CHOOSING  
WILKINSON PHARMACY  
Tim Moore, Store Mngr  
www.wilkinsonpharmacy.com



Customer Copy

.99<sup>A</sup> CREDIT

FOR USING CREDIT CARD AT  
ON THE BORDER

Hereford House Independence  
19721 E Jackson  
Independence, Mo 64057  
P 816-795 9200 F 816-795 9804  
Corp (816) 842-8718

Date: Aug23'17 07:27PM  
Card Type: MasterCard  
Acct #: XXXXXXXXXXXXX0953  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 67404C  
Check: 172  
Table: 53/3  
Server: 203 Abigail

Subtotal: 48.44  
TIP: 7.00  
TOTAL: 55.44

I agree to pay above total  
according to my card issuer  
agreement.

\*\*\* Customer Copy \*\*\*

Drauer  
@MFCDS  
Mestrey

MACCDS  
8/23 - 8/24



19677 E.JACKSON DR.  
INDEPENDENCE, MO 64057  
United States of America  
TELEPHONE 816-350-3000 • FAX 816-350-3535  
Reservations  
www.hilton.com or 1 800 HILTONS

THOMAS, ED  
PO BOX 722  
CAMDENTON MO 65020  
UNITED STATES OF AMERICA

Room No: 502/K1  
Arrival Date: 8/23/2017 5:56:00 PM  
Departure Date: 8/24/2017 8:44:00 AM  
Adult/Child: 1/0  
Cashier ID: RPERAMALLA  
Room Rate: 109.00  
AL:  
HH #  
VAT #  
Folio No/Che 508100 A

Confirmation Number: 3351246654

HILTON GARDEN INN INDEPENDENCE 8/24/2017 8:43:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
8/23/2017	2034585	GUEST ROOM EXEMPT	\$109.00
8/23/2017	2034585	OCCUPANCY TAX	\$7.09
8/24/2017	2034749	MC *0953	(\$116.09)
**BALANCE**			\$0.00

EXPENSE REPORT SUMMARY

	8/23/2017	STAY TOTAL
ROOM AND TAX	\$116.09	\$116.09
DAILY TOTAL	\$116.09	\$116.09

CREDIT CARD DETAIL

APPR CODE	65408C	MERCHANT ID	0194224800
CARD NUMBER	MC *0953	EXP DATE	12/18
TRANSACTION ID	2034749	TRANS TYPE	Sale

	Family Member, Personal Attendant, General Public	1	\$15.00
Lori Cornwell	Professional	1	\$75.00
<b>TOTAL</b>			<b>\$90.00</b>


Charged to: MasterCard - XXXX-XXXXXX-0953

This charge will appear on your card statement as EB \*Victimization Its

**Refund Policy:** Refunds up to **7 days** before event

This order is subject to Eventbrite Terms of Service, Privacy Policy, and Cookie Policy

## About this event

 Friday, September 15, 2017 from  
10:00 AM to 4:00 PM (CDT)


 Stoney Creek Hotel & Conference  
Center  
2601 S Providence Rd  
Columbia, MO 65203



 Add to my calendar:

Google · Outlook · iCal ·  
Yahoo

## Ticket Information

 Ticket #1 — Family Member, Personal Attendant, General Public

Name:

Email:

Which break out session will you be attending? Please choose one.  
Session B: Risk Reduction Plan - Dr. Nora J. Baladerian

 Ticket #2 — Professional

Name:

INTEGRITY - QUICK BOOKS  
MONTHLY PAY

- Accounting
- Subscription status
- Subscribed Edit Cancel
- Plan details
- QuickBooks Plus Upgrade
- \$39.95 / month
- Switch to annual billing
- Next Charge
- July 4, 2016
- Payment method
- MasterCard ending 0961 expires 11/18 Edit

ACCT  
5567

See back of receipt to win \$1000

ID #: 7L1SR5225P



( 573 ) 346 - 3588  
MANAGER PAUL GARDNER  
94 CECIL ST  
CAMDENTON MO 65020

ST# 00089	OP# 004644	TE# 08	TR# 05828
FACE TISSUE	003700035295		4.47 0
THE WORKS	007415703302		2.76 0
THE WORKS	007415703302		2.76 0
	SUBTOTAL		9.99
	TOTAL		9.99
	MCARD TEND		9.99

ACCOUNT # \*\*\*\* \* S  
APPROVAL # 69206C  
REF # 722200022325  
PAYMENT SERVICE - A  
TERMINAL # SC010022

08/10/17 06:49:22  
CHANGE DUE 0.00  
# ITEMS SOLD 3

TC# 8042 2008 0546 7686 8464



Low Prices You Can Trust. Every Day.  
08/10/17 06:49:38  
\*\*\*CUSTOMER COPY\*\*\*

Store receipts on your phone. Walmart Pay.





# STAPLES

3534 Osage Beach Parkway  
Osage Beach, MO 65065  
(573) 365-8943

SALE 1862239 7 001 53787  
1178 08/12/17 01:26

Your Sales Associate was:  
Michael S

QTY	SKU	PRICE
-----	-----	-------

REWARDS NUMBER 3310668805

1	100 PETITE REFILL 071912675532	4.79N
1	100 PETITE REFILL 071912675532	4.79N
1	X-ACTO WOOD LASER 079946266429	69.99N
SUBTOTAL		79.57

Tax Exempt Number 3310668805

TOTAL

**\$79.57**

MasterCard

USD\$79.57

Card No.: XXXXXXXXXXXX0961 [S]

Auth No.: 66348C

**TOTAL ITEMS 3**

Staples brand products.  
Below Budget. Above Expectations.

THANK YOU FOR SHOPPING AT STAPLES !

Read Online at [www.staples.com](http://www.staples.com)

OSAGE BEACH  
5545 OSAGE BEACH PKWY  
OSAGE BEACH  
MO  
65065-9998  
2860360829

08/14/2017 (800)275-8777 3:53 PM

STAMPS  
OSAGE BEACH  
OFFICE

Product Description	Sale Qty	Final Price
US Flag Coil/100 (Unit Price:\$49.00)	1	\$49.00
US Flag Bklt/20 (Unit Price:\$9.80)	10	\$98.00

Total \$147.00

Credit Card Remitd \$147.00  
(Card Name:MasterCard)  
(Account #:XXXXXXXXXX0961)  
(Approval #:63570C)  
(Transaction #:280)

\*\*\*\*\*  
BRIGHTEN SOMEONE'S MAILBOX. Greeting cards available for purchase at select Post Offices.  
\*\*\*\*\*

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/click for more information on shipping labels with postage meter or for more information call 1-800-ASK-USPS.

\*\*\*\*\*

EZARDS ACE HARDWARE STORE  
5816 OSAGE BEACH PKWY 100  
OSAGE BEACH, MO 65065  
(573) 348-2921  
MID 08788290393300

Term ID: 2  
Merchant ID: 8788290393300  
Record Num.: 0031

Sale

XXXXXXXXXXXX0961 Exp: XX/XX  
MASTERCARD Entry Method: Swiped  
Total: \$ 23.99

08/15/17 12:59:12  
Inv#: 000031 Appr Code: 67146C  
Apprvd: OnLine Batch#: 000065  
BRIC #: 04JF8FMPJEXZAKU2L3N

SALE

EA N

23.99

00

23.99

COPY HOLDER COPY

RETAIN FOR STATEMENT

<<==

LEAHNT BULBS  
OSAGE BEACH  
OFFICE

-----  
 OSAGE BEACH  
 5545 OSAGE BEACH PKWY  
 OSAGE BEACH  
 MO  
 65065-9998  
 2860360829  
 08/18/2017 (800)275-8777 4:05 PM  
 -----

Product Description	Sale Qty	Final Price
First-Class Mail Large Envelope (Domestic) (CAMDENTON, MO 65020) (Weight:0 Lb 1.60 Oz) (Expected Delivery Day) (Monday 08/21/2017)	1	\$1.19
Certified (##USPS Certified Mail #) (70160910000210304453)	1	\$3.35
Return Receipt (##USPS Return Receipt #) (9590940225606306410078)	1	\$2.75

Total \$7.29

Credit Card Remitd \$7.29  
 (Card Name:MasterCard)  
 (Account #:XXXXXXXXXX0961)  
 (Approval #:65191C)  
 (Transaction #:323)

\*\*\*\*\*  
 BRIGHTEN SOMEONE'S MAILBOX. Greeting cards available for purchase at select Post Offices.  
 \*\*\*\*\*

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Mail and First-Class Mail apply. Your carrier will call you. USPS Tracking is available for all USPS mail.





BOARD MTG  
OSAGE BEACH  
OFFICE

OSAGE BEACH, MO 665065  
(573) 348-2591  
VISIT US AT  
WOODSSUPERMARKET.COM  
Store:2068

Cashier: CATHAY 154

08/21/17 13:45:55

BEGIN DUPLICATE RECEIPT  
Store:2068

Cashier: CATHAY 154

08/21/17 13:44:32

Woods Reward Card 49663172267

<b>GROCERY</b>		
12DR LAVNDR	3040079051	6.29 T
SPARKLE 8RL PRN	3040021729	7.59 T
SPARKLE 8RL PRN	3040021729	7.59 T
Mist Twist	1200015005	1.99 TF
=> 1.85 Reward Card Price		-.14 TF
Ozarka 24Pk	2259205302	4.99 TF
=> 3.33 Reward Card Price		-1.66 TF
Pepsi 2 Liter	1200000230	1.99 TF
=> 1.85 Reward Card Price		-.14 TF
Sun Chips	2840014740	3.19 TF
=> 2.50 Reward Card Price		-.69 TF
X1 Kettle Mesqu	2840037218	3.49 TF

<b>PRODUCE</b>		
VEGGIE TRAY	70935188878	9.99 TF
<b>BAKERY</b>		
CINNAMON CAKE	7987940029	3.99 TF
SUBTOTAL		48.47
TOTAL TAX		.00

TOTAL	48.47
MasterCard TENDER	48.47

Acct:xxxxxxxxxxxx0961	
APPRVL CODE 65490C	
Cash CHANGE	.00

NUMBER OF ITEMS 10

EXEMPT TAX ID 123	
T1 ITEM VALUE EXEMPTED	27.00
T1 TAX EXEMPTED	1.21
T2 ITEM VALUE EXEMPTED	21.47
T2 TAX EXEMPTED	1.60
T3 ITEM VALUE EXEMPTED	.00
T3 TAX EXEMPTED	.00
T4 ITEM VALUE EXEMPTED	.00
T4 TAX EXEMPTED	.00

Sale Savings 2.63

You Saved a Total of:	2.63
That is a Savings of:	5%

Trx:227 Term:1 Store:2068 13:45:46

THANK YOU FOR SHOPPING AT WOODS!

Woods SUPERMARKET  
BEGINS DUPLICATE RECEIPT

Food for  
8-21-2017  
board mtg

Subway#17256-0 Phone 573-302-7827  
5896 highway 54 suite 4  
osage beach, mo, 65065  
Served by: Sherry 8/21/2017 3:02:49 pm  
Term ID-Trans# 1/A-83568

Qty	Size	Item	Price
2	12"	Cold Cut Combo Sub	11.00
2	12"	Ham Sub	11.00

Sub Total 22.00  
Tax ExemptionCAMDEN COUNTY SENATE BILL 4  
Total (Eat In) 22.00  
Credit Card 22.00  
Change 0.00

It's not right, I'll make it right.. Call  
Deb 573-302-7827

Approval No: 62489C  
Reference No: 723320694912  
Card Issuer: Mastercard  
Account No: \*\*\*\*\*0961  
Acquired: Swipe  
Amount: \$22.00  
Date/Time: 8/21/2017 3:02:48 PM

CUSTOMER COPY

Host Order ID: 686-370-1391279

Thanks for visiting Subway. Please let  
us know how we did today by taking our  
1 minute survey at [www.111subway.com](http://www.111subway.com)

660788971826752378001



Event

# Victimization: It's Happening And We Can Stop It



Date+Time

Friday, September 15, 2017  
from 10:00 AM to 4:00 PM  
(CDT)

Location

Stoney Creek Hotel &  
Conference Center  
2601 S Providence Rd  
Columbia, MO 65203

Name

Lisa Jackson

Payment Status

Eventbrite  
Completed

Order Info

Order #660788971. Ordered by Linda Simms on August 22, 2017 8:27 AM



Type

Family Member, Personal Attendant, General Public \$15.00

### Registration Information:

Which break out session will you be attending? Please choose one.

Session A: Your Opportunity in the Nick of Time - Victim Awareness - Daniel Cayou & Betty K. Farley



660788971826752378001

## Eventbrite

Do you organize events?

Start selling in minutes with Eventbrite!  
[www.eventbrite.com](http://www.eventbrite.com)

660790194826753801001



Event

# Victimization: It's Happening And We Can Stop It



Date+Time

Friday, September 15, 2017  
from 10:00 AM to 4:00 PM  
(CDT)

Location

Stoney Creek Hotel &  
Conference Center  
2601 S Providence Rd  
Columbia, MO 65203

Name

Linda Simms

Payment Status

Eventbrite  
Completed

Order Info

Order #660790194. Ordered by Linda Simms on August 22, 2017 8:30 AM



Type

Professional \$75.00

## Registration Information:

Which break out session will you be attending? Please choose one.

Session B: Risk Reduction Plan - Dr. Nora J. Baladerian



660790194826753801001

## Eventbrite

Do you organize events?

Start selling in minutes with Eventbrite!  
[www.eventbrite.com](http://www.eventbrite.com)



OSAGE BEACH  
5545 OSAGE BEACH PKWY  
OSAGE BEACH  
MO  
65065-9998  
2860360829

08/22/2017 (800)275-8777 4:17 PM

Product Description	Sale Qty	Final Price
First-Class Mail Large Envelope (Domestic) (JEFFERSON CITY, MO 65102) (Weight:0 Lb 3.00 Oz) (Expected Delivery Day) (Thursday 08/24/2017)	1	\$1.40
Certified (##USPS Certified Mail #) (70160910000210304620)	1	\$3.35
Return Receipt (##USPS Return Receipt #) (9590940226146336165535)	1	\$2.75

Total \$7.50

Credit Card Remitd **\$7.50**  
(Card Name:MasterCard)  
(Account #:XXXXXXXXXX0961)  
(Approval #:67332C)  
(Transaction #:883)

\*\*\*\*\*  
BRIGHTEN SOMEONE'S MAILBOX. Greeting cards available for purchase at select Post Offices.  
\*\*\*\*\*

Text your tracking number to 8777 (2USPS) to get the latest status Standard Message and Data rates may apply. You may also visit usps.com USPS Tracking or call 1-800-275-8777

Order stamps at usps.com/stamps



NOTICE: The confirmation of payment is below. Please contact the IRS at 877-829-5500 regarding the status of your application.

## Receipt

### Your payment is complete

Pay.gov Tracking ID: 264ED4MF

Agency Tracking ID: 75311308176

Form Name: Streamlined Application for Recognition of Exemption Under Section 501(c)(3)

Application Name: Form 1023-EZ

### Payment Information

Payment Type: Debit or credit card

Payment Amount: \$275.00

Transaction Date: 08/24/2017 10:35:17 AM EDT

Payment Date: 08/24/2017

### Account Information

Cardholder Name: Linda Simms

Card Type: Master Card

Card Number: \*\*\*\*\*0961

### Email Confirmation Receipt

No confirmation email was provided during the creation of this transaction.

ACCENT  
TCM CODE 5899



ORDER RECEIPT

Signs for  
Keystone,  
Suite 106 +  
Suite 108

ORDER NUMBER: 620560

ORDER DATE: 2017-08-24 13:14:52

SHIP TO:

Jeanna Booth  
Camden County Developmental  
Disability Resources  
5816 Osage Beach Pkwy  
Suite 108  
Osage Beach, MO 65065  
United States  
Phone: 5736931511

BILL TO:

Linda Simms  
Camden County Developmental  
Disability Resources  
PO Box 722  
Camdenton, MO 65020  
United States  
Phone: 5736931511

EMAIL: jeanna@ccddr.org

ORDER DETAIL:

Line	Qty	Description	SKU	Price	Total
A	3	ADA Restroom With Symbol Braille Sign RRE-120 WHTonBLU Restrooms - Acrylic>STANDARD ADA Acrylic Sign 9x6 in. \$19.00  - <!--[https%3A/ www.compliancesigns.com/RRE-120_White_on_Blue shtml%2314497#14497]-->	RRE-120_Whit	19.00	57.00
B	3	ADA Restroom With Symbol Braille Sign RRE-110 WHTonBLU Restrooms - Acrylic>STANDARD ADA Acrylic Sign 9x6 in. \$19.00  -	RRE-110_Whit	19.00	57.00
C	2	ADA Parking Only Sign PKE-20802 Parking Handicapped - Aluminum>Type I - Engineer Grade Reflective Aluminum Sign 18x12 in. 80 mil with Center Holes \$21.00  -	PKE-20802	21.00	42.00

Shipping: STANDARD Shipping --- [Ground]      Subtotal: 156.00  
 Tax: 0.00  
 Total: 168.50

[REF - PAID INVOICE = Credit Card Processing Record CC: MasterCard \*\*\*\*\*090961]

MasterCard: Approved

SHIPMENT DETAIL:

Ship Method: STANDARD Shipping --- [Ground]  
Tracking Number:  
Ship Date:



MYCREDITCARD

Society For Human Resource Management  
1800 Duke Street, Alexandria, VA, 22314-3499, USA  
Phone: (703) 548-3440 Fax: (703) 535-6490 Email: shrm@shrm.org

ACKNOWLEDGEMENT

Date: 25-Aug-2017  
Ship-To: 01840059-0

Order Number: 9007229813  
Order Date: 25-Aug-2017  
Invoice Number: 0097385842

Linda Simms  
Compliance Manager  
Camden County Senate Bill 40  
PO Box 722  
Camdenton, MO 65020

Product	Fulfill Status	Status	Qty	Unit Price	Unit Discount	Coupon	Adjustment	Total
SHRM/PRO-SHRM - Professional Membership 25-Aug-2017 to 31-Aug-2018	Active	Active	1	199.00	20.00	0.00	0.00	179.00

Shipping: 0.00

Total: 179.00

Paid To Date: (179.00)

Current Amount Due: 0.00

Credit Card Information:  
\*\*\*\*\*0961

(Back Ordered Items will be charged on Shipping and Invoicing of the Products)



CLUB MANAGER TOM CONROY  
( 417 ) 882 - 4487  
SPRINGFIELD, MO

08/26/17 16:12 0754 08296 004 4370

CAMDEN

I	567934	MM FACIAL	11.48	E
E I	678395	LANCE VTY PF	9.48	E
V	INST SV	MM FACIAL	3.00	-N
E V	INST SV	LANCE VTY P	1.50	-N
		SUBTOTAL	16.46	
		TOTAL	16.46	
		MCARD TEND	16.46	

ACCOUNT # \*\*\*\* \* 0961 \$

APPROVAL # 63224C

TERMINAL # SC010813

CHANGE DUE 0.00

Additional Savings This Trip:

Sam's Instant Savings: \$4.50

Visit [samsclub.com](http://samsclub.com) to see your savings

# ITEMS SOLD 2

TCN 6197 9480 7552 0236 6127



Happy to Help

\*\*\* MEMBER COPY \*\*\*

Food for  
8-28-board mtg



OSAGE BEACH, MO 665065  
(573) 348-2591  
VISIT US AT  
WOODSSUPERMARKET.COM  
Store:2068

Cashier: Mary

08/28/17 13:25:08

Woods Reward Card	49663172269	
<b>GROCERY</b>		
Lays Sour Cream 2840064641		4.29 TF
<b>MEAT</b>		
HM/TKY/CHS 3760028751		13.99 TF
<b>PRODUCE</b>		
SMALL VEGGIE T 70935188899		7.99 TF
<b>BAKERY</b>		
VARIETY PK SCO 23014500000		3.99 TF
SUBTOTAL		30.26
TOTAL TAX		.00

TOTAL		30.26
MasterCard TENDER		30.26
Acct:xxxxxxxxxxxx0961		
APPRVL CODE 66135C		
Cash CHANGE		.00

NUMBER OF ITEMS		4
EXEMPT TAX ID 19364199		
T1 ITEM VALUE EXEMPTED	30.26	
T1 TAX EXEMPTED	1.35	
T2 ITEM VALUE EXEMPTED	.00	
T2 TAX EXEMPTED	.00	
T3 ITEM VALUE EXEMPTED	.00	
T3 TAX EXEMPTED	.00	
T4 ITEM VALUE EXEMPTED	.00	
T4 TAX EXEMPTED	.00	

Trx:176 Term:7 Store:2068 13:26:09

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Mountain View, CA 94043  
United States  
Federal Tax ID: 77-0493581

# Invoice

## Bill to

dba Camden Co Develpmntal Disability Resources  
Camden County Senate Bill 40 Board  
PO Box 722  
100 Third Street  
Camdenton, MO 65020  
United States

## Details

Invoice number: 3543855117720210-7  
Issue date: Aug 31, 2017  
Payment terms: Due immediately  
Billing ID: 9176-0235-3316  
Billing Account Number: 3543-8551-1772-0210

## Google Cloud - GSuite

Account ID: ccddr.org

Aug 1, 2017 - Aug 31, 2017

Description	Interval	Quantity	Amount (\$)
G Suite Business: Usage	Aug 1 - Aug 31	20	200.00
Subtotal in USD:			200.00
State sales tax (0%):			0.00
Amount due in USD:			200.00

Bill to: Camden County Senate Bill 40 Board  
Billing ID: 9176-0235-3316  
Invoice number: 3543855117720210-7

Amount due in USD:

\$200.00

*CREDIT CARD*

You will be automatically charged for the amount due. No action is required on your part.



1159 US EAST 54  
(573) 346-3433  
Your cashier was JANELLE

SC	COB COOKIE	PC	3.00 B
	DILLON SAVINGS	0.99	
	KLBR CRACKERS	PC	2.99 B
SC	DILLON SAVINGS	1.00	
	KLBR CRACKERS	PC	2.99 B
SC	DILLON SAVINGS	1.50	
	KRO VEG TRAY		2.49 B
	KAUK CHSBLL		2.79 B
	KAUK CHS LOG		5.49 B
Plus Customer			
	KRO 24PK PUR WATERPC		1.99 B
SC	DILLON SAVINGS	0.80	
	TAX		0.97
	**** BALANCE		22.71

CAMDENTON MO 65020  
MasterCard Purchase  
\*\*\*\*\*3221 - C  
REF#: 65180C TOTAL: 22.71  
AID: A0000000041010  
TC: 99B374C253C3BE09

MASTERCARD	22.71
CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD =	7
STORE COUPONS	4.29
TOTAL SAVINGS (16 pct.)	4.29

08/08/17 08:05am 119 3 15 203

\*\*\*\*\*

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Date: 08/08/17  
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\*\*\*\*\*

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Best Practices  
Committee Meeting.

Marce,

I didn't know  
if MACDDS pays for  
this or CCDDR. Linda S.  
suggested you ask Dir. Ed



CV JCS M450

REPRINT \*\*\* REPRINT  
GIER OIL #18 535  
EAST US HWY 54  
CAMDENTON, MO 65020  
Gier oil  
GP1078708385501  
535 E US Hwy 54  
Camdenton, Mo  
65020

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XXXXXXXXXXXX3221  
MasterCard  
INVOICE 07680262  
AUTH 61565C

PUMP# 9  
REGULAR 18.941G  
PRICE/GAL \$2.059

FUEL TOTAL \$ 39.00

REPRINT \*\*\* REPRINT

Total = \$ 39.00

CREDIT \$ 39.00  
REPRINT \*\*\* REPRINT

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CAMDEN, MO

65020-9998  
2812420020

08/09/2017 (800)275-8777 4:17 PM

Product Description	Sale Qty	Final Price
PM 2-Day (Domestic) (JOPLIN, MO 64803) (Weight:0 Lb 14.80 Oz) (Expected Delivery Day) (Friday 08/11/2017)	1	\$6.65
Certified (Return Receipt) (70162070000031811036)	1	\$3.35
Return Receipt (9590940226316336912082)	1	\$2.75
PM 2-Day (Domestic) (WARSAW, MO 65355) (Weight:2 Lb 4.70 Oz) (Expected Delivery Day) (Friday 08/11/2017)	1	\$7.80
Certified (Return Receipt) (70162070000031811043)	1	\$3.35
Return Receipt (9590940226316336912099)	1	\$2.75

Total \$26.65

Credit Card Remitd \$26.65  
(Card Name:MasterCard)  
(Account #:XXXXXXXXXX3221)  
(Approval #:67249C)  
(Transaction #:478)

Includes up to \$50 insurance

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Certified Mail Fee	\$3.35	
Extra Services & Fees (check box, add fee as appropriate)	\$2.75	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$7.80	
Total Postage and Fees	\$13.90	

Sent To: **Center for Human Services**  
Street: **127 Tower Dr**  
City, State: **Warsaw, MO 65355**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 2070 0000 3181 2016

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JOPLIN, MO 64802

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Certified Mail Fee	\$3.35	
Extra Services & Fees (check box, add fee as appropriate)	\$2.75	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$6.65	
Total Postage and Fees	\$12.75	

Sent To: **Ozark Center – Service Coordination**  
PO Box 2526  
Joplin, MO 64804-3

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

ON MAINT LOG

REPRINT \*\*\* REPRINT  
GIER OIL #18 535  
EAST US HWY 54  
CAMDENTON, MO 65020  
Gier oil  
GP1078708385501  
535 E US Hwy 54  
Camdenton, Mo  
65020

08/10/2017 152049380  
03:05:28 PM

XXXXXXXXXXXX3221  
MasterCard  
INVOICE 07710427  
AUTH 69043C

PUMP# 9  
REGULAR 15.000G  
PRICE/GAL \$2.049

FUEL TOTAL \$ 30.74

REPRINT \*\*\* REPRINT

Total = \$ 30.74

CREDIT \$ 30.74  
REPRINT \*\*\* REPRINT

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D N M...

GIER OIL #18 535  
EAST US HWY 54  
CAMDENTON, MO 65020

Gier oil  
GP1078708385501  
535 E US Hwy 54  
Camdenton, Mo  
65020

08/18/2017 152057194  
10:34:01 AM

XXXXXXXXXXXX3221  
MasterCard  
INVOICE 07790251  
AUTH 67221C

PUMP# 13  
REGULAR 17.084G  
PRICE/GAL \$2.049  
FUEL TOTAL \$ 35.01  
Total = \$ 35.01  
CREDIT \$ 35.01

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welcome to shell  
WELCOME TO  
JIFFY STOP # 0597  
641 W. HIGHWAY 54  
CAMDENTON, MO.  
10015411001

SHELL  
641 WEST HWY 54  
CAMDENTON MO  
65020

DATE 08/29/17 10:53  
TRAN# 9101239  
PUMP# 10  
SERVICE LEVEL: SELF  
PRODUCT: UNL  
GALLONS: 15.855  
PRICE/G: \$ 2.049  
FUEL SALE \$ 32.49  
CREDIT \$ 32.49

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Resolutions 2017-53,  
2017-54, 2017-55,  
2017-56, 2017-57,  
2017-58, 2017-59,  
2017-60, 2017-61,  
2017-62, 2017-63,  
2017-64, 2017-65,  
2017-66, 2017-67,  
2017-68, 2017-69,  
2017-70, 2017-71,  
2017-72, & 2017-73



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-53*

**APPROVAL OF AMENDED POLICY #1**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #1, Person Centered Planning.
2. That the Board hereby amends and adopts Policy #1 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date



Attachment “A” to Resolution  
2017-53



Policy Number:  
1  
Effective Date: May 1, 2008  
Revised: 4/20/09, 9/27/2017

---

Subject: Person-Centered Planning

**PURPOSE:**

Camden County Developmental Disability Resources shall implement a policy for person-centered planning.

**POLICY:**

It is CCDDR's policy to develop an Individual Support Plan for each person who receives Support Coordination services from CCDDR. Planning is a client/family-directed process. Such plans shall be modified and updated, depending on the client's needs and preferences. Services authorized in all Individual Support Plans that are funded through the Dept. of Mental Health billing system, including all Medicaid waiver plans, shall comply with Division of DD Service Monitoring guidelines.

**DEFINITIONS:**

**DDD Individual Support Plan Guidelines:** The Division of Developmental Disabilities (DDD) Individual Support Plan Guidelines describes requirements of Individual Support Plans, as well as information regarding maintaining and updating Individual Support Plans.

**Missouri Quality Outcomes:** A collection of positive outcomes identified by people with disabilities, family members and friends outlined in the *Missouri Quality Outcomes Discussion Guide*. The *Discussion Guide* document serves as a tool designed to assist the service delivery network to put these desired concepts into practice. The Missouri Quality Outcomes can be found at <http://dmh.mo.gov/dd/individsupports.html>

**Individual Support Plan:** A document resulting from a process directed by the individual served, with assistance as needed by a representative. It is intended to identify strengths, capacities, preferences, needs and desired outcomes of the participant. The process may include other individuals freely chosen by the participant who are able to serve as contributors to the process. The person-centered planning process enables and assists the individual to access a personalized mix of paid and non-paid services and supports that will assist him/her to achieve personally defined outcomes and goals.

## I. Missouri Quality Outcomes

All plans developed by CCDDR Support Coordination staff shall be in accordance with the DDD's Quality Outcomes. There are the fundamental values that form the foundation of the Outcomes and these should be considered throughout planning.

## II. Support Planning Process

### A. Individual Support Plans:

Every individual receiving services from CCDDR shall have a Individual Support Plan. The Support Coordinator in conjunction with the client, family members, the client's legal representative (if applicable), and other team members shall hold a meeting to develop an Individual Support Plan within thirty (30) days after the individual has been found eligible for services through the Rolla Regional Office.. The plan must contain a description of immediate needs, especially those that relate to issues of health and safety. The plan must include information about what staff and others need to know and do so that the person's immediate needs are met, especially those that relate to health and safety. The Support Coordinator must make sure that each item in the plan has enough detail and/or examples so that someone new in the person's life understands what is meant and how to support the person.

### B. Plan Components:

All Individual Support Plans developed by CCDDR Support Coordination staff shall contain at least the minimum information required to comply with the Division of DD's approved Individual Support Plan format. Accordingly, all Individual Support Plans developed by CCDDR Support Coordinators shall define desirable changes in the person's life, creating personal outcomes and goals in 6 domains:

- Daily Life and Employment
- Community Living
- Social and Spirituality
- Healthy Living
- Safety and Security
- Citizenship and Advocacy

## III. Updating Plans

Individual Support Plans are expected to change and develop over time as CCDDR Support Coordinators and others get to know the person well, spending time with the client in a variety of situations and environments. Plans must be reviewed (and updated if necessary) on at least a quarterly basis. However, review and update of the plan must also occur when:

- The person or the person’s guardian requests that information be changed or added
- Others invited by the person to participate in his plan provide additional information
- The need for supports and services change, i.e. the person’s level of functioning may change requiring either a reduction or increase in services; the person’s natural support system may expand, reducing the need for a paid service; or staff discovers another agency that will provide additional resources to the person

When the CCDDR Support Coordinator makes major changes to a Plan, the person supported and/or their guardian must be aware of and approve any changes made. Documenting this approval requires the signature of the person or guardian on the Personal Plan Systems Page. Major changes to a Plan include the following:

- Adding or changing a service. (e.g. Someone begins receiving respite, someone moves from a group home or ISL)
- Proposing to restrict someone’s rights
- Taking any other type of adverse action (e.g. canceling a service, termination from the waiver)
- Adding an outcome.

Minor changes (information only) may be made to a Plan without prior consent/approval of the client or their guardian.

#### IV. Plans And Waiver Documentation

CCDDR Support Coordinator shall ensure that information in the Plan is consistent with and does not contradict information in other Medicaid waiver documentation. When developing a plan that prescribes waived services, the CCDDR Support Coordinator shall consider what supports are needed in the areas covered by the Waiver Level of Care Form. Any “significant limitation” in the five areas of major life functioning on these assessments would represent an issue for the person, and must be addressed in the Plan.

#### V. Plan Monitoring/Reviews

The CCDDR Support Coordinator in conjunction with the other team members shall review every Individual Support Plan at least annually. Health Inventory reassessments shall be completed for all persons in residential placement per Regional Center schedule. Quarterly Reviews shall be completed for all clients. The Quarterly Review shall provide an overview of progress made toward plan outcomes and goals, recommendations for changes to plan, Support Coordinator contacts, Service Monitoring notes, and other pertinent information relating to the client.

## VI. Authorization Of Services

All services to be paid by the Division of DD and/or CCDDR must be documented in a client's Individual Support Plan or Individual Support Plan amendment before the services are authorized, delivered, or purchased.

## VIII. Quality Assurance

The Division of DD's Targeted Case Management, Technical Assistance Coordinator, will evaluate a sample of plans from CCDDR quarterly to ensure that the mandatory components of the Missouri Individual Support Plan Guidelines are implemented.

## **REFERENCES:**

- CARF Standards Manual
- Missouri Individual Support Plan Guidelines, revised and approved July 2014
- Medicaid Waiver Manual
- RSMO 633.110 Person Centered Plans
- Division of DD Quality Outcomes Discussion Guide
- 9 CSR 45-3.010 Individualized Habilitation Plan Procedures
- 630.655, RSMo 1994
- Division of DD Directive 3.020
- Division Directive 4.060



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-54*

**APPROVAL OF AMENDED POLICY #2**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #2, New Client and Family Orientation.
2. That the Board hereby amends and adopts Policy #2 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-54



Policy Number:

2

Effective: May 1, 2008

Revised: October 16, 2017

---

Subject: New Client/Family Orientation

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to provide comprehensive and specific information to clients receiving Support Coordination services, as well as their families and others as appropriate, in a manner which is understandable and is appropriate to their needs and types of services received.

This information is designed to assist the client and their family in making informed decisions about the client's habilitation, treatment and care; in understanding the background of CCDDR and basic agency information; client rights and responsibilities; appeals processes; exactly what will happen as Support Coordination services are provided; encouragement of active participation in the Person-Centered Planning process; and feedback regarding quality of care, service progress and client satisfaction.

**POLICY:**

I. Upon intake of a new, reactivated, or transferred client by the Rolla Regional Office and assignment to CCDDR for Support Coordination services, the following materials shall be provided to all new clients served by CCDDR, including transferred clients and reactivated clients, at the time of the initial plan meeting:

A. Client/Family Handbook, which includes:

- Background of CCDDR
- Overview of Person Centered Planning process
- Types of services available
- Overview of Targeted Case Management
- Support Coordination performance indicators
- Appeals processes
- Frequently asked questions

B. After hours/emergency contacts and hours of operation

C. CCDDR Code of Ethics Statement

D. HIPAA Privacy Practices Notice/Signature Page

E. Client Rights Form/ Signature Page

F. Releases of Information

G. CCDDR Release/Medical Info. Form (if client plans to participate in CCDDR-sponsored programs/activities in coming year)

H. "Ready in Three" Disaster Preparedness Brochure

I. CCDDR Brochure

**REFERENCES:**

- CARF Standards Manual, Sections





*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-55*

**APPROVAL OF AMENDED POLICY #3**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #3, Client Records.
2. That the Board hereby amends and adopts Policy #3 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-55



Policy Number: 3 Effective: May 1, 2008 Revised: April 20, 2009, April 19, 2010, October 16, 2017
Subject: Client Records

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to have an official record for each client served by the agency.

**POLICY:**

The client record is the property of the CCDDR and is maintained for the benefit of clients and/or their responsible parties, and CCDDR staff. CCDDR will maintain the security and confidentiality of client records and safeguard the information contained in the client record against loss, tampering, or use by unauthorized persons. The content and format of client records are standardized according to joint Division of DD and Senate Bill 40 Targeted Case Management guidelines, in order to facilitate:

- Accessing client information
- Filing in the record
- Charting accurately and punctually
- Auditing/reviewing records
- Consistency among staff making entries into records

**I. Single Official Record (SOR)**

A. A single official record for each client served by CCDDR shall be maintained within the CCDDR facility.

**II. Content and Format**

A. The client record will contain separate sections for the following categories of information: client admission/discharge/transfer information, legal documents, the current Individual Support Plan, monthly/quarterly reports, correspondence, financial information, assessments/evaluations, health information, and other pertinent information.

**III. Location of The Client Record**

A. The client record of all clients served by CCDDR will be located in a secured area within the CCDDR office. Records shall be stored in an area reasonably protected against breaches in confidentiality, water damage, and other hazards. The Historical Record of

- clients served by CCDDR (documents over 7 years old) shall be located at the Rolla Regional Office.
- B. Support Coordinators are to maintain a working file to be stored in a locked file cabinet for all clients on their caseload. The working file may contain pertinent documents within the current plan year.
  - C. Historical documents (over a year old; not a part of current Plan Year) shall be moved to the CCDDR client record in client records room. Support Coordinators shall provide such documents to the Administrative Assistant as-needed for filing in the client record.
  - D. Client records maintained at the CCDDR facility shall contain no more than seven (7) years of data, after which documents shall be transferred to the Rolla Regional Office for inclusion in the client's Historical Record via microfilm and/or disposed of, as appropriate.
  - E. Client records may be removed from CCDDR premises only in accordance with a court order, subpoena, statute or transportation to another service site.
    - 1. When records are transported, the security and confidentiality of the record is the responsibility of the staff person who is transporting the record.
    - 2. Staff who remove records from CCDDR premises without authorization are subject to disciplinary action, including dismissal.

#### IV. Custodian Of Client Information

The custodian of the client records at CCDDR shall be the Administrative Assistant.

#### V. Access To Client Record

- A. Anytime staff removes the physical client record from the client records room, the staff must check these out. The Administrative Assistant shall maintain a check out log form of all files checked out of the client records room. The Administrative Assistant shall indicate on check out form time and date file was checked out, what file was checked out, and have the Support Coordinator sign.
- B. All files checked out during the day by staff must be returned to the client records room at the end of the day to be re-filed.
- C. When the staff person has finished with the file, it is to be submitted to the Administrative Assistant, who will log the time the file has been checked back in, and re-file the record.
- D. CCDDR Support Coordinators as a general rule should only check out files for persons on their caseload.
- E. Except in certain circumstances, the client served and/or their legal representative has the right to review and obtain copies of medical/health information about him/her that is maintained in agency records and used for making decisions about the client. Access to records, copying of records, changes to health information contained in record, etc. shall comply with Policy # 25, HIPAA Compliance, as well as Policy # 26, Confidentiality. Per Policy # 25, HIPAA Compliance, the client or their legal representative must request

in writing for access to inspect, or receive copies of, Protected Health Information except in those instances covered by Federal Regulation and outlined in the Notice of Privacy Practices acknowledged at admission, and must further specify the exact information requested for access.

### Copying

Physical copies can be made of client record data by staff. These physical copies can be for their own client working file or to fax a document to ensure no original physical documents leave the facility. Staff that remove physical documents from the file for copying/faxing are responsible for putting the file back into its original order and condition in which it was removed. Appropriate authorizations must be in place before CCDDR staff release confidential client information to outside entities.

### VI. Annual Audit Of Client Records

The client Permanent File maintained by CCDDR shall be audited annually by the Director or designee when the new annual plan is filed into the client record to ensure required documentation is in place per State of Missouri and/or federal Medicaid waiver guidelines. The audit shall determine if documents required per Division of DD and SB 40 standardized Records Management filing guide, as well as required Medicaid waiver documentation are in place in all client files. A checklist guide shall be developed to assist the Director or designee in this audit of client files. If there are missing documents in the client file, the assigned Support Coordinator shall make every effort to locate the missing data.

### **REFERENCES:**

- Division of DD and SB40 Standardized Filing Guide
- SB 40 Records Retention Schedule, MO Secretary of State's Office
- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-56*

**APPROVAL OF AMENDED POLICY #4**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #4, Client and Guardian Feedback.
2. That the Board hereby amends and adopts Policy #4 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-56



Policy Number:  
4  
Effective: May 1, 2008  
Revised: October 16, 2017

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Subject: Client/Guardian Feedback

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to actively and continually solicit input and involvement of clients served and/or their legal representatives through a variety of methods, both formal and informal. The information collected will be analyzed and used by CCDDR leadership in governance; client Person Centered Planning; evaluation of agency strategic planning; program development; financial planning; resource planning; and organizational advocacy in order to meet or exceed the needs and expectation of clients, their family members, stakeholders and the community.

**POLICY:**

- I. Clients and their families are encouraged to express their needs and feedback with any CCDDR staff member, Support Coordinator or the Director at any time.
- II. CCDDR annually surveys all clients and/or their legal guardians at the time of the annual plan meeting with regard to support satisfaction. Results of this survey are included in the agency's Strategic Plan, Annual Report, and Outcomes Management Plan.
- III. Clients and/or their appointed guardians are surveyed regularly with regard to current support needs a minimum of once every three years, coinciding with the board's Strategic Planning process.
- IV. Clients and/or family members are also welcome to provide input at any Board of Directors meeting of CCDDR, per the Missouri Sunshine Law.
- V. Clients and/or their legal representatives are expected and encouraged to take an active part in the Person Centered Planning process.

**REFERENCES:**

- CARF Standards Manual
- Division of MR/DD Person Centered Planning Guidelines
- Missouri Sunshine Law, Chapter 610 RSMo





*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-57*

**APPROVAL OF AMENDED POLICY #5**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #5, Identification of Staff Credentials.
2. That the Board hereby amends and adopts Policy #5 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-57



Policy Number: 5 Effective Date: May 1, 2008 Revised: October 16, 2017
Subject: Identification of Staff Credentials

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to provide clients and/or their legal representatives with identification and credentials of the Support Coordinator assigned to them.

**POLICY:**

- I. Clients and/or their legal representative will receive information about their assigned Support Coordinator.
- II. The information provided will include the following:
  - A. The name of their Support Coordinator, and emergency contact information.
  - B. The credentials of their Support Coordinator, including education and experience, and relevant training.
- III. Such information may be provided to new clients and/or their legal representative as part of requesting who their Support Coordinator shall be, if requested.

**REFERENCE:**

- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-58*

**APPROVAL OF AMENDED POLICY #6**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #6, Client and Guardian Grievance and Complaint Process.
2. That the Board hereby amends and adopts Policy #6 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-58



Policy Number: 6 Effective: May 1, 2008 Revised: April 20, 2009, October 16, 2017
Subject: Client/Guardian Grievance & Complaint Process

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to ensure a process for filing client complaints and grievances from clients served and/or their legal representatives in order to provide guidance for receiving, considering and resolving client complaints and grievances filed with the agency. All complaints and grievances shall be heard promptly, investigated appropriately, and where possible, resolved informally. No client served by CCDDR shall be retaliated against or be denied services for filing a complaint or grievance. A review of formal complaints, grievances and appeals can give the organization valuable information to facilitate change that results in better customer service and results for the clients served.

**POLICY:**

- I. The client or their legal representative may file a complaint with regard to the Support Coordination services provided by CCDDR, if the client/guardian believes their rights have been violated, abuse or neglect has taken place, and/or to voice general concerns with regard to the Support Coordination services being provided by CCDDR.
- II. The CCDDR Director will initially review all written complaints/grievances and determine a resolution/disposition of a complaint. Complaints shall be categorized by the Director within one of three categories:
  - A. Information  
An informational report of dissatisfaction which may include but not limited to: violation of a DMH standard or CCDDR policy, contract provision, rule or statute, or a practice or service is below customary business or medical practice.
  - B. Grievance  
Client reporting a violation of client rights per 630.110.1.
  - C. Suspicion/Allegation of Abuse & Neglect  
Class I neglect, class II neglect, misuse of funds/property, physical abuse, sexual abuse, or verbal abuse has occurred as defined in 9 CSR 10-5.200.

### III. Abuse/Neglect or Rights Violations

- A. If in initially reviewing the written complaint the Director finds evidence of abuse or neglect, or evidence of a violation of client's rights on the part of Support Coordination staff or other CCDDR employee in reviewing a grievance, this shall be reported immediately per the relevant state statutes/Division Directives, and steps shall be taken to ensure client safety, if necessary.
- B. Complaints with regard to human rights violations by CCDDR staff may be made within this process or can be made with the Dept. of Mental Health Client Rights Monitor at:

Client Rights Monitor  
Department of Mental Health  
P.O. Box 687  
Jefferson City, Mo 65102  
1-800-364-9687

### IV. Dissatisfaction with Services

In the case of "informational" grievances (#1 previous) including dissatisfaction with Support Coordination services, the following steps shall be taken:

- A. If informal efforts do not produce a satisfactory solution, a complaint with regard to the Support Coordination services provided by CCDDR may be filed in writing by completion of a CCDDR Complaint/Grievance Form. In all cases, review actions taken and documentation made will remain confidential.
- B. Complainant shall be informed in writing within three (3) business days that the formal complaint has been received and is being reviewed. In addition to completing the form, complainants have the right to present any additional information they feel to be pertinent to the complaint in a meeting with the CCDDR Supervisor. Before considering filing a complaint, it is encouraged that the complainant try to resolve the matter informally by discussing it first with the Support Coordinator.
- C. Within seven (7) working days after the complaint is filed, the Supervisor will submit his findings to the CCDDR Director. A letter confirming/not confirming the allegations will be sent to the client and/or their legal representative and CCDDR staff alleged to have been involved. If the letter confirms the allegation(s), further actions will be outlined in the letter.

- D. If the complainant disagrees with the Supervisor's disposition of the complaint, they can appeal to the CCDDR Director, who will have 10 working days in which to make a decision with regard to the complaint. In this decision, the CCDDR Director may accept, reject or modify the Supervisor's initial recommendation, or s/he may return the case to the Supervisor for further proceedings.
  - E. The Director shall specify the matters to be addressed in the further proceedings and shall specify the period within which those proceedings shall be conducted, not to exceed ten (10) working days.
  - F. If the complainants disagree with the decision of the CCDDR Director, they can appeal to the CCDDR Board Chairperson, who will have 10 days in which to make a decision with regard to the complaint. In this decision, the CCDDR Board Chair may accept, reject, or modify the Director's recommendation, or he/she may return the case to the Director for further proceedings.
  - G. If the complainants disagree with the decision of the Board Chairperson, they may complain to the full Board of Directors, whose decision on all complaints shall be final. The CCDDR Board of Directors shall review such appeals at the next regularly-scheduled board meeting, in closed session if deemed appropriate.
  - H. The complainant shall be encouraged to file a grievance with the Dept. of Mental Health/Rolla Regional Office if s/he is not satisfied with the outcome/disposition of the complaint decision rendered by the CCDDR Board of Directors.
  - I. Obstruction of a complaint investigation or retaliation of any kind on behalf of CCDDR staff involved shall be reported to the CCDDR Director (or Board Chair, or Board of Directors, as appropriate) who shall take action to eliminate the obstruction or retaliation. Staff members are subject to disciplinary action for engaging in any obstruction of or retaliation with regard to a complaint.
- 
- V. The decision-maker at each step for good cause may extend time limits designated in this policy.
  - VI. CCDDR shall annually review all formal complaints that have been filed with the agency in an effort to identify trends and areas of needed improvements, and develop a Plan of Action to mitigate such complaints.
  - VII. CCDDR prominently displays at each service site a Client Rights poster that provides the name, mailing address and phone numbers to whom grievances/complaints may be addressed.



**REFERENCES:**

- CARF Standards Manual
- 9 CSR 10-5.200 (MO Code of State Regulations)
- 9 CSR 45-3.030 (MO Code of State Regulations)
- RSMo 630.110.1. (Revised MO Statutes)

**CAMDEN CO. DEVELOPMENTAL DISABILITY RESOURCES  
GRIEVANCE/COMPLAINT FORM-SUPPORT COORDINATION PROGRAM**

CLIENT INVOLVED IN GRIEVANCE: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

NAME OF PERSON FILING GRIEVANCE: \_\_\_\_\_

RELATIONSHIP TO CLIENT: \_\_\_\_\_

**WHAT IS/ARE YOUR GRIEVANCE(S) OR COMPLAINTS? PLEASE EXPLAIN IN DETAIL** (add pages if needed as well as other documentation)

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**DESCRIBE YOUR EFFORTS TO RESOLVE THIS INFORMALLY WITH YOUR ASSIGNED SUPPORT COORDINATOR AND/OR OTHER TEAM MEMBERS** (add pages if needed):

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**WHAT WOULD YOU LIKE TO SEE HAPPEN IN THIS MATTER?** (add pages if needed)

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SIGNATURE OF GRIEVANT \_\_\_\_\_

DATE \_\_\_\_\_

**CCDDR SUPERVISOR RESOLUTION OFFERED** (add pages if needed):

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Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I AGREE WITH THE ABOVE RESOLUTION  Yes  No If "No," I wish to appeal the above resolution  Yes  No

SIGNATURE OF GRIEVANT: \_\_\_\_\_ DATE: \_\_\_\_\_

**CCDDR DIRECTOR RESOLUTION OFFERED** (add pages if needed):

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Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I AGREE WITH THE ABOVE RESOLUTION  Yes  No If "No," I wish to appeal the above resolution  Yes  No

SIGNATURE OF GRIEVANT: \_\_\_\_\_ DATE: \_\_\_\_\_





*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-59*

**APPROVAL OF AMENDED POLICY #7**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #7, Security of Electronic Information.
2. That the Board hereby amends and adopts Policy #7 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-59



Policy Number:

7

Effective Date: May 1, 2008

Revised: August 15, 2016,

October 16, 2017

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Subject: Security of Electronic Information

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to properly secure electronically stored client records, computerized client information and client information transmitted/received via facsimile (fax) machines. All CCDDR staff shall be trained with regard to data security procedures.

**POLICY:**

I. Security of Electronic Data

1. The following measures shall be enacted by CCDDR to protect the security of agency electronic data:
  - A. User's workstations shall be automatically configured to go to screen-saver mode after a maximum period of 15 minutes of inactivity.
  - B. Password authentication shall be required to log back on by users after screen saver mode has been enacted.
  - C. All workstation users shall have individual usernames and passwords that comply with industry standards and eliminate unauthorized access.
  - D. All passwords must meet the following requirements:
    - Not a word in the dictionary
    - Are 9 or more characters in length
    - Include a number or character
    - Are randomly generated by network administrator or Director
  - E. All passwords shall be assigned to CCDDR staff by Director or contract IT personnel.
  - F. Separate passwords shall be used to access service monitoring database.
  - G. Employees are not to share passwords and should commit to memory rather than having these written on paper indefinitely.

- H. All client information, files, documents, etc. shall be saved to the network drive by agency staff.
- I. Client information can be temporarily saved to a working file on individual CCDDR workstation PCs and CCDDR portable computers; however, once the working file is completed, the file must be saved to the network drive and immediately deleted afterwards.
- J. Client information cannot be saved on employee home, portable computers, or other devices.
- K. All crucial agency information, such as bank information, bylaws, payroll data, etc., shall be saved to the network drive by designated agency staff.
- L. Only contracted IT personnel and the Director shall have security rights to the network.
- M. In addition to a network firewall, all individual workstations and portable computers shall also employ separate firewalls.
- N. All data drives are maintained by the contracted database entity.
- O. Designated staff shall ensure all media has been thoroughly cleansed of any client data before the media is released or disposed.
- P. Access to data drives containing client data shall be controlled, by designated staff through:
  - Access control lists to network media
  - Physical access control to hardware
- Q. CCDDR employees shall not load software from any source onto their assigned workstation or any other CCDDR equipment, without prior approval of the Director.
- R. Software shall be loaded on workstations only by designated CCDDR employees.
- S. CCDDR workstations shall be situated within work areas to prevent incidental observation of screens that may contain Private Health Information (PHI). Failure of employees to comply or assure compliance with this policy may result in disciplinary action.

## II. Staff Access to Logging/Billing System Away from CCDDR Facility

- 1. The service monitoring database system is a web-based system designed for user convenience and can be accessed from other computers via the Internet. Nevertheless, security and confidentiality of client information remains paramount, and state/federal

confidentiality laws apply. The following guidelines apply to all CCDDR employees when accessing the service monitoring system away from the CCDDR facility:

- A. As a general rule, the database system should only be accessed from a CCDDR portable computer; however, employee-owned home or portable computers can be used only when absolutely necessary.
- B. Access from a computer located in public place is prohibited.
- C. No other members of employee's family are authorized to view confidential information regarding CCDDR; therefore, steps must be taken to place monitors in secure locations or perform work when employee's family members are not present and do not have access.
- D. Due to security concerns, use of unsecured wireless connections to access the database is prohibited.
- E. Passwords for accessing the database are not to be written on paper in employee's home, but rather committed to memory.
- F. Employees' home or portable computers must have the following:
  - Firewall protection
  - Anti-virus protection
  - Controls set to time-out after a maximum of 15 minutes of inactivity, with password authentication required to log back on

### III. Virus Protection

1. Virus protection for the network shall be maintained by CCDDR's contracted IT agent.
2. All workstations, portable computers, PDA's or any other device that connects to the network shall be protected using the anti-virus software for that device installed by designated CCDDR staff. Equipment that has not been purchased or leased by CCDDR shall not be allowed to connect to the CCDDR network.
3. Anti-virus server software shall be configured by CCDDR's contracted IT agent to check for virus signature updates daily. Special virus signature updates created in the event of a known virus, will be manually pushed by CCDDR's contracted IT agent to the network server, PCs, and portable computers within 24 hours of the time the receipt of the update has been received.
4. Anti-virus software shall be kept by CCDDR's contracted IT agent at the current release or no more than one release below the most current release version.



IV. Use of Facsimile (Fax) Machines

1. Fax machines are to be located in secure areas.
2. The designated person shall periodically check for and distribute incoming documents.
3. When faxing PHI the CCDDR staff person must:
  - Insure that documents are handled securely/confidentially
  - Insure that the document is delivered to the addressee
  - Verify the destination when sending number for the first time
  - Include a confidentiality notice within the fax cover sheet – no client PHI will be contained on the fax coversheet

V. Use of Internet

1. Employee use of the Internet for personal reasons while on duty is prohibited.

VI. Annual Review of Technology Needs

1. On an annual basis, the Director in consultation with the CCDDR contracted IT agent, shall evaluate the agency's current hardware and software systems, and how well current systems meet the agency's needs.

**REFERENCES:**

- HIPAA Privacy & Security Rule 68 FR 8334 & 65 FR 82462
- CARF Standards Manual
- CCDDR Technology Plan



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-60*

**APPROVAL OF AMENDED POLICY #8**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #8, Client Rights.
2. That the Board hereby amends and adopts Policy #8 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-60



Policy Number:

8

Effective: May 1, 2008

Revised: April 19, 2010,

October 16, 2017

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Subject: Client Rights

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to support and protect the fundamental human, constitutional, and statutory rights of clients served by CCDDR. Individual rights as citizens are not limited except through legal proceedings such as guardianship, when an individual is posing an immediate danger to themselves or others, or if the planning team has agreed to a limitation of rights and a due process procedure has been followed.

**POLICY:**

- I. All clients are to be treated with dignity and respect at all times by CCDDR staff and contracted agency staff. The clients' right to privacy is protected.
- II. CCDDR protects the rights of clients served in accordance with State of Missouri Statutes (RSMo 630.110 and 630.115) and Division of Mental Retardation & Developmental Disabilities Rules and Regulations, specifically "Individual Rights of Persons Receiving Services From The Division of Mental Retardation & Developmental Disabilities".
  - A. Consent for services is obtained from all clients served by CCDDR and is included in the client record. If the client is a minor or is not legally competent to give informed consent, the person legally able to give consent does so, and it is documented in the client record.
  - B. Prior to the beginning of service delivery and/or at initiation of service delivery at the initial Person Centered Plan meeting, and then annually thereafter, each client served by CCDDR and/or their legal representative is provided with a copy of CCDDR's Client Rights & Responsibilities form, and a signature page is obtained. The explanation of rights shall be in a form that can be understood by the client, and in a media form that takes into account any physical challenges the client has (i.e. audio CD for visually impaired, etc.). This explanation of rights and procedures is documented in the client's record by obtaining the signature page of the Client Rights Form from the client/guardian. Clients will have their rights reviewed annually and documented in their client record. In addition, each client will be given a copy of the CCDDR Client/Family Handbook, further explaining rights and grievance/complaint processes.

- C. A restriction to a client's rights shall only be considered by the planning team after all other less restrictive alternatives have been attempted to address the issue, including use of Positive Behavioral Supports, Functional Analysis of Behavior, etc. No client's rights shall be limited by the planning team without due process as defined by state regulations, including the guardian's written consent for the limitation and approval by the Rolla Regional Office PMAG (Human Rights) Committee.
- D. If it is deemed necessary to propose any limitation of rights to an individual served by CCDDR, the following procedure and appeal process will be followed:
1. The Support Coordinator will contact the agency QDDP, the client, the Regional Center, the person's family, guardian, or advocate to meet as a team to determine if a rights restriction is warranted in lieu of or in conjunction with positive behavioral supports.
  2. The individual and their guardian shall receive written notification of the rights restriction to include specific rights which will be limited, the length of time they will be limited, how frequently the limitation will be reviewed, the actions the person must demonstrate or eliminate in order to no longer have these limitations, and the process for appealing the decision.
  3. Signed documentation is available that the individual was involved with the decision to limit rights.
  4. The Support Coordinator shall make every effort to make sure the individual is aware of the proposed limitation of his/her rights. The Support Coordinator shall use communicational aides to ensure the individual can comprehend to the best of their abilities, the proposed limitation of their rights. The number for the DMH Client Rights Monitor shall be provided to the client as part of the process.
  5. Within seven (7) working days after notification of the proposed limitations, the client may meet with a review panel to present their response to the proposed limitation of rights. The review panel, as needed will utilize available resources, such as an attorney, People First Chapter, DMH Client Rights Monitor (800-364- 9687), MO Protection & Advocacy, etc for in-service training or for additional information.
  6. In the event the client and their advocate disagree with the proposed limitation of rights and cannot reach a resolution with the review panel, they may appeal in writing to request a meeting with the agency management. The agency will assist the individual and their advocate with any questions pertaining to the appeal and inform them as to when and where their appeal will be reviewed.
  7. The guardian must provide consent to the rights limitation with their signature on the Rolla Regional Office Personal Plan Systems & Funding page.
  8. The length of time on limiting the rights of any individual shall be reviewed by the Rolla Regional Office PMAG Committee, and communicated to the CCDDR Support Coordinator when review is needed.
  9. Rights restrictions are to be reviewed at least annually by the Rolla Regional Office PMAG Committee at the time of the plan due date.

III. All limitations of client's rights approved in this manner shall be documented in each client's Person Centered Plan, and shall include a provision as to how the restriction may be removed, Outcomes needed to remove the restriction, as well as the phone number of the outside advocate for the Dept. of Mental Health.

**REFERENCES:**

- Section 630.110 and 630.115 RSMo
- CARF Standards Manual
- Brochure: "Individual Rights of Persons Receiving Services From the Division of Developmental Disabilities"
- Division of DD Certification Principles
- 9 CSR 45-3.030



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS*  
**RESOLUTION NO. 2017-61**

**APPROVAL OF AMENDED POLICY #9**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #9, Client Abuse and Neglect.
2. That the Board hereby amends and adopts Policy #9 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-61





Policy Number: 9  
Effective: May 1, 2008  
Revised: April 19, 2010,  
October 16, 2017

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Subject: Client Abuse/Neglect

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to be in compliance with 9 CSR 10 5.200 of the Missouri Code of State Regulations (CSR) as well as Dept. Operating Regular (DOR) 2.210 of the Department of Mental Health; it shall be the policy of Camden Co. Developmental Disability Resources that abuse or neglect of individuals served by this organization is strictly prohibited.

The staff, Board Members, and provider network that CCDDR works with are all cognizant of the fact that persons with developmental disabilities are vulnerable to abuse and neglect as well as being taken advantage of with regard to personal assets. CCDDR as an agency shall have no tolerance of abuse or neglect of persons served whatsoever, and shall take all necessary steps to adhere to all applicable state statutes and policies in this area. CCDDR shall train all new staff on all aspects of identifying and reporting suspected or observed abuse/neglect/exploitation, as well as methods of conducting inquiries into possible abuse, neglect, and/or financial exploitation when there is uncertainty as to Reasonable Suspicion.

**DEFINITIONS:**

Neglect:

This is the failure of any employee to provide reasonable or necessary services to maintain the physical and mental health of any client when that failure presents imminent danger or the health, safety or welfare of a client, or a substantial probability that death or physical injury would result.

Misuse of Funds/Property:

The misappropriation or conversion for any purpose of a client's funds or property by an employee or employees with or without the consent of the client, or the purchase of property or services from a client in which the purchase price substantially varies from the market value.

Verbal Abuse:

This is when an employee makes a threat of physical violence to a client, when such threats are made directly to a client, or about a client in the presence of a client.

### Medication Error:

This is any mistake in prescribing, dispensing, or administering medications. A medication error occurs if a client receives an incorrect drug, drug dose, dosage form, quantity, route, concentration, or rate of administration. This includes failing to administer the drug or administering the drug on an incorrect schedule. Levels of medication errors are:

- a. Minimal: medication error is one in which the client experiences no or minimal adverse consequences and receives no treatment or intervention other than monitoring or observation.
- b. Moderate: medication error is one in which the client experiences short-term reversible adverse consequences and receives treatment and or intervention in addition to monitoring or observation.
- c. Serious: medication error is one in which the client experiences life-threatening and/or permanent adverse consequences or results in hospitalization. Serious medication errors may be considered abuse or neglect and shall be subject to investigation by the Department of Mental Health.

### Physical Abuse

This is when an employee is purposefully beating, striking, wounding or injuring any client in any manner whatsoever; an employee mistreating or maltreating a client in a brutal or inhumane manner. Physical abuse includes handling a client with any more force than is reasonable for a client's proper control, treatment or management.

### Sexual Abuse

When there is any touching, directly or through clothing, of a client by an employee for sexual purpose or in a sexual manner.

This includes but is not limited to: kissing; touching the genitals, buttocks, or breasts; causing a client to touch the employee for sexual purposes; promoting or observing for sexual purpose any activity or performance involving clients including any play, motion picture, photography, dance, or other visual or written representation; failing to intervene or attempting to stop inappropriate sexual activity or performance between clients; encouraging inappropriate sexual activity or performance between clients.

## **POLICY:**

### I. Reporting Requirements

The Dept. of Mental Health Departmental Operating Regulation (DOR) 2.210 requires all CCDDR employees to immediately report any complaints they receive or make a complaint themselves if they know through direct or indirect means that abuse, neglect, misuse of funds/property has occurred or suspect that such has occurred. Employees who fail to report complaints of known or suspected incidents of abuse, neglect or misuse of funds/property or any other misconduct are subject to discipline, criminal prosecution or both.

Abuse, neglect, or misuse of funds/property may be discovered through:

- Service Monitoring
- Discovery of unknown/suspicious injuries during physician visits
- Discovery of unknown/suspicious injuries during visits from Community RN
- Misuse of funds discovered through Regional Office fiscal review
- Verbal or written complaints
- Observations in the community
- Reviewing documentation i.e. event reports, observation notes, staff logs, provider agency monthly reports, etc.

When the Support Coordinator receives or discovers any information suggesting abuse, neglect or misuse of funds/property, the Support Coordinator will do the following:

- Contact the provider and ensure the safety and well-being of the client(s). Ensuring the safety of the client may involve removing clients from the facility and/or placing a monitor in the facility pending an inquiry or investigation, in consultation with Rolla Regional Office.
- Inform Director/Supervisor of situation.
- Ensure that a Division of DD Community Event Report Form is thoroughly and accurately completed, contains a detailed account of any actions or statements made surrounding the allegation, and lists all potential witnesses. The Community Event Report must be faxed to the Regional Office no later than the next business day.

## II. Inquiries

In instances where it is uncertain as to if Reasonable Cause for an investigation exists, the CCDDR Director or Regional Office Director may request that the Support Coordinator perform an inquiry. An inquiry is designed to gather facts so the Regional Office can determine if an investigation is needed, and if Reasonable Cause exists for an investigation. All client injuries of unknown origin must be followed up with an inquiry. Inquiries must be completed within 10 working days.

A designated staff member (typically the Support Coordinator, Regional Center QA staff and/or SC Supervisor) will do the following:

- Will gather additional information if necessary and compare the information provided to the definitions of abuse, neglect, misuse of funds/property
- Will ask the provider agency to secure any physical evidence pertinent to the complaint if available
- Ensure the Department of Social Services, Children's Division (1-800-392-3738) is contacted if the client(s) is under the age of 18; OR
- Ensure the Department of Health and Senior Services, Elderly Abuse/Neglect Hotline (1-800-392-0210) is contacted if the client is over the age of 18 and the suspected abuse, neglect or misuse of funds/property occurred while the client was not receiving paid supports from DMH at the time the allegation occurred

- If the information suggests abuse, neglect or misuse of funds/property may have occurred, immediately forward the report to designated regional center personnel for processing as an abuse, neglect, or misuse of funds/property complaint

All CCDDR Support Coordination staff shall receive training in conducting inquiries. Following completion of the inquiry process, if the allegation(s) concern physical abuse, sexual abuse or misuse of funds/property, the designated staff should also do the following:

A. Physical Abuse:

If an injury occurred, ensure:

- Pictures are taken immediately
- A physical examination is performed by a qualified medical staff as soon as practical
- If Support Coordinator discovered abuse during client visit, Support Coordinator is to stay on site to ensure client(s) safety and contact his/her supervisor immediately
- Local law enforcement is contacted

B. Sexual Abuse:

If there is reasonable cause to believe penetration has occurred, ensure:

- A physical examination is conducted immediately
- The physical examination should be performed by a medical professional at a facility qualified in the “rape kit” examination
- Ensure local law enforcement is contacted

C. Misuse of Funds/Property:

- Ensure local law enforcement is contacted

If the Support Coordinator suspects or has observed abuse/neglect during a Service Monitoring visit or any other visit to the client, s/he shall stay on site and ensure the safety of the client(s). Ensuring the safety of the client may involve removing clients from the facility and/or placing a monitor in the facility, in consultation with Rolla Regional Office. The Support Coordinator will also contact his/her supervisor, and contact law enforcement officials, if necessary.

III. Investigation/Disposition Process

The Regional Office makes the determination as to if an investigation shall be initiated. If so, the Regional Office completes an Investigation Request form and this along with the Community Event Report form are electronically submitted to the Department of Mental Health Investigative Unit for review to determine that all criteria for investigating the complaint are met. The DMH Investigations Unit completes the Request form, assigns an investigator and determines the timeframe for beginning and ending the investigation.

The investigator reviews the circumstances surrounding the allegation and interviews all persons having knowledge relative to the allegation. Once interviews are completed, the investigator writes the investigative report and forwards it to the Investigative Unit for review. Following internal review, the final report and a list of recommendations with regard to the outcome of the investigation is forwarded to the Regional Office Director, who is the determiner for disposition of the complaint.

The Regional Office Director reviews the investigative report and recommendations then determines if sufficient information is present within the investigative report to make a preliminary finding. If the Director determines that additional information is needed prior to making a finding, the Director completes the Determiner Response form to seek additional information. If the information is sufficient, the Director makes a preliminary determination to substantiate or not substantiate the allegation and notifies the alleged perpetrator of this preliminary finding.

If a substantiation finding is made, the alleged perpetrator may exercise his or her due process right by meeting with the Regional Office Director or providing additional information in writing to the Director for review and further consideration. The Regional Office Director considers any additional information pertinent to the allegation and subsequent investigation and makes a final determination to substantiate or not substantiate the allegation.

If the alleged perpetrator disagrees with the final decision of the Regional Office Director, that person may appeal the decision to the Director of the Department of Mental Health. The Office of the General Counsel for the department will assign a hearings officer to review the case, set a hearing date and hear the appeal from the alleged perpetrator. The hearings officer will consider all relevant testimony presented at the hearing and render the final decision of substantiation or no substantiation for the department. The Final Determination form is completed once all due process and administrative hearing rights have been exhausted and the final decision rendered.

## **REFERENCES:**

- DOR 2.210-Placement Abuse and Neglect Definitions and Procedures
- DOR 4.270-Reporting Unusual Events
- Div. Dir. 3.010-Inquiry into injuries of Unknown Origin
- Div. Dir. 3.050-Complaint Response Process
- Div. Dir. 4.030-Supplemental A/N Protocol for Children
- Div. Dir. 4.070-Event Reporting Process
- 9 CSR 10-5.200
- Sections 36.390; 630.167;630.168;630.170 RSMo
- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS*  
***RESOLUTION NO. 2017-62***

**APPROVAL OF AMENDED POLICY #14**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #14, Board Governance.
2. That the Board hereby amends and adopts Policy #14 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-62



Policy Number:

14

Effective: May 1, 2008

Revised: April 19, 2010

October 16, 2017

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Subject: Board Governance

## **PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have sound governance policies in order for the Board of Directors to effectively manage the operations of the Board and in order for the agency to accomplish its stated mission.

## **POLICY:**

Board members shall the following basic legal duties:

- A duty of care
- A duty of loyalty
- A duty of obedience

This policy complements, but does not replace, the Board's current operating Bylaws.

CCDDR is established as a political subdivision under the laws of Missouri, statute 205.968-205.972. The CCDDR Board of Directors is established as the authority to operate CCDDR in accordance with the above statute, Bylaws, and Board policies.

CCDDR business will be conducted in accordance with the laws of the state of Missouri, Bylaws of the agency, Board policies, and generally accepted business practices that will accomplish the CCDDR mission.

### **I. Authority of Board of Directors**

Each member of the CCDDR Board is legally and morally responsible for all activities of CCDDR. All members of the Board share in a joint and collective authority which exists and can only be exercised when the group is in session.

### **II. Board Member Commitment**

Serving as a Board member of CCDDR involves a very special commitment. To meet that commitment, Board members are expected to:

- Ensure adherence to CCDDR's mission and ethics statements
- Attend and actively participate in all of the Board's meetings
- When absent from a meeting, review minutes and results of the missed meeting



- Do their homework to be prepared to participate fully in Board and committee meetings
- Act only with the full Board, not individually unless authorized to do so by the full Board
- Speak for the full Board only when the full Board sanctions he/she in doing so

### III. Board Delegation of Policy Interpretation to Staff and Public

The Board delegates to the Executive Director responsibility for policy interpretation to the staff and public and for rule making, issuance of procedural directives, and guides not specifically covered or detailed in the Board policies. Such interpretations, rules, and directives have the force of Board regulations unless and until superseded by the Board action.

### IV. Board Member Rights

CCDDR Board members are granted certain specific rights. All Board members have the right to:

- Receive notice of Board meetings and the agenda
- Attend and participate in Board meetings
- Examine CCDDR's books, records, meeting minutes, financial statements, and contracts
- Place items on the Board meeting agenda at the appropriate time

### V. Duty of Board Members not to Compete

A Board member may not use his/her position on the CCDDR Board to prevent CCDDR from competing with the Board business. It is expected that Board members, even after they complete Board service, will not use trade secrets, client lists, or other confidential information acquired by virtue of being a member of the Board.

### VI. Legal Obligations of Board Members

CCDDR Board members are both responsible and liable for CCDDR. The CCDDR Board and the law require every Board member to follow the rule of the reasonably prudent person and the principle of good faith.

The rule of the reasonably prudent person means that the Board will not:

- Mismanage CCDDR in a manner deviating from fundamental management principles, such as planning carefully for the future of CCDDR or its clients, regularly reviewing the financial status of CCDDR, and monitoring compliance with Board policies
- Fail to govern by utilizing all control systems available to CCDDR
- Be involved in self-promotion that provides personal gain to Board members

The principle of good faith means that Board members will:

- Attend all Board and committee meetings to be a part of Board actions
- Read and understand CCDDR's policies and Bylaws
- Pay attention to organizational affairs and keep informed about organization activities
- Ensure that CCDDR is in compliance with legal requirements
- Avoid self-promotion

CCDDR Board members will not:

- Be critical, in or outside of the Board meeting, of other Board members or their opinions
- Use CCDDR or any part of CCDDR for any personal advantage or the personal advantage of friends or relatives
- Discuss confidential proceedings or closed session proceedings of the Board outside the Board meeting
- Promise prior to a meeting how they will vote on any issue in the meeting
- Interfere with duties of the Executive Director and staff or undermine the Executive Director's authority.

#### VII. Board Member Composition

The composition of the Board of Directors shall adhere to state statutes in terms of the following:

1. At least two members of the Board shall be related within the third degree to a person with a developmental disability.
2. At least seven Board members must be residents of Camden County Missouri
3. The total number of Board members shall be nine.
4. All Board members shall be appointed by the Camden County Commission to serve three year terms..

#### VIII. Board Member Selection Process

When there is a vacancy within the Board, the Board shall determine if there is a need to form a Nominating Committee or charge the Executive Director to conduct a search for potential Board members. The Nominating Committee or Executive Director shall be responsible for recommending no more than three candidates to fill the vacancy, which will be submitted to the full Board for review and discussion. Upon finalizing review and discussion by the full Board, the candidates' names shall be submitted for consideration to the Camden County Commission for appointment to the Board.

To be most effective in ensuring the right candidates are considered, the selection criteria shall consider the composition of the current Board, the current Board members qualities, and the needs of CCDDR as an organization. In addition to the consideration of the statutory requirements, some basic qualities Nominating Committee or Executive Director may consider in evaluating potential Board members include the candidates':

- Overall interest and enthusiasm in serving on the Board and in improving the lives of Camden County citizens with developmental disabilities
- Level of integrity
- Prior education/work experience within the field of developmental disabilities
- Team work skills
- Geographic area of residence within the county
- Ability to think toward the future
- Time availability
- Ability to attend Board meetings

The nominating committee shall analyze these qualities along with those of the current Board and consider how the prospective members and current members will work together. The committee may also consider how the prospective members will influence the existing CCDDR Board dynamics.

The ongoing evaluation process of the CCDDR Board and its processes, as well as the annual Board member process, may also influence the selection criteria.

When suitable candidates have been identified, the Nominating Committee or Executive Director shall initiate discussions with them to gauge their interest and provide answers to any questions or concerns. If requested by candidates, the Nominating Committee or Executive Director shall provide candidates with information about the Board and the organization, including: the organization's annual report, promotional brochures, a summary of the organization's services; a summary of the Board's current strategic plan; etc.

The list of candidates shall then be presented to the full CCDDR Board, who shall approve the list of candidates and identify the candidates the Board would like to have appointed. The Board may identify a top candidate or list the candidates in preferential order. Once the list of candidates is approved by the Board, the list of candidates shall be provided to the Camden County Commission, who may choose a candidate from the list to fill the current vacancy and who shall appoint a replacement to the CCDDR Board.

#### IX. New Board Member Orientation

Once the candidate has been appointed to the Board by the Camden County Commission, the Board Chairperson and Executive Director will welcome the new member to the Board and ensure that the new member receives proper orientation to his/her new roles. Information shall be provided to each new Board member at the start of his or her service. This information will assist the new Board member with becoming familiar with CCDDR and its operations, the functions of the CCDDR Board, and the expectations of each Board member. Throughout the term, the information serves as a useful reference tool for CCDDR Board members.

To assure its effectiveness, the information shall be reviewed with all new CCDDR Board members. The information shall be kept up to date as CCDDR policies change or are

introduced. The information shall include materials, reference links, and/or access to the following:

- CCDDR's current mission statement
- A brief history of CCDDR
- A description of CCDDR's structure and operations, including meeting dates and job descriptions
- A copy of the CCDDR Bylaws
- A Board Member Job Description
- All operational policies of CCDDR
- CCDDR's current strategic plan
- Financial information, including the current CCDDR budget, most-recent audit, investments, insurance and funding information
- A list of common acronyms used within field
- A description of the Board's committees and their terms of reference
- The names and contact information of each CCDDR Board member

All new Board members shall review/sign the following forms upon their initial appointment and annually thereafter:

- HIPAA Confidentiality Agreement
- Code Of Ethical Conduct Agreement
- Code of Ethics Statement
- Conflict of Interest Statement
- Social Media Policy Acknowledgement
- Board Member Job Description
- Corporate Compliance Acknowledgement
- Ethical Conduct and Values Statement
- Gift Disclosure Form
- Internet Bank and Financial Access Agreement
- Principles of Teamwork Acknowledgement
- Any other agreements, acknowledgements, or statements adopted or enacted hereafter

Staff members of CCDDR may lead tours of the CCDDR facility as well as the facilities of contracted agencies for new Board members. This will help new Board members to become familiarized with the programs and services both funded and provided by the Board.

In addition, the CCDDR Board Chairperson or a Board committee chairperson may also organize a committee orientation presentation. This can include describing each CCDDR committee and its purpose, reviewing each committee's work plans or assignments, and becoming familiar with each committee's terms of reference.

- X. At the completion of the CCDDR Board orientation process, new Board members may be encouraged to provide feedback and recommendations on the orientation process. This will help strengthen the process for the future. The CCDDR Board Chairperson may also

periodically involve the new Board member in one-on-one reviews of the members' progress following the orientation.

XI. Board Education & Development

Periodically, CCDDR may provide certain Board development activities for all current Board members to enable them to more effectively accomplish their responsibilities as Board members. Such ongoing Board development activities provide Board members with the appropriate knowledge required to be effective decision makers. Board development activities can also help motivate the Board members in their positions. CCDDR may provide Board training & education activities during regular Board meetings, special meetings, or retreats. These orientation sessions can be in the form of presentations, group discussions, or information-sharing meetings. The Board Chairperson can lead a discussion with the new Board members of the organization's values and services. During the discussion, the Chairperson can refer to the Board's work plan and how it relates to the organization's strategies. The content and need for such Board training and education activities shall be determined on an as-needed basis by the Board.

XII. Annual Board Self Assessments

The CCDDR Board of Directors shall complete annual self assessments of the Board as a whole, as well as self assessments of their individual performance as CCDDR Board members. The self assessments shall be used to provide input as to needed Board development activities and orientation activities.

XIII. Implementation Of Board Policies/Procedures

The Executive Director shall develop proposed policies, manuals, plans, job descriptions, or other Board governance materials at the request of the Board, and may also propose new policies, manuals, plans, job descriptions, or other Board governance materials on his/her own accord, subject to Board approval. All policies, manuals, plans, job descriptions, or other Board governance materials shall be implemented only by approval of the full Board in a meeting with a quorum. On an annual basis, the Executive Director and Administrative Team shall review all policies, manuals, plans, job descriptions, Bylaws, or other Board Governance materials and make recommendations for modifications as-needed to the CCDDR Board of Directors, who shall take proposed modifications under advisement. The Executive Director shall enact agency procedures as appropriate and within the guidelines of policies, manuals, plans, job descriptions, Bylaws, or other Board governance materials.

XIV. Exit Process

Board members may resign their position with the Board at any time by submitting a Letter of Resignation to the CCDDR Board Chairperson. The Letter of Resignation shall provide the circumstances with regard to the Board member's resignation. Board members may be reappointed for additional three year terms by the Camden County Commission, should the Commission approve the reappointment.

**REFERENCES:**

- Sections 205.968-205.972 RSMo
- CARF Standards Manual, Section 1J
- CCDDR Bylaws



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-63*

**APPROVAL OF AMENDED POLICY #17**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #17, Financial Management Practices.
2. That the Board hereby amends and adopts Policy #17 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-63





Policy Number:  
17  
Effective: May 1, 2008  
Revised: April 20, 2009, April 19, 2010,  
September 17, 2012, October 16, 2017

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Subject: Financial Management  
Practices

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to implement sound financial management practices that allow for accountability and reduce the threat of fraud or theft with regard to board assets. All financial management practices of the board shall comply with applicable state and federal laws.

**POLICY:**

I. Separation of Functions

CCDDR shall strive to achieve proper separation of all financial transactions and bookkeeping so as to minimize the possibility of theft or fraud with regard to CCDDR assets and funds. The Financial Management Procedures shall identify the separation of functions and all financial processes. No single employee or Board member shall have sole control of processing and approving any financial transaction.

II. Approval & Execution of Expenditures

No expenditure shall be processed if the expenditure will cause the overall annual expenses to exceed the total amount of overall annual expenses authorized in the Board approved annual budget without Board approval through a resolution unless an emergency as defined in the Procurement Policy has been declared or if total income less total expenses does not reflect a negative net income. No expenditure shall be authorized if there is a potential conflict of interest without first being reviewed and approved by the Board through a resolution. All Board members shall have access to CCDDR financial records and may request documentation on any financial transaction at any time. The Board shall receive a monthly summary of all checks written the previous month on all CCDDR banking accounts, and shall approve these payments/expenditures as part of the monthly financial statements.

### III. Signing of Checks

All checks, drafts, and other evidences of indebtedness issued in the name of CCDDR must have the signature of two officers of CCDDR, or one officer and the Executive Director. Persons signing checks shall also be provided copies of invoices that checks are being prepared for as a means of verifying the accuracy and validity of payments. All officers authorized to sign checks as well as the Executive Director shall be covered by a blanket fidelity bond, surety bond, or other similar insurance policy as described in Article IX of the Bylaws.

### IV. Financial Accounting

CCDDR will conduct its financial accounting under the premise of the Proprietary Fund Accounting System, Enterprise Fund accounting principles (accrual basis). This is needed to account for operations that are financed and operated in a manner similar to private business enterprises, where the intent of the Board is to show that costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges and that periodic determination of revenues earned, expenses incurred, and/or net income is appropriate for capital maintenance, public policy, management control, accountability, or other purposes. The accounting and recording of financial transactions shall be done internally and the processes will be identified in the Financial Management Procedures. CCDDR may utilize the services of a CPA to supplement its accounting systems, recording, or reporting in whole or in part if the need arises and is justified.

### V. Fixed Assets

CCDDR shall maintain a list of all fixed assets with a usable life of over 1 year and an original purchase price of \$1,000.00 or more. This list shall document the item, date of purchase, amount of purchase, model number, serial number, physical location, and date/method of disposition, if applicable. Any items determined to be fixed assets under prior criteria shall remain as such for their useful life. All CCDDR property shall be tagged with property control stickers. Prior to disposing of any fixed asset of the board, the CCDDR Board of Directors must first declare the asset as inoperable/unusable or surplus property. For surplus property, sealed bids shall then be solicited by the Board for sale of the item. The fixed asset list shall be updated annually.

### VI. Board Investments

CCDDR may maintain fund balances carried over from prior years or excess funds during the current year. The Board may invest these funds at its discretion into investment accounts. All Board-controlled investments shall comply with Policy #27, Investment of Board Funds.

VII. Unaudited Financial Statements

Unaudited Financial statements shall be completed monthly for the Board's review and approval. Financial statements are to include an income statement for the previous month ended, an income statement for year-to-date as of the last day of the previous month, a balance sheet as of the last day of the previous month, a cash flow statement as of the last day of the previous month, and a cash flow statement for year-to-date as of the last of day of the previous month. The format of the income statements shall show budgeted vs. actual revenues and expenditures for the previous month ended and the year-to-date fiscal year. Each of these reports shall reflect a separation of the Tax Levy funds and transactions (Grants), the Targeted Case Management funds and transactions (TCM), and any other program funds and transactions. The income statements shall also reflect the variances, and the Executive Director shall submit a synopsis of the variances. Copies of the aforementioned reports shall be posted on CCDDR's Web site for public viewing.

VIII. Sharing of Financial Data with Stakeholders

Year-end financial data shall also be shared with CCDDR stakeholders by incorporating this data within CCDDR's Annual Report, which shall be posted on CCDDR's Web site for viewing by the public and any other interested parties.

IX. Annual Audit

CCDDR shall obtain an independent audit of all agency finances from a Certified Public Accountant annually. The audit shall include reports on CCDDR's compliance with internal controls related to financial statements and applicable laws, regulations, contracts, agreements, and grants in accordance with Governmental Auditing Standards, as well as compliance with Circular A-133, "Audits of States, Local Governments, and Nonprofit Organizations." The annual audit shall contain a Management Letter in which findings and recommendations are provided.

X. Pledged Securities

CCDDR shall obtain pledged securities from financial institutions in which the account balance is or may exceed \$250,000.

XI. Petty Cash

CCDDR may maintain a petty cash fund to meet immediate and relatively minor purchases of the agency. An amount of no more than \$25.00 may be maintained in the petty cash fund. A ledger shall document all purchases from petty cash, and signed receipts shall be stapled to the petty cash ledger. The petty cash fund shall be reconciled monthly.

XII. Business Credit Accounts

CCDDR shall maintain credit accounts at selected places of business for office supplies and other routine supplies required by the board for its operations. All such applications for business credit shall be prior-approved by the Executive Director and account balances shall be paid in full to the business each month by CCDDR. CCDDR shall not obtain business credit accounts at businesses in where finance charges are made for balances less than one month old.

XIII. Review of Service Billing

On a monthly basis, the Executive Director or designated supervisor shall review all Targeted Case Management billings to determine their accuracy, determine why unpaid claims were not paid, and implement/follow up with corrective actions as needed.

XIV. Cost Analysis of Services Provided

On a monthly basis, the Executive Director shall prepare a report for the CCDDR Board of Directors showing total program costs, including both direct costs and indirect (overhead) costs, revenues received, and the net gain or loss for that month. An annual report based on year end data shall be provided to the CCDDR Board of Directors in January for the prior year. The annual reports shall contain comments by the Executive Director and may contain suggestions to improve efficiencies to the programs as a means of ensuring continued financial viability.

**REFERENCES:**

- CARF Standards Manual
- Chapter 70, Revised MO Statutes
- Chapter 67, Revised MO Statutes



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS*  
***RESOLUTION NO. 2017-64***

**APPROVAL OF AMENDED POLICY #18**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #18, Annual Budgeting Process.
2. That the Board hereby amends and adopts Policy #18 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-64



Policy Number:

18

Effective: May 1, 2008

Revised: December 19, 2016

October 16, 2017

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Subject: Annual Budgeting Process

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to develop an operating budget on an annual basis. CCDDR shall produce an annual operating budget reflective of the Board's mission, priorities, and Strategic Plan.

**POLICY:**

I. Fiscal Year

The fiscal year of the Board shall be for a period of twelve months based on the calendar year.

II. Timelines

The Board shall approve an annual budget which shall reflect the Board's anticipated income and expenses for the following year and resulting net gain or loss. The proposed budget shall contain a comparative statement of budgeted vs. actual for the preceding two fiscal years and estimated revenues/expenditures for the new upcoming fiscal year. The Board's objective is to complete and approve the annual budget for the next fiscal (calendar) year by the November Board meeting; however, circumstances may require the Board delay completion and approval. If the annual budget is not completed and approved by the beginning of the next fiscal (calendar) year, the previous year's budget shall be the budget until the current fiscal year's budget can be completed and approved. Copies of the Board's approved annual budget shall be filed with the Camden County Clerk's office and with the State Auditor's Office.

III. Budget Message

A Budget Message, completed by the Executive Director, shall accompany the proposed budget describing important features of the proposed budget, major changes from the previous year, as well as trends, threats, and opportunities currently facing the Board. The Budget Message shall identify those items within the Board's current Strategic Plan that impact the proposed budget.

IV. Budget To Be Developed Based Upon Items Contained In Current Strategic Plan

Any items within the Board's current Strategic Plan scheduled to be implemented during the budget year that have a fiscal impact to the Board shall be contained within the proposed budget. As a result, the Board's annual budget shall tie in with the Board's Strategic Plan, and therefore be reflective of stakeholder input and priorities of the Board as determined in this manner.

V. Budget To Be Developed Based Upon CCDDR Funding Policies/Procedures

Separate CCDDR policies/procedures outline the Board's annual process with regard to allocating funds for the Targeted Case Management (TCM) program, Grants (county tax fund) program, other programs, and other agency or administrative needs. The policies and procedures outlined in this document complement these policies/procedures.

VI. Deficit Budgets

The total expenditures in a fiscal year should not exceed budgeted revenues anticipated for the year unless adequate reserves or restricted funds are in place to fund the budget deficit. An explanation for a budget deficit is required in the Executive Director's Budget Message. Budgeted expenditures should not exceed available revenues, including reserves or restricted funds from prior years.

VII. Budget Amendments

Budgets may be revised during the year to allow for additional expenditures, following Board approval. In such cases, the Board shall develop an amended or revised budget, and shall not incur the additional budget expenditures prior to approving the amended or revised budget. Any time actual expenditures of the budget exceed revenues, the Board shall approve a Budget Amendment prior to incurring the overage. Copies of the approved amended or revised budget shall be filed with the Camden County Clerk's office and with the State Auditor's Office. Approved expenditures shall not exceed available revenues (both annual revenues and fund balance reserves) in any one fiscal year.

VIII. Miscellaneous

The Board may lease, purchase, contract for, or directly provide the goods and services it deems necessary to its mission.

**REFERENCES:**

- CCDDR Bylaws
- Section 70, Revised MO Statutes
- CARF Standards Manual
- CCDDR Funding Policies/Procedures





*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-65*

**APPROVAL OF AMENDED POLICY #19**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #19, Executive Director Succession.
2. That the Board hereby amends and adopts Policy #19 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-65



Policy Number:

19

Effective: May 1, 2008

Revised: October 16, 2017

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Subject: Executive Director Succession

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have policies in place that make for a smooth transition of executive leadership.

**POLICY:**

A change in executive leadership is inevitable for all organizations and can be a very challenging time. Therefore, it is the policy of CCDDR to be prepared for an eventual permanent change in leadership – either planned or unplanned – to ensure the stability and accountability of the organization until such time as new permanent leadership is identified. The CCDDR Board of Directors shall be responsible for implementing this policy. It is also the policy of the board to assess the permanent leadership needs of the organization to help ensure the selection of a qualified and capable leader who is representative of the community; a good fit for the organization’s mission, vision, values, goals and objectives; and who has the necessary skills for the organization. To ensure the organization’s operations are not interrupted while the CCDDR Board of Directors assess the leadership needs and recruits a permanent Executive Director, the Board will appoint interim executive leadership as described below. The interim executive leadership shall ensure that the organization continues to operate without disruption and that all organizational commitments previously made are adequately executed, including, but not limited to, services provided, reports due, contracts, licenses, certifications, memberships, and other obligations of CCDDR.

It is also the policy of CCDDR to develop a diverse pool of candidates and consider at least three finalist candidates for its permanent Executive Director position. CCDDR shall implement an external recruiting and selection process, while at the same time encouraging the professional development and advancement of current employees. The interim executive leadership and any other interested internal candidates are encouraged to submit their qualifications for review and consideration to the Human Resource Committee according to the guidelines established for the search and recruitment process.

Succession Planning

- I. The CCDDR Human Resource Committee shall have primary responsibility for selecting a new Executive Director. The exiting Executive Director, if able to do so, shall assist the Human Resource Committee in developing and implementing the transition plan. He/she shall also assist in the transition process as directed by the Human Resource Committee.

II. In the event the CCDDR Executive Director is no longer able to serve in this position (i.e., leaves the position permanently) and/or cannot participate in the hiring of his/her replacement, the following shall occur:

A. The interim executive leadership team shall be enabled and shall include:

1. Director of Services and Supports
2. Accounting Manager
3. Compliance Manager

The Board Chairperson shall name the primary point of contact for the interim executive leadership team. Should any of the interim executive leadership team positions be vacant at the time of succession, the Human Resource Committee shall appoint the appropriate employee(s) relative to the vacant position(s).

III. It shall be the responsibility of the CCDDR Human Resource Committee to implement the following transition plan:

A. Communicate with key stakeholders regarding actions taken by the Board in naming a successor and implementing the succession plan. The organization shall maintain a current list of key stakeholders who must be contacted, such as the Camden County Commission, government agencies, and other stakeholders.

B. Consider the need for consulting assistance (i.e., transition management or executive search consultant) based on the circumstances of the transition.

C. Review the organization's Strategic Plan and conduct a brief assessment of organizational strengths, weaknesses, opportunities, and threats to identify priority issues that may need to be addressed during the transition process and to identify attributes and characteristics that are important to consider in the selection of the next Executive Director.

D. Establish a time frame and plan for the recruitment and selection process.

IV. Once the transition plan is in place, the CCDDR Human Resource Committee shall initiate the recruitment and selection process for a replacement Executive Director. This shall include the following:

- Determination the need for any change in total compensation package for the vacant position
- Reviewing current job description
- Engaging services of a management selection firm, if deemed necessary
- Advertise the position in area/statewide newspapers
- Advertise the position within state associations (MACDDS, MO-ANCHOR, MARF, etc.)
- Advertise the position using Internet resources
- Review all resumé and applications

- Interview selected applicants
- Select a finalist and make an offer of employment contingent upon background screening requirements
- Conduct all preliminary background checks
- Approve the selected candidate (by the full Board)

**REFERENCES:**

- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-66*

**APPROVAL OF AMENDED POLICY #20**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #20, Executive Director Evaluation and Compensation.
2. That the Board hereby amends and adopts Policy #20 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-66



Policy Number: 20 Effective: May 1, 2008 Revised: October 16, 2017
Subject: Executive Director Evaluation & Compensation

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to effectively evaluate the Executive Director.

**PROCEDURES:**

I. Relationship Between the Board and the Executive Director

The CCDDR Board shall delegate authority to the Executive Director to operate the organization under its jurisdiction according to Board policies, plans, manuals, Bylaws, and other Board governance materials.

II. Supervision of Executive Director

Authority and supervision over the Executive Director is held by the Board as a whole, although the CCDDR Human Resource Committee is responsible for the annual evaluation and recommendation of any disciplinary action. In doing the annual evaluation, the Human Resource Committee shall solicit the input of the entire board, either informally or through a formal process, such as a questionnaire. In completing the annual evaluation of the Executive Director, the Human Resource Committee and the Board as a whole shall take into consideration the Strategic Plan and any other work plan developed for the Executive Director, and progress made with each applicable plan. Disciplinary action with regard to the Executive Director, including dismissal, shall be recommended by the Human Resource Committee and approved by the full Board. Use of temporary probationary periods may also be used by the Board and/or Human Resource Committee as a means to enhance substandard performance by the Executive Director.

III. Executive Director Work Plan

Results to be achieved by the Executive Director are to be set out in a work plan, Strategic Plan, duty charge, or directive established by the Board. The aforementioned shall detail both overall corporate performance objectives for the Executive Director to accomplish (which may be taken from the Board's Strategic Plan), as well as individual performance targets or desired outcomes from other management documents. The work plan shall detail what performance objectives, both corporate and individual, are to be accomplished by the Executive Director for the coming year or designated period of time. As part of the Executive Director's annual performance evaluation process, the CCDDR Human Resource Committee



shall review the Executive Director's performance and progress made in meeting desired objectives and outcomes.

#### IV. Executive Director Code of Conduct

The Executive Director affirms the CCDDR Code of Ethics, and additionally commits to the following:

- Will not allow any practice, organizational circumstance, activity, or decisions that are either imprudent or in violation of commonly accepted business or professional ethics
- Will not knowingly cause or allow actions that put CCDDR at financial risk or negative public image
- Will ensure financial management is done within accepted accounting practices including not exposing CCDDR Board members or staff in any unnecessary liability situations, not putting CCDDR assets in jeopardy, and not expending more funds than what is received from funding in a budget year, unless prior-authorized by the Board as part of the Board's budgeting process
- Will treat staff and volunteers in a safe and dignified manner
- Will manage staff compensation and benefits within market norms in consultation with the Board
- Will ensure Board information is accurate and complete and presented in a timely manner

#### V. Executive Director Compensation

A "total compensation" package shall be established for the position of the Executive Director. A monetary amount for total compensation shall be made which considers the following:

- Base pay
- Benefits
- Incentive plans (if any)
- Prerequisites (if any)

Authority to set the compensation of the Executive Director is the responsibility of the Board of Directors as a whole, although the CCDDR Human Resource Committee shall make recommendations to the full Board on all such matters. Annual adjustments to the Executive Director's compensation package shall be made in conjunction with the annual performance evaluation. To make this decision, the Board is provided with a benchmarking analysis of comparable salary and benefits for similar positions throughout the area and state, pay increases provided to other CCDDR staff, and the salary grid for all other CCDDR employees. Benchmarking data may come from a variety of sources, such as the MACDDS salary survey and information from area provider agencies.

#### **REFERENCES:**

- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-67*

**APPROVAL OF AMENDED POLICY #21**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #21, Corporate Compliance.
2. That the Board hereby amends and adopts Policy #21 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-67



Policy Number:  
21  
Effective: May 1, 2008  
Revised: April 20, 2009, April 19, 2010  
October 16, 2017

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Subject: Corporate Compliance

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to follow ethical business practices and to comply with all applicable state and federal laws with regard to waste, fraud, and abuse of public funds.

**DEFINITIONS:**

Fraud:

Fraud and other similar irregularities include but are not limited to:

- Claim for reimbursement of expenses that are not job-related or authorized by the current policies
- Forgery or unauthorized alteration of documents (checks, time records, independent contractor agreements, budgets, etc.)
- Misappropriation of agency assets (funds, securities, supplies, furniture, equipment, etc.)
- Improprieties in the handling or reporting of money transactions
- Authorizing or receiving payment for goods not received or services not performed
- Computer-related activity involving unauthorized alteration, destruction, forgery, or manipulation of data or misappropriation of agency-owned software
- Fraudulent logging and/or billing of Targeted Case Management services on behalf of the agency
- Misrepresentation of information on documents
- Any apparent violation of Federal, State, or local laws related to dishonest activities or fraud
- Seeking or accepting anything of material/monetary value from those doing business with the agency including vendors, consultants, contractors, lessees, applicants, and grantees

Employee:

In this context, employee refers to any individual or group of individuals who receive compensation, either full or part-time, from the agency. The term also includes any volunteer who provides services to the agency, which includes through an official arrangement with other related organizations.

### Manager or Management:

In this context, manager or management refers to the CCDDR Executive Director, Compliance Manager, Accounting Manager, Director of Services and Supports, TCM Office Manager, or other supervisor or manager.

### **POLICY:**

CCDDR receives federal Medicaid funds through its Targeted Case Management program. CCDDR also receives public funds through its tax levy. The agency has a responsibility to ensure that ethical practices are followed with regard to billing practices and other such matters in an effort to reduce the likelihood of fraud, waste, and abuse of federal, state, and local public funds. No employee, contractor, or Board member of CCDDR shall engage in any activity that constitutes financial fraud (falsification of items, reports, records for which funds are paid or received) in activities on behalf of, or representing CCDDR. All Board members and employees will sign a Code of Ethics Statement agreeing to abide by the agency's Corporate Compliance Policy.

#### I. Corporate Compliance Officer

The Executive Director shall be the designated Corporate Compliance Officer (CCO) for CCDDR. The CCO is responsible for overseeing corporate compliance efforts; reviewing agency policies, plans, manuals, job descriptions, procedures or any other Board governance documents; recommending changes to agency policies, plans, manuals, job descriptions, procedures or any other Board governance documents; overseeing administration of agency risk assessment relative to compliance issues and recommending changes in procedures as a result of risk assessment; developing and implementing internal audit procedures relative to corporate compliance issues; overseeing the implementation of corporate compliance training including conducting of training sessions for staff; investigating matters related to corporate compliance issues, including employee, consumer, and/or payor complaints; and developing and implementing an employee feedback loop which encourages employees to report potential problems without fear of retaliation.

#### II. Written Policies and Procedures

A Code of Corporate Ethics has been written which details expected employee behavior covering various areas. In addition, the Employee Handbook details policies and procedures expected to be followed by employees.

#### III. Auditing and Monitoring

Internal audit procedures have been developed to ensure billing of third party payors will not occur until specific expectations have been met. The CCO is responsible for facilitating corporate compliance oriented pre-billing audits for the Targeted Case Management program. These auditing procedures are detailed in the Billing section of this document. The

board shall also receive an external independent audit each year by a certified public accountant to minimize the possibility of fraud, waste, and abuse of public funds.

#### IV. Training, Education, & Compliance Materials

In addition to a orientation program and an ongoing training and education program, Corporate Compliance Policy training and education is conducted on an annual basis. The CCO is responsible for facilitating these training programs.

#### V. Reporting Workplace Wrongdoing

Employees can report wrongdoing in a safe and confidential manner, and without fear of retaliation. If an employee is aware of any acts of wrongdoing, an employee is encouraged to discuss his or her complaint with their supervisor or the Compliance Manager. If an employee is unable to discuss the complaint with their supervisor or Compliance Manager, if the supervisor or Compliance Manager is the source of the problem, or if the supervisor or Human Resource Manager condones or ignores the problem, the employee should immediately contact the Executive Director. If all alternatives are not satisfactory, the employee should immediately contact the Board Chairperson regarding his/her complaint.

In no circumstances is an employee required to confront the person who is the source of the complaint before notifying any of the individuals listed above.

Employees will be granted whistle-blower protection when acting in accordance with this policy. When informed of a suspected impropriety, neither the agency nor any person acting on behalf of the agency shall:

- Dismiss or threaten to dismiss the employee reporting the impropriety
- Discipline, suspend, or threaten to discipline or suspend that employee
- Impose any penalty upon that employee
- Intimidate or coerce an employee for that employee's role in reporting the suspected impropriety

This section is intended to protect employees from retaliation for reporting suspected improprieties. It shall not be construed as absolving an employee of responsibility for his or her own fraudulent activity; any such fraudulent activity shall be subject to disciplinary and/or legal action.

#### VI. Violations of the whistle-blower protection will prompt disciplinary action, up to and including dismissal.

## VI. Management Responsibilities

The agency will fully investigate any suspected acts of fraud, misappropriation, or other similar irregularity. An objective and impartial investigation will be conducted regardless of the position, title, length of service, or relationship with the agency of any party who might be involved in or becomes the subject of such investigation.

Management is responsible for being alert to and reporting fraudulent or related dishonest activities in their areas of responsibility.

Management should be familiar with the types of improprieties that might occur, and be alert for any indication that improper activity, misappropriation, or dishonest activity is or was in existence.

Management should not attempt to conduct individual criminal investigations, interviews, or interrogations. However, management is responsible for taking appropriate corrective actions to ensure adequate controls exist to prevent reoccurrence of criminal actions.

Management should support the agency's responsibilities and cooperate fully with other investigators and/or law enforcement agencies in the detection, reporting, and investigation of criminal acts, including the prosecution of offenders.

Management must give full and unrestricted access to all proper authorities to all necessary records and personnel. All agency workspaces including, furniture, desks, desk contents, and computers, are not private and are open to inspection at any time.

In dealing with suspected dishonest or fraudulent activities, great care must be taken. Therefore, management should avoid the following:

- Incorrect accusations
- Alerting suspected individuals that an investigation is underway
- Treating employees unfairly
- Making statements that could lead to claims of false accusations or other offenses

In handling dishonest or fraudulent activities, management has the responsibility to:

- A. Make no contact with the suspected individual to determine facts or demand restitution unless specifically directed to do so by the Executive Director or his/her designee. Under no circumstances should there be any reference to "what you did", "the crime", "the fraud", "the misappropriation", etc.
- B. Avoid discussing the case, facts, suspicions, or allegations with anyone outside the agency, unless specifically directed to do so by the Executive Director.

- C. Avoid discussing the case with anyone inside the agency other than employees who have a need to know. Relevant discussion and information should always be shared with the agency attorney and law enforcement personnel, if applicable.
- D. Direct all inquiries from the suspected individual, or his or her representative, to the Executive Director unless otherwise directed. All inquiries by an attorney of the suspected individual should be directed to the agency attorney. All inquiries from the media should be directed to the Executive Director.
- E. Take appropriate corrective and disciplinary action, up to and including dismissal.

## VII. Investigation and Action

The Executive Director shall immediately be informed of suspected activity involving fraud or related dishonest activity by supervisors and/or staff. The Executive Director will determine how best to investigate the suspected activity. If evidence is uncovered showing possible dishonest or fraudulent activities, the Executive Director shall:

- Consult with the appropriate supervisor and Compliance Manager or agency attorney to determine if disciplinary actions should be taken
- If applicable, consult with the agency attorney to determine if a law enforcement agency should be notified
- If applicable, report to the agency CPA in order to assess the effect of the illegal activity on the agency's financial statements
- If applicable, coordinate with the agency's attorney regarding notification to insurers and filing of insurance claims
- If applicable, take immediate action, in consultation with the agency attorney, to prevent the theft, alteration, or destruction of evidentiary records – such action shall include, but is not limited to:
  - Removing the records and placing them in a secure location, or limiting access to the location where the records currently exist
  - Preventing the individual suspected of committing the fraud from having access to the records

The Executive Director, following review of investigation results, will take appropriate action regarding employee misconduct. Disciplinary action may include referral of the case to police officials.

The agency will pursue every reasonable effort, including court ordered restitution, to obtain recovery of agency losses from the offender or other appropriate sources.

## VIII. Responding to Search Warrants

- A. In the event that agents of the federal or state government present any Board member or employee of CCDDR with a search warrant seeking access to the organization's books,



records, or documents, that person should immediately contact the Executive Director. If the Executive Director is unavailable, the Board Chairperson and/or other Board officer(s) shall be contacted.

- B. The employee receiving the warrant should ask to see identification from each agent and get a business card from each agent present. The business cards should be immediately copied and transmitted by fax, email, or hand delivery to the Executive Director or Board Chairperson. The agents are required to provide a copy of the warrant.
- C. The agents should also be asked for a copy of any affidavit supporting the search warrant. This must also be disclosed unless it is under seal. If the affidavit is obtained, it should be immediately faxed, emailed, or hand delivered to the Executive Director or Board Chairperson. If the agents state that the affidavit is under seal, that fact should also be immediately communicated to the Executive Director or Board Chairperson.
- D. The search warrant will include an attachment listing things that can be seized and places that may be searched. If the agents try to go into areas that are not listed in the warrant, ask them to wait until legal counsel arrives. If they refuse to wait, do not interfere, but note which agents went into areas not specified in the warrant and exactly when that occurred.
- E. The agents should be requested to provide an itemized list of any things taken away. They are required to give you a receipt.
- F. If the agents take documents (including computer files), ask to make copies of those documents before they do so. They are not required to allow copies to be made and may refuse to do so.
- G. PERSONS ON THE PREMISES are NOT required to speak with agents during the search, even if they are served with a subpoena, and should not do so except to the extent that it is necessary to comply with the search warrant. ANY PERSON PRESENT MAY DECLINE TO ANSWER ANY QUESTIONS ADDRESSED TO THEM BY AN AGENT.
- H. The senior ranking employee(s) present should accompany the agents during the search and take careful notes of what they take, what they look at, who they talked to, and what questions were asked.
- I. It is absolutely critical that no employee interferes with the agents during their search or prevents them from accessing anything listed in the search warrant. To do so could constitute obstruction of justice, which is a criminal offense.

#### IX. Responding To Subpoenas

- A. In the event any CCDDR Board member or employee receives a court order, summons, administrative request, or subpoena requesting documentation or testimony regarding the

organization's business, clients, books, records or documents, that person should immediately contact the Executive Director. If the Executive Director is unavailable prior to the response time set forth in the subpoena, the Board Chairperson and/or other Board officer(s) shall be contacted.

- B. The organization shall comply with all court orders, summons, administrative requests, and subpoenas to the extent consistent with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other federal and state law applicable to the testimony, books, records, or documents sought (see Policy # 25-HIPAA Compliance).
- C. The organization may disclose protected health information and other private business, employee, or client information in the course of any judicial or administrative proceeding in response to an order of a court or administrative tribunal, or in response to a grand jury subpoena or a subpoena or summons issued by a judicial officer, to the extent expressly authorized by the order of the court, administrative tribunal or judicial officer.
- D. Several conditions must be met prior to release of protected health information and other private information business, employee, or client information even when it is sought by law enforcement or by subpoenas, discovery requests, or other lawful process when such subpoenas, requests, or other lawful process is *not* accompanied by an order of a court or administrative tribunal. No Board member or employee should release information under such circumstances without approval of the Executive Director and, where deemed appropriate by the Executive Director, review by legal counsel.

**REFERENCES:**

- CARF Standards Manual
- CMS Guidelines
- Targeted Case Management Operations Manual, MO Dept. of Mental Health



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-68*

**APPROVAL OF AMENDED POLICY #25**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #25, HIPAA Compliance.
2. That the Board hereby amends and adopts Policy #25 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-68



Policy Number:

25

Effective: March 19, 2007

Revised: October 16, 2017

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Subject: HIPAA Compliance

**POLICY:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy in order to be in compliance with the Health Insurance Portability and Accountability Act of 1996.

**PROCEDURES:**

I. Notice of Privacy Practices

- A. At the date of the first delivery of, or appearance for services with Camden County Developmental Disability Resources (CCDDR), application for services, or upon referral from the Rolla Regional Center for services, the client (or their legal guardian or parent, if a minor) should be presented with CCDDR & Department of Mental Health Notice of Privacy Practices.
  - 1. Documentation of acknowledgment on the current Notice of Privacy Practice's acknowledgement sheet that such a Notice has been presented to a client (or their legal guardian or parent, if a minor) for review must be signed, and placed in the client's record. The full Notice of Privacy Practices is then given to the client.
  - 2. If CCDDR does not obtain the acknowledgment, then it shall document its good faith efforts to obtain the acknowledgment, and document the reason(s) why the acknowledgment was not obtained on the acknowledgment cover sheet to the Notice of Privacy Practices.
- B. A copy of the Notice of Privacy Practices is given to each client on an annual basis at their individual planning meeting. This provides clients the opportunity to discuss privacy practices with their Support Coordinator.
- C. Whenever the Notice of Privacy Practices is revised, the revised Notice must be made available upon request by a client.
- D. CCDDR's Privacy Officer will be responsible for developing and updating, as necessary, the Notice of Privacy Practices. When a material change is made, CCDDR must make that revised Notice change and the revised notice will be added to the CCDDR data base for dissemination by the Support Coordinator.

- E. The Privacy Officer will be responsible for ensuring that CCDDR employees/volunteers are trained regarding the Notice of Privacy Practices in accordance with CCDDR's policy related to employee HIPAA mandatory training.
- F. Client questions related to the Notice of Privacy Practices should be directed to the CCDDR Privacy Officer.
- G. The CCDDR Privacy Officer shall maintain a historical record of all versions of the Notice of Privacy Practices, and the applicable dates for each.

II. Use & Disclosure of Protected Health Information (PHI) and Authorization to Release PHI

- A. CCDDR Support Coordinators, staff members and providers may share medical information with each other about DMH clients they serve in common for the purpose of treatment, payment or health care operations. CCDDR may not use or disclose protected health information without a valid authorization completed by the client, or applicable personal representative, with limited exceptions. The CCDDR Privacy Officer should obtain written information regarding the identity of the requestor, the date of the request, the nature and purpose of the request, and any authority that the requestor has to request such information. If other staff receives a completed authorization form for the release of PHI, they shall direct it to the CCDDR Privacy Officer for review.
- B. Any disclosures that occur shall be limited to the minimum amount of information necessary to meet the purpose of the use or disclosure. Exceptions to the minimum necessary requirement are as follows:
  - When the client authorizes the disclosure
  - Disclosures required by law
- C. CCDDR must obtain an authorization for any use or disclosure of psychotherapy notes except:
  - To carry out treatment, payment or health care operations
  - For CCDDR to use in defending itself in litigation or other proceedings brought by the client
- D. PHI may only be disclosed without authorization in the following situations:
  - To a public health authority (i.e. required reporting to the Missouri Department of Health and Senior Services)
  - To report child abuse/neglect situations, and other situations involving abuse, neglect or domestic violence (if disclosure is allowed by law)
  - To the Food and Drug Administration
  - To a health oversight agency for activities authorized by law
  - To judicial or administrative proceedings (a subpoena from a court is not enough)

- To law enforcement (but only in certain circumstances, including when they present a grand jury subpoena; information concerning forensic clients; to locate a missing person, suspect, or fugitive; or at the discretion of the head of the facility when the information is requested to assist law enforcement in their investigation [see Section 630.140, Revised Statutes of Missouri])
- To avert a serious threat to health or safety
- Governmental functions (such as national security and intelligence activities; military/veterans' information)
- To other agencies administering public benefits
- To medical examiners and coroners
- To funeral directors
- For organ and tissue donation
- For some research purposes
- If there is an emergency or if CCDDR is required by law to discuss certain information.
- To assist in communication barriers in obtaining a consent from client
- Appointment Reminders
- Treatment alternatives and health related benefits and services
- Emergency or disaster events for individuals involved in disaster relief
- Protective Services for the President and others
- Workers Compensation
- Public Health Risk
- Inmates

E. Any questions as to whether a use or disclosure is permitted or required by law should be directed to the CCDDR Privacy Officer.

F. If it is CCDDR that requests that the client complete the authorization, CCDDR must provide the client with a copy of the signed authorization.

### III. Accounting of Protected Health Information Disclosures

A. All disclosures of PHI need to be accounted for upon the request of the individual. This is not limited to hard copy information but any manner of communication that discloses information, including verbal release. However, the following list of exceptions to this requirement does not require tracking or need to be accounted for upon the request of the individual:

- Disclosures made for treatment, payment, and healthcare operation purposes as set out in 45 CFR §164.502
- Disclosures made to the client. (45 CFR §164.502)
- Disclosures made for facility directory purposes, if utilized (45 CFR §164.510)
- Disclosures made for national security or intelligence purposes. (45 CFR §164.512 (k)(5))

- Disclosures made to correctional institutions or law enforcement officials. (45 CFR §164.512(k)(5))
  - Disclosure made prior to the date of compliance with the privacy standards
  - There are further exceptions for disclosures to health oversight agencies (see section 164.528(a)(2)(I) et seq.) – please contact the CCDDR Privacy Officer should this situation arise.
- B. The CCDDR Privacy Officer shall assure that a mechanism is in place which tracks disclosure of both written and verbal protected health information. One format shall be utilized.
- C. CCDDR will include the following Required Content in the Accounting of Disclosures:
- The name and social security number of the client whose PHI was disclosed
  - Date of Disclosure
  - Name and address, if known, of the entity or person who received the PHI
  - Brief description of the PHI disclosed
  - Brief statement of purpose that reasonably informs the client what the purpose was for the disclosure, or provide the client with a copy of the authorization, or provide the client with a copy of the written request for disclosure
- D. If multiple disclosures are made to the same entity or person for the same reason, it is not necessary to document each disclosure. CCDDR may document instead the first disclosure, the frequency or number of disclosures made during the accounting period, and the date of the last disclosure in the accounting period.
- E. The client (or legal guardian) must make a written request for an accounting of disclosures to the CCDDR Privacy Officer. The request shall be on the CCDDR Form. Staff may assist the client in completing the form if requested to do so.
- F. CCDDR shall have 60 days after receipt of the request for such an accounting to act on that request for an accounting of disclosure. If CCDDR has disclosed information to a business associate regarding the client requesting the accounting, then CCDDR, through its Privacy Officer or designee, must request an accounting of disclosures of that client's information from that business associate, who has 20 calendar days to provide the accounting. CCDDR may request one 30-day extension, which is allowed, but the client must be informed in writing:
- Of the delay
  - The reason for the delay
  - The date the accounting will be provided
- Such notification to the client or person requesting the accounting of disclosures of any delay must take place within the 60-day timeframe.
- G. CCDDR will provide all accounting of disclosures free of charge.



H. CCDDR must retain a copy of the written accounting that is provided to the client in the client's confidential file.

IV. Verification Of Requestor Identity & Authority

A. The client or personal representative must sign a valid authorization for the disclosure of confidential protected health information before such PHI can be released, except in accordance with existing HIPAA requirements.

B. All requests for disclosure shall be forwarded to the CCDDR Privacy Officer including the following:

- The name of the requesting party or parties
- Any documentation, statements or representations from the person requesting the PHI of his/her authority to request such information (i.e., legal representative of client, law enforcement official, etc.)

C. The client must present identification prior to receipt of any records regarding themselves.

D. The Privacy Officer may rely on the following information to demonstrate identity:

- Presentation of agency identification, credentials or other proof of government status (a badge, identification card, etc.)
- A written request on agency letterhead or an oral statement if a written statement would not be possible (a natural disaster, other emergency situations, etc.)
- If the disclosure is requested by a person acting on behalf of a public official, a written statement on government letterhead that the person is acting under the government's authority, or a contract or purchase order evidencing the same
- A court order.

E. The Privacy Officer shall verify identity of any phone requests from all individuals, including law enforcement officers and others who have an official need for PHI by using a callback phone number before releasing information.

F. The Privacy Officer shall verify facsimile number of any faxed requests. The main number of the sending agency shall be called, and the fax number verified.

G. The CCDDR Privacy Officer shall verify e-mail address by calling requestor. The general number for the sending agency shall be called, and then a request shall be made to be transferred to the specific individual who made the contact.

H. The Privacy Officer is responsible for copying verification information or obtaining badge number, etc., and for maintaining it in the client's health information file.

- I. The Privacy Officer must review the forwarded information and determine if he or she is satisfied that the documents verify the identity of the requestor and also demonstrate that the requestor has authority to request the information under state and federal law.
  - J. The Privacy Officer may disclose information to the requestor if all requirements for use and disclosure are met.
  - K. The Privacy Officer shall contact agencies or other entities for further verification of identity or authority to receive PHI, if necessary.
  - L. The Privacy Officer may deny access to information, if verification of identity or authority is not accomplished.
  - M. The CCDDR Privacy Officer shall assure that a mechanism is in place which tracks disclosure of both written and verbal protected health information.
- V. Disclosure Of Minimum Necessary Amount Of Protected Health Information
- A. CCDDR and its workforce will make reasonable efforts to ensure that the minimum necessary protected health information (PHI) is disclosed, used, or requested. Exceptions to the minimum necessary requirement include:
    - Disclosures to the individual who is the subject of the information
    - Disclosures made pursuant to an authorization
    - Disclosures to or requests by healthcare providers for treatment purposes
    - Disclosures required for compliance with the standardized HIPAA transactions
    - Disclosures made to Health & Human Services/Office of Civil Rights (HHS/OCR) pursuant to a privacy investigation
    - Disclosures otherwise required by the HIPAA regulations or other law
  - B. Each user of PHI will be subject to the provisions of CCDDR policies relating to staff access to PHI.
  - C. Reasonable efforts will be made to limit each PHI user's access to only the PHI that is needed to carry out his/her duties. These efforts will include the Privacy Officer monitoring staff use and disclosure of PHI.
  - D. For situations where PHI use, disclosure or request for PHI occurs on a routine and recurring bases, the Privacy Officer will issue directives as to what information constitutes the minimum necessary amount of PHI needed to achieve the purpose of the use, disclosure or request.
  - E. For non-routine disclosures (other than pursuant to an authorization), staff should address questions to the CCDDR Privacy Officer to assure that PHI is limited to that which is reasonably necessary to accomplish the purpose for which disclosure is sought. Examples

of non-routine disclosures include providing PHI to accrediting bodies; insurance carriers, research entities, funeral homes, etc.

VI. Client/Guardian Procedural Safeguards For Improper Use Or Disclosure Of Protected Health Information

The following steps constitute the HIPAA complaint process:

- A. Utilize CCDDR Complaint Regarding CCDDR Management of Protected Health Information – Report of Breach of Privacy and security of Protected Health Information form.
- B. Forward a copy of the complaint form to the CCDDR Privacy Officer if the alleged violation took place at CCDDR facility or program.
- C. CCDDR Complaint Regarding CCDDR Management of Protected Health Information – Report of Breach of Privacy and security of Protected Health Information must describe the acts or omissions the client believes to have occurred.
- D. The CCDDR Complaint Regarding CCDDR Management of Protected Health Information – Report of Breach of Privacy and security of Protected Health Information form must include the following information:
  - The date on which the act or omission occurred
  - A description of the PHI affected and how it was affected
  - The name(s) of anyone who may have improperly been provided with the PHI
- E. All Privacy Complaints received by the Privacy Officer or designee will be date-stamped upon arrival.
  - The Privacy Officer will review and act on the complaint in a timely manner and not more than 30 days from receipt of the complaint – if greater time is necessary to review and investigate the complaint, the Privacy Officer shall, within 30 days, notify the client of the delay, and inform the grievant of the expected timeframe for completion of the review
  - The Privacy Officer shall determine what PHI is affected by the complaint and if the PHI was provided to other covered entities and business associates
  - If the affected PHI was created and maintained by a business associate, the complaint will be forwarded to the business associate as outlined in the Business Associate Agreement – complaints forwarded to business associates will be logged and a notice of the action sent to the client making the complaint
- F. The Privacy Officer shall determine if there is cause to believe that a violation of CCDDR privacy policies occurred, and the course of action to be taken.

1. If no violation has occurred, the complaint and finding will be date-stamped, the complaint will be considered closed, and a written notice of this shall be provided to the client.
  2. If cause exists to believe that a violation has occurred, the Privacy Officer shall be responsible for determining if:
    - Performance or training need to be improved
    - A recommendation for a change to the CCDDR policy should be forwarded to the Board of Directors
    - A recommendation should be made to the Board of Directors to establish a new Privacy policy (if a CCDDR complaint)
  3. The Privacy Officer shall notify the Board of Directors of the action needed.
  4. If employee discipline must be taken, it must follow the CCDDR policy on sanctions.
- G. If the complaint resolution finds that no cause exists to believe a violation occurred, then the client or his/her personal representative may seek resolution to the CCDDR Board of Directors directly (if it is a CCDDR based complaint).
1. The client, through completion of the Complaint Form, will request that the CCDDR Privacy Officer forward the complaint to the CCDDR Board of Directors.
  2. The Board of Directors will review and act on the complaint in a timely manner and not more than 30 days from receipt of the complaint form.
- H. The Board of Directors shall determine one of the following:
- That the original determination of the CCDDR Privacy Officer is accurate
  - That remediation should occur through increased training, or that a recommendation is made for possible disciplinary action
  - That a recommendation for CCDDR policy review be initiated
  - That a recommendation be made for the establishment of a new CCDDR policy
- I. The original complaint form shall be placed in the client's confidential file.
- J. The CCDDR Privacy Officer's primary responsibilities in the HIPAA Complaint process include logging and retaining complaints in a retrievable manner for a minimum of six years, and identifying:
- Person or entity making the complaint
  - Date complaint was received
  - A list of what PHI was affected
  - Status of complaint
  - A list of business associates or facilities affected
  - Actions taken.

- K. There shall be no retaliation against any client, or against a workforce member for assisting a client to file a CCDDR Complaint Regarding CCDDR Management of Protected Health Information – Report of Breach of Privacy and security of Protected Health Information form.

VII. Designated Records Set

- A. CCDDR shall identify all information systems (defined as an organized collection of information) that contain Protected Medical/Health Information.
- B. That inventory shall be maintained by the CCDDR Privacy Officer. Any new or modified systems shall be added to the inventory by the appropriate Privacy Officer.
- C. For the purpose of the implementation of this policy, the term designated record set includes any item, collection, or grouping of information that includes PHI and is maintained, collected, used, or disseminated by CCDDR for client care or payment decision making including but not limited to:
- Medical record and billing records about clients maintained by or for CCDDR
  - Enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for CCDDR
  - Any records or information used, in whole or in part, by or for CCDDR to make decisions about clients
- D. Information that is not part of the Designated Records Set is defined as follows: any documents that are used for census information, quality assurance or quality improvement, peer review, sentinel event, Centers for Medicare and Medicaid purposes, utilization review, abuse/neglect investigations, incident/injury reports, state auditors, or various electronic databases, etc., which are not used to make decisions regarding an individual client, shall not be considered as part of the designated records set. However, please note that these types of information may be accessible by parents or guardians. In addition, for forensic cases (defined as Chapter 552 or 557, RSMo, evaluations), the pretrial commitment order, the pretrial evaluation, or any correspondence relating to the pretrial is not part of the designated records set. Neither is the victim notification information.
1. Working files, either paper or electronic, are also not considered part of the designated records set.
  2. Psychotherapy notes are not included in the designated records set (psychotherapy notes are defined in 45 CFR Section 164.501, and are to be kept separate from the medical record).
- E. When an individual has been given sanctioned, exclusive possession and control of PHI as part of their assigned duties, they shall be responsible for all administrative duties of a data trustee in terms of security, data access, privacy, data backup, disaster recovery and accountability. When the individual does not have the technical expertise or equipment to

adequately protect the PHI, they must arrange for technical assistance to assure the confidentiality of the PHI.

VIII. Access To Computerized/Electronic PHI

A. Management's Right to Access Information:

Pursuant to the Electronic Communications Privacy Act of 1986 (18 USC 2510 et seq), CCDDR management shall have complete access to all E-mail and Internet activities. No electronic communications sent or received are considered private to the employee. Management has the right to monitor messages and Internet use as necessary to assure efficient and appropriate use of the technology.

B. Each of the electronic communications technologies may create electronic records that are easily saved, copied, forwarded, retrieved, monitored, reviewed, and used for litigation. All electronic records are the property of the CCDDR and can be accessed and used by management when:

- A legitimate business need exists that cannot be satisfied by other means
- The involved employee is unavailable and timing is critical to a business activity
- There is reasonable cause to suspect criminal activity or policy violations
- Law, regulation, or third-party agreement requires such monitoring

C. These disclosures of electronic records may be made without prior notice to the staff members who sent or received the communications. Staff members should not assume that any electronic communications are private.

D. User Access to Electronic CCDDR Data: To gain access to any CCDDR protected healthcare information, CCDDR workforce members are required to consult with the CCDDR Privacy Officer beforehand. All users shall be required to protect confidential data, and only the minimum necessary data shall be accessed.

E. CCDDR shall maintain a Business Continuity/Disaster Recovery Plan, approved by the Security Officer to assure continued operations in the event of an emergency.

F. No CCDDR client/client or volunteer shall have access to another person's PHI or any other CCDDR client demographic system, or be allowed to input information to local systems that may be used to feed or modify those systems or unless authorized by the client. Any proposed client/client access shall include documentation of the client/client reviewing and agreeing to a confidentiality statement. Documentation shall include the types of systems and files accessed.

G. Such client/client access shall be approved by the CCDDR Director, or designee with notification and documentation provided to the Security Officer.

H. Access to Electronic Media & Internet and Electronic Mail: Users are required to abide by the following guidelines when using CCDDR electronic mail systems:

1. The Internet and E-mail are intended to be used primarily for business purposes.
2. The Internet may be used to access external databases and files to obtain reference information or to conduct research.
3. E-mail may be used to disseminate business-related newsletters, press releases, or other documents to groups of people.
4. E-mail and the Internet may be used for discussion groups on job-related topics.
5. Personal use of E-mail must be limited and must not interfere with the performance of work duties.

Electronic mail and/or the Internet may not be used for:

- Any illegal or unethical purpose
  - Private purposes such as advertising products or services, business transactions, or for private business activities
  - Operating a business, sending chain letters, or soliciting money for any purpose
  - Transmitting, downloading or viewing material that is obscene, pornographic, threatening or harassing, or information that may be perceived to be obscene, threatening or harassing to another individual
  - Disseminating, copying, or printing copyrighted materials (including articles, software, music and movies) in violation of copyright laws
  - Subscribing to mailing lists and broadcast services that do not relate to the business of CCDDR
  - Downloading software of any kind without prior approval of management
  - Participating in Internet chat rooms or instant messaging, including but not limited to AOL Instant Messenger and Internet Relay Chat (IRC)
  - Playing games
  - Conducting any political activity
- I. Training on Access: All CCDDR employees, client/clients and volunteers must receive the required HIPAA privacy training.

J. Required Confidentiality Agreement:

CCDDR workforce members that receive or maintain PHI shall be required to agree to the security of such PHI in accordance with the state and federal laws as set forth above. These workforce members shall sign a confidentiality statement. A copy of the signed confidentiality statement shall be maintained in the personnel file of CCDDR staff.

K. Password Management:

1. Passwords shall not be shared.
2. Passwords shall be changed immediately if user is aware that someone else knows it.
3. Users shall not change their passwords while others are present.
4. Passwords shall have no connection to the user, i.e. user name, children's name, etc.

IX. Physical Security/Maintenance Of Electronic & Computerized PHI

- A. Users shall be automatically logged off their workstations after a maximum period of 15 minutes of inactivity.
- B. Designated CCDDR staff shall ensure that all media has been thoroughly cleansed of any client data before the media is surplussed or disposed of.
- C. Access to media containing client data shall be controlled by:
  - Physical access control to CCDDR hardware
  - Purging CCDDR data on any type of media before it is surplused or discarded
  - Storage of data on media that is backed up
- D. The CCDDR Security Officer shall maintain an up to date Standards List which prescribes appropriate procedures and practices for data security purposes.
- E. Virus protection for the CCDDR network shall be maintained by the CCDDR Security Officer, pursuant to the CCDDR virus protection procedures.
  - 1. Email Servers – All CCDDR email servers shall be protected using the email-specific anti-virus software listed on the Standards List.
  - 2. Workstations, laptops, PDAs – All workstations, laptops, PDAs or any other device that connect to an CCDDR network shall be protected using the anti-virus software for that device listed on the Standards List. Equipment that has not been purchased by CCDDR shall not be allowed to connect to any CCDDR network.
- F. Anti-virus software will check for virus signature updates at least weekly from the software manufacturer.
- G. Anti-virus software shall be kept up-to-date by the CCDDR Security Officer at the current software release or no more than one release below the most current release version.
- H. CCDDR workforce shall not load software, from any source, onto their assigned workstation without prior authorization from Director. This software includes but is not limited to software from the Internet, a CD, or a floppy diskette. Software must be approved by the Director prior to being loaded on workstations.

X. Client/Guardian Right To Amend PHI

- A. A client, parent of a minor, and personal representative or legal guardian as relevant to their representation, who believe information in their health records is incomplete or incorrect may request an amendment or correction of the information as outlined below:



1. For minor discrepancies, i.e. typos, misspelled name, wrong date, etc., the client may approach the author of the entry, point out the error, and ask the author to correct it.
    - a. If the entry author agrees, the entry can be corrected according to best documentation practices by drawing a single line through the error, adding a note explaining the error (such as “wrong date” or “typo”), date and initial it, and make the correction as close as possible to the original entry in the record.
    - b. Any information added to a Person Centered Plan in the regular course of business is not considered an amendment. An example would be when a client provides the name of a new private physician whom he/she sees in the community.
  2. All other requests for amendment to PHI shall be in writing and provide a reason to support the amendment. Specifically, any request should be supported by documentation of any incorrect information or incomplete information.
- B. The “Request To Amend Protected Health Information” form shall be provided to facilitate the request. CCDDR may assist in initiating the process requesting amendment to PHI and a copy shall be provided to the client.
- C. All requests for amendment of PHI must be forwarded to the CCDDR Privacy Officer, who will route the original request to the author of the PHI.
- D. This request shall be processed in a timely consistent manner according to established timeframes but not more than 60 days after receipt of the request.
- E. If the request for amendment cannot be processed within the 60 days, the timeframe may be extended no more than an additional 30 days with notification in writing to the individual outlining reasons for the delay and the date the request will be concluded.
- F. If a client with a guardian requests an amendment, a letter is to be sent to the guardian stating that the client is requesting an amendment, and further requesting that the guardian complete the Request for Amendment form.
- G. If the request is granted, CCDDR shall:
1. Insert the amendment or provide a link to the amendment at the site of the information that is the subject of the request for amendment, and then document the change in the same section of the record as the original information.
  2. Inform the client that the amendment is accepted.
  3. Obtain the authorization of the client to notify all relevant persons or entities with whom the amendment needs to be shared.
  4. Within a reasonable time frame, make reasonable efforts to provide the amendment to the persons identified by the client, and any persons, including business associates, that CCDDR knows has been provided the PHI that is the subject of the amendment and who may have relied on or could foreseeably rely on the information to the

- detriment of the client. A reasonable time frame is defined as attempts to complete this process within 60 days of the date of the amendment to the record.
5. If the amendment affects a service for which billing or a charge has already been submitted, then the billing must be reviewed to see if it should be amended or changed as well to reflect the new information.
- H. CCDDR may deny the request for amendment to PHI if the health information that is the subject of the request if:
1. The information was not created by CCDDR. However, if the client can provide reasonable proof that the person or entity that created the information is no longer available to make the amendment, and the request is not denied on other grounds, CCDDR must amend the information.
  2. The information is not part of the medical information kept by or for CCDDR.
  3. The information is not part of the information that the client would be permitted to inspect and copy
  4. The information is accurate and complete.
- I. If CCDDR denies the requested amendment, it must provide the client with a timely, written denial, written in plain language that contains:
- The basis for the denial
  - The client's right to submit a written statement disagreeing with the denial and how the client may file such a statement
  - The name, title, address, and telephone number of the person to whom a statement of disagreement should be addressed
  - The steps to file a complaint with the Secretary of HHS
  - A statement that if the client does not submit a statement of disagreement, the client may request that CCDDR provide the Request for Amendment and the denial with any future disclosures of PHI
  - A copy must also be provided to the guardian, if applicable; to parent(s), if applicable; or to DFS if that agency has legal and physical custody of the juvenile
- J. Clients shall be permitted to submit to CCDDR a written statement disagreeing with the denial of all or part of a requested amendment and the basis for the disagreement. This statement of disagreement shall be limited to one page.
1. The statement of disagreement shall be submitted in writing to the CCDDR Director.
  2. CCDDR may prepare a written rebuttal to the statement of disagreement and must provide the client with a copy of the rebuttal.
  3. CCDDR must identify the record of PHI that is the subject of the disputed amendment and append or link the request for an amendment, the denial of the request, the individual's statement of disagreement, if any, and the CCDDR rebuttal statement if any.

- K. If the client has submitted a statement of disagreement, CCDDR must include the documents or an accurate summary of the information, with any subsequent disclosure of the PHI to which the disagreement relates.
- L. If the client has not submitted a written statement of disagreement, CCDDR must include the client's request for amendment and its denial, or an accurate summary of the information, with any subsequent disclosure of PHI only if the client has requested it.
- M. If CCDDR receives information from another source of an amendment of a client's PHI, the PHI from that sending facility must be amended in written or electronic form.

XI. Request To Restrict PHI

- A. Clients shall indicate their request for restriction on the use or disclosure of their PHI using the "Request for Restrictions on the Use and/or Disclosure of Protected Health Information" form.
- B. The requested restrictions must be provided in writing, signed and dated by the client or personal representative.
- C. The CCDDR Privacy Officer must receive the written request. The Privacy Officer shall determine whether it will be approved using the following procedure:
  - 1. If approved, CCDDR must implement the restriction.
  - 2. The CCDDR Privacy Officer will identify the restriction on the face sheet of the client's confidential file.
  - 3. CCDDR's agreement or refusal of the request shall be documented on the request form, signed and dated by the Privacy Officer.
  - 4. The original will be filed for permanent retention.
  - 5. A copy of the approved or denied form will be provided to the client.
- D. CCDDR may terminate the agreement to a restriction if:
  - 1. The client agrees to or requests the termination in writing.
  - 2. The client orally agrees to the termination and the oral agreement is documented.
  - 3. CCDDR informs the client that it is terminating its agreement to a restriction and that such termination is only effective with respect to PHI created or received after it has so informed the individual.
  - 4. When any of the above criteria are met, the restriction will be removed, and the form will be dated and signed by the Privacy Officer.
  - 5. If the restriction was identified on the face sheet of the client's confidential file, that identification shall be removed by the Privacy Officer.
- E. If CCDDR has agreed to the restriction, but the client who requested the restriction is in need of emergency treatment, and the restricted PHI is needed to provide the emergency

treatment, CCDDR may disclose that PHI to a health care provider to provide such treatment.

- F. If such PHI is disclosed in an emergency situation, CCDDR must require that the health care provider to whom the information was disclosed not further use or disclose that PHI.

XII. Client Right To Access or Receive a Copy of Protected Health Information

- A. A client who has or is receiving services from CCDDR, parent of a minor, and personal representative or legal guardian as relevant to their representation, must request in writing for access to inspect, or receive copies of, Protected Health Information except in those instances covered by Federal Regulation and outlined in the Notice of Privacy Practices acknowledged at admission, and must further specify the exact information requested for access.
- B. The “Request to Access or Receive a Copy of Protected Health” form shall be provided to facilitate the request. CCDDR personnel may assist in initiating the process requesting access to Protected Health Information.
- C. All requests by clients and their legal representatives for PHI must be forwarded to the Privacy Officer for action.
- D. If it is acceptable after discussion with the client, CCDDR may provide a summary of the PHI to the client. If the summary is acceptable, CCDDR shall determine the appropriate staff to provide that explanation to the client. The client’s agreement to a summary shall be documented in writing in the record as a check in the appropriate box in the “Request To Access or Receive a Copy of Protected Health Information” form. The form shall be filed in the client’s confidential file.
- E. This request shall be processed in the format requested i.e. microfiche, computer disk, etc, if possible, and in a timely consistent manner according to established timeframes but not more than 30 days after receipt of the request. If the record cannot be accessed within the 30 days, the timeframe may be extended once for no more than an additional 30 days with notification in writing to the individual outlining reasons for the delay and the date the request will be concluded.
- F. Requests for Access to Protected Health Information may be denied without a right to review as follows:
- If the information conforms to one of the following categories: psychotherapy notes; information compiled for use in a civil, criminal or administrative action or proceeding; or information that would be prohibited from use or disclosure under the Certified Laboratory Information Act (CLIA) laws and regulations
  - If the client is participating in research related treatment and has agreed to the denial of access to records for the duration of the study
  - If access is otherwise precluded by law

- If the information was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information – All Victim Notification and Duty To Warn forms, as well as any other documentation that contains demographics of victims or potential victims shall be removed before any review of the record by anyone not employed by CCDDR, and if the CCDDR employee is a client worker, then the information shall be removed before any review of the record
- If CCDDR has been provided a copy of a court order from a court of competent jurisdiction which limits the release or use of PHI

G. Requests for Access to Protected Health Information may be denied provided the individual is given a right to have the denial reviewed as follows:

1. A licensed health care professional based on an assessment of the particular circumstances, determines that the access requested is reasonably likely to endanger the life or physical safety of the client or another person.
2. CCDDR may deny the client access to PHI if the information requested makes reference to someone other than the client and a licensed health care professional has determined that the access requested is reasonably likely to cause serious harm to that other person.
3. CCDDR may deny a request to receive a copy or inspect PHI by a personal representative of the client if CCDDR has a reasonable belief that the client has been or may be subjected to domestic violence, abuse, or neglect by such person; or treating such person as the personal representative could endanger the individual; and CCDDR, exercising professional judgment, decides that it is not in the best interest of the client to treat that person as the client's personal representative.

H. Upon denial of any request for access to PHI, in whole or in part, a written letter shall be sent to the client, or other valid representative making the request for access, stating in plain language the basis for the denial.

1. If the client has a right to a review of the denial, the letter shall contain a statement of how to make an appeal of the denial including the name, title, address, and telephone number of the person to whom an appeal should be addressed.
2. This letter shall also address the steps to file a complaint with the Secretary of HHS.
3. If the information requested is not maintained by CCDDR, but it is known where the client may obtain access, CCDDR must inform the client where to direct the request for access.

I. A client, parent of a minor, or guardian of a client has the right to appeal the decision to withhold portions or all of the record for safety or confidentiality reasons as follows:

1. The appeal shall be submitted in writing to the CCDDR Privacy Officer, who will designate a licensed health care professional.

2. The designated licensed health care professional who did not participate in the original decision to deny access shall review the record and the request for access to the client's record.
    - a. The reviewer must determine if access meets an exception.
    - b. If the reviewer determines that the initial denial was appropriate, the client must be notified in writing, using plain language that the review resulted in another denial of access. The notice must include the reasons for denial and must describe the process to make a complaint to the Secretary of HHS.
    - c. If the denial was not appropriate, the licensed health care professional who acts as the reviewer shall refer the request to the CCDDR Privacy Officer for action.
  3. If access is denied to any portion of the PHI, access must still be granted to those portions of the PHI that are not restricted.
  4. CCDDR is bound by the decision of the reviewer.
- J. If CCDDR provides a client or legal representative with access, in whole or in part, to protected health information, CCDDR must comply with the specifications as outlined in federal regulations to the extent of CCDDR's capabilities and as identified in the Notice of Privacy Practices.
1. Requested information must be provided in designated record sets.
  2. If the requested information is maintained in more than one designated record set or in more than one location, CCDDR only needs to produce the information one time in response to the request.
  3. CCDDR may provide a summary or explanation of the requested PHI if:
    - The client agrees in advance to the summary or explanation in place of the record
    - The client agrees in advance to any fees imposed for the summary or explanation
  4. If the requested information is maintained electronically and the client requests an electronic or faxed copy, CCDDR must accommodate the request if possible and should explain the risk to security of the information when transmitted as requested.
  5. If the information is downloaded to a computer disk, the client should be advised in advance of any charges for the disk and for mailing the disk. CCDDR shall establish a reasonable cost for the duplication of this information on a disk.
  6. If the information is not available in the format requested, CCDDR must produce a hard copy document or other format agreed upon by the client and CCDDR.
- K. CCDDR shall provide the access requested in a timely manner and arrange for a mutually convenient time and place for the client to inspect the PHI or obtain copies, unless access by another method has been requested by the client and agreed to by the CCDDR. Any requests for accommodations shall be sent or given in writing to the Privacy Officer.
- L. The fee charged will be in compliance with the current Missouri State Statute (See Section 191.227, RSMO), and federal law.

- M. The PHI of a deceased client may only be released via a Probate Court order from the County Circuit Court where the deceased resided or from another Probate Court in the State of Missouri.
- N. Upon request to obtain information, the Privacy Officer shall ask for a copy of the Probate Court Order.

XIII. Workforce Compliance

- A. CCDDR workforce members shall be granted access to protected health information (PHI), whether written, electronic or verbal in nature, in accordance with state and federal law (HIPAA, P.L. 104-191); (42 CFR Part 2 et seq.); and other relevant CCDDR policies. Such access shall be limited to the minimum necessary amount of protected health information to accomplish the purpose of any requested use or disclosure of PHI, e.g. to the amount of PHI the employee or workforce member needs to know in order to accomplish their job or task. In addition, communications between workforce members which involve PHI shall also be considered confidential and should not take place in public areas. If it is absolutely necessary to conduct such conversations in public areas, reasonable steps shall be taken to assure the confidentiality of the PHI.
- B. Client PHI should never be removed from CCDDR office without specific authorization from the Privacy Officer. CCDDR shall establish a procedure for how workforce members are to physically access PHI in confidential records (i.e. how to sign records in and out and under what conditions, etc.).
- C. If PHI in any form is lost or stolen, the Privacy Officer should be notified as soon as practical, but no later than two (2) business days after the loss is discovered, in order for the Privacy Officer to initiate the mitigation process.
- D. The CCDDR workforce members shall be informed of their obligations with respect to PHI in accordance with CCDDR by mandatory participation in HIPAA Privacy Training.
- E. Required HIPAA Confidentiality Agreement: The CCDDR workforce members that receive or maintain PHI shall be required to agree to the protection of such PHI in accordance with the state and federal laws as set forth above. These workforce members shall sign a HIPAA Confidentiality Statement. A copy of the signed confidentiality statement shall be maintained in the personnel file of CCDDR staff or volunteers.
- F. Visitors: Visitors to CCDDR are not required to sign the confidentiality agreement. However, a copy of the confidentiality agreement shall be located next to the Visitor Sign-in materials and available for review by each visitor.

#### **XIV. Mandatory Training**

A. All employees as well as volunteers, students and contract employees of CCDDR are given a packet regarding HIPAA rules at new hire orientation. After HIPAA information has been reviewed by CCDDR employee, volunteer, student or contract employee, a test is given on the information covered in packet and results of the tests are discussed with the individual. Additional HIPAA training is covered in mandatory courses required by DMH.

1. Trainings shall be conducted at the CCDDR facility or designated location.
2. Additional mandatory privacy training shall be scheduled whenever there is a material change in the Department of Mental Health's (DMH) privacy policies or procedures as determined by the Department's Privacy Officer.
3. Periodic mandatory security training shall be scheduled as determined by the Department's Security Officer.

CCDDR employees shall receive training as part of their initial employee orientation. The content for the HIPAA new employee orientation shall be the same as listed in paragraph A. However, any interactive exercises, or supplemental videos, will not be required content for new employee orientation. HIPAA new employee orientation must take place within 30 days of the date of hire.

C. Volunteers, students and contract employees for CCDDR on a regular course of business shall receive training as a part of their initial CCDDR orientation (also known as the new employee orientation course). The content for the HIPAA initial CCDDR orientation shall be the same as listed in paragraph A to this policy excluding mandatory courses required by DMH. However, any interactive exercises, or supplemental videos, will not be required content for initial CCDDR orientation. Such training must be done within 30 days of the initial date that the person presents for service.

D. The CCDDR Privacy Officer shall identify group(s) or individuals who, due to the nature of their job function within CCDDR, will require in-depth training related to HIPAA and CCDDR's policies, and then provide that specialized training.

E. Documentation of Mandatory Training: Documentation of Mandatory HIPAA Training shall be recorded by the CCDDR Privacy Officer.

#### **XIV. Field Practices**

A. PHI that is unattended shall be secured in a manner to protect such information from persons without authorized access to this PHI.

B. Vehicles containing any PHI shall be kept locked while unoccupied. PHI shall be kept locked in the trunk of the vehicle, when possible. In the event of extreme temperature situations, an electronic device (laptop, personal digital assistant etc.) containing PHI



shall be maintained in the temperature controlled cab in a case while the vehicle is occupied.

- C. In the event of a vehicle accident any CCDDR employee who suspects there is PHI in the vehicle shall make every reasonable attempt to make sure that the PHI is not accessible to anyone who does not need to have access to it, after assuring the health and safety of any individual(s).
- D. Upon an employee leaving an area where they have materials containing PHI, e.g. to use the restroom, the employee shall take the materials with them or ensure that the area is protected from viewing by those without authorization by locking the area, or informing CCDDR personnel if they are CCDDR records, or using some other reasonable intervention.
- E. Electronic devices containing PHI and other forms of PHI shall not be left in a hotel room for the day when cleaning service is expected. Upon leaving the hotel, employees shall take these items with them or ensure they are locked in the valuables area at the front desk or locked in a safe in the room if one is available. Should this not be possible, each document that is contained on the laptop shall be password protected on an individual basis.
- F. Employees shall travel in the field taking only PHI necessary to carry out their duties.
- G. Any documentation or equipment such as laptops, briefcases, etc. that may contain PHI shall be secured from access by those without authorization to the PHI. This includes all locations including an employee's home. Again, each document that is contained on the laptop shall be password protected on an individual basis.
- H. Data contained on all laptops, etc., should be backed-up to a disk or to the network when at all possible to avoid loss of valuable client protected health information.
- I. If PHI in any form is lost or stolen, the CCDDR Privacy Officer should be notified as soon as practical, not to exceed two business days, in order to initiate the mitigation process.
- J. PHI that is potentially within view of others, even if CCDDR staff is present, shall be protected in a manner that such information is not communicated to persons without authorized access to this PHI:
  - 1. All PHI within a vehicle shall be maintained so as to protect from plain view through the windows of the vehicle.
  - 2. Any electronic device containing PHI shall not have the screen placed in view of others and if left unattended briefly, a screen saver with password shall be employed consistent with CCDDR's security requirements.
  - 3. All documentation containing PHI shall be maintained out of the view of unauthorized persons.

4. While working with PHI, the employee shall keep the documentation within line of sight or within arm's reach.
  5. This documentation shall be viewed in the most private settings available.
  6. Only PHI documentation necessary for the task at hand shall be in view.
  7. Briefcases containing PHI shall remain closed when not in use.
  8. When having PHI material copied, the employee shall ensure that this material is only viewed by authorized persons.
  9. When the employee is finished with reviewing CCDDR records containing PHI, the records shall be returned promptly to their appropriate storage area.
- K. Employees shall send and receive faxed materials containing PHI to and from CCDDR facility only, unless such facility is not readily available and timely transmission of records is necessary for safety needs. If in non-CCDDR locations:
1. When sending or receiving a fax containing PHI, the employee shall ensure only those authorized to view have access to the material during the process of transmission.
  2. The fax cover sheet shall not contain PHI.
  3. The employee shall be waiting to receive the fax at the fax machine when the transmission is expected if the material could be accessed by those without authorization to view the PHI.
- L. Any CCDDR identifying information shall not be in plain view such as agency logo on a notebook or briefcase, etc.
- M. When using sign language interpreters where PHI may be transmitted, the most private setting available out of view of others shall be used.
- N. PHI that is verbally transmitted to others shall be protected in a manner that such information is not communicated to persons without authorized access to this PHI.
- O. Conversations where PHI is discussed shall occur in the most private settings. There shall be as much distance as possible between any individuals without authorized access to the PHI.
1. Conversations where PHI is discussed shall occur with the employee using a volume level which cannot be overheard by those without authorized access to the PHI. This includes telephone conversations. If there is no way to prevent being overheard, a specific code shall be used to identify an individual such as chart number, DMH ID #, or client initials.
  2. The employee shall make every effort to keep the volume level of all participants' low enough so as to not be overheard.
  3. Conversations shall involve using only the first name of an individual whenever possible.

P. Wireless/cellular and cordless telephones shall be used for communicating PHI only if necessary.

1. Home cordless telephones can be monitored up to one mile away. The employee shall switch to their regular landline telephone (if available) or digital cellular telephone for increased security if they receive a call on a cordless telephone. Employees shall not communicate PHI on a cordless telephone, unless using a code specified previously.
2. There is currently no device to monitor digital cellular telephone calls, so PHI discussions are currently acceptable. The employee shall not communicate PHI on analog cellular telephones.

Q. PHI that may be shared with others in the course of an employee carrying out duties shall be protected in a manner that such information is not communicated to persons without authorized access to this PHI.

**REFERENCES:**

- Health Insurance Portability And Accountability Act Of 1996/Public Law 104-191



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-69*

**APPROVAL OF AMENDED POLICY #27**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #27, Investment of Board Funds.
2. That the Board hereby amends and adopts Policy #27 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-69



Policy Number: 27 Effective: October 20, 2008 Revised: April 19, 2010, September 17, 2012, October 16, 2017
<hr/> Subject: Investment Of Board Funds

**PURPOSE:**

All funds of Camden County Developmental Disability Resources (CCDDR) are held by the board in a fiduciary capacity. Therefore, all restricted and unrestricted funds of the organization are held by the organization as a steward for the sake of carrying out CCDDR’s mission and objectives. The basic investment standards shall be those of a prudent investor as articulated in applicable state laws pertaining to political subdivisions of Missouri. The following instructions are to be understood and employed with that sense of stewardship in mind. Further, this investment policy is set forth in order that:

- There is a clear understanding of responsibilities and objectives of the board, its delegates, and chosen investment counselors
- The board will have a basis for evaluating the investment performance of each of the organization’s investment funds

**POLICY:**

I. Scope

This policy applies to the investment of all operating funds of the Camden County Senate Bill 40 Board, dba Camden County Developmental Disability Resources (CCDDR).

A. Pooling of Funds

In an effort to maximize account holdings and investment earnings, investment income will be allocated to various fund accounts based on their intended purpose and in accordance with generally accepted accounting principles.

B. External Management of Funds

Investment through external programs, facilities and professionals operating in a manner consistent with this policy will constitute compliance.

II. General Objectives

The primary objectives, in priority, of investments activities shall be safety, liquidity, and yield:

## A. Safety

Safety of principal is the foremost objective of the investment program. Investments shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. The objective will be to mitigate credit risk and interest rate risk.

### 1. Credit Risk

CCDDR will minimize credit risk, the risk of loss due to the failure of the security issuer or backer, by:

- Pre-qualifying the financial institutions, broker/dealers, intermediaries, and advisors with which CCDDR will do business
- Diversifying the portfolio so that potential losses on individual securities will be minimized

### 2. Interest Rate Risk

CCDDR will minimize the risk that the market value of securities in the portfolio will fall due to changes in general interest rates, by:

- Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby avoiding the need to sell securities on the open market prior to maturity
- Investing operating funds primarily in shorter-term securities

## B. Liquidity

The investment portfolio/fund accounts shall remain sufficiently liquid to meet all operating requirements that may be reasonably anticipated. This is accomplished by structuring the portfolio/fund accounts so that securities mature concurrent with cash needs to meet anticipated demands (static liquidity). Furthermore, since all possible cash demands cannot be anticipated, the portfolio/fund accounts should consist largely of securities with active secondary or resale markets (dynamic liquidity). A portion of the portfolio/fund accounts also may be placed in bank deposits or repurchase agreements that offer same-day liquidity for short-term funds.

## C. Yield

The investment portfolio/fund accounts shall be designed with the objective of attaining a market rate of return throughout budgetary and economic cycles, taking into account the investment risk constraints, and liquidity needs. Return on investment is of secondary importance compared to the safety and liquidity objectives described above. The core of investments is limited to relatively low risk securities in anticipation of earning a fair return relative to the risk being assumed. Securities shall not be sold prior to maturity with the following exceptions:

- A security with declining credit may be sold early to minimize loss of principal
- A security swap would improve the quality, yield, or target duration in the portfolio
- Liquidity needs of the portfolio require that the security be sold

### III. Standards of Care

#### A. Prudence

The standard of care to be used by investment officials shall be the “prudent person” standard and shall be applied in the context of managing an overall portfolio/fund accounts. Investment officers acting in accordance with written procedures and this investment policy and exercising due diligence shall be relieved of personal liability for an individual security’s credit risk or market price changes, provided deviations from expectations are reported in a timely fashion to the governing body and the liquidity and the sale of securities are carried out in accordance with the terms of this policy.

Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived.

#### B. Ethics and Conflicts of Interest

Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with the proper execution and management of the investment program, or that could impair their ability to make impartial decisions. CCDDR employees, board members, and investment officials shall disclose any material interests in financial institutions with which they conduct business. They shall further disclose any personal financial/investment positions that could be related to the performance of the investment portfolio/fund accounts. Employees and officers shall refrain from undertaking personal investment transactions with the same individual with which business is conducted on behalf of CCDDR.

#### C. Delegation of Authority

Authority to manage the investment program is granted to the CCDDR Executive Director (hereinafter referred to as the Investment Officer) in consultation with an Investment Advisor employed at a local financial institution. Responsibility for the operation of the investment program is hereby delegated to the investment officer, who shall act in accordance with the established written procedures and internal controls for the operation of the investment program consistent with this Investment Policy, Financial Management Practices Policy, and the CCDDR Bylaws. Procedures should include references to: safekeeping, delivery vs. payment, investment accounting, repurchase agreements, wire transfer agreements, and collateral/depository agreements.



No person may engage in an investment transaction except as provided under the terms of this policy and the procedures established by the investment officer. The investment officer shall be responsible for all transactions undertaken and shall establish a system of controls to regulate the activities of subordinate officials.

#### IV. Investment Transactions

##### A. Authorized Financial Dealers and Institutions

Federally insured banks, credit unions, and other financial institutions are considered acceptable financial dealers and institutions. In the event Federally insured banks, credit unions, or other financial institutions are not intended to be used for investment purposes, a list of financial institutions, which are authorized to conduct and provide investment transactions and approved by the governing body, will be generated and maintained. In addition, a list of approved security broker/dealers selected by creditworthiness as determined by the investment officer and approved by the governing body will be generated and maintained. These may include “primary” dealers or regional dealers that qualify under Securities and Exchange Commission (SEC) Rule 15C3-1 (uniform net capital rule).

All financial institutions and broker/dealers who desire to become qualified for investment transactions must supply the following as appropriate:

- Audited financial statements
- Proof of National Association of Securities Dealers (NASD) certification
- Proof of state registration
- Completed broker/dealer questionnaire
- Certification of having read and understood and agreeing to comply with the CCDDR investment policy.

An annual review of the financial condition and registration of qualified financial institutions and broker/dealers will be conducted by the investment officer.

##### B. Internal Controls

The investment officer is responsible for establishing and maintaining an internal control structure that will be reviewed annually with CCDDR’s independent auditor. The internal control structure shall be designed to ensure that the assets of CCDDR are protected from loss, theft or misuse and to provide reasonable assurance that these objectives are met. The concept of reasonable assurance recognizes that (1) the cost of control should not exceed the benefits likely to be derived and (2) the valuation of costs and benefits require estimates and judgments by management.

The internal controls shall address the following points:

- Control of collusion.

- Separation of transaction authority from accounting and record keeping.
- Custodial safekeeping.
- Avoidance of physical delivery securities.
- Clear delegation of authority to subordinate staff members.
- Written confirmation of transactions for investments and wire transfers.
- Development of a wire transfer agreement with the lead bank and third party custodian.

### C. Delivery vs. Payment

All trades where applicable will be executed by delivery vs. payment (DVP) to ensure that securities are deposited in eligible financial institutions prior to the release of funds. All securities shall be perfected in the name or for the account of CCDDR and shall be held by a third-party custodian as evidenced by safekeeping receipts.

## V. Suitable and Authorized Investments

### A. Investment Types

In accordance with and subject to restrictions imposed by current statutes, the following list represents the entire range of investments that CCDDR will consider and which shall be authorized for the investments of funds by CCDDR.

1. United States Treasury Securities. CCDDR may invest in obligations of the United States government for which the full faith and credit of the United States are pledged for the payment of principal and interest.
2. United States Agency Securities. CCDDR may invest in obligations issued or guaranteed by any agency of the United States Government as described in V. (2).
3. Repurchase Agreements. CCDDR may invest in contractual agreements between CCDDR and commercial banks or primary government securities dealers. The purchaser in a repurchase agreement (repo) enters into a contractual agreement to purchase U.S. Treasury and government agency securities while simultaneously agreeing to resell the securities at predetermined dates and prices.
4. Collateralized Public Deposits (Certificates of Deposit). Instruments issued by financial institutions which state that specified sums have been deposited for specified periods of time and at specified rates of interest. The certificates of deposit are required to be backed by acceptable collateral securities as dictated by State statute.
5. Bankers' Acceptances. Time drafts drawn on and accepted by a commercial bank, otherwise known as bankers' acceptances. CCDDR may invest in bankers' acceptances issued by domestic commercial banks possessing the highest rating issued by Moody's Investor Services, Inc. or Standard and Poor's Corporation.

6. Commercial Paper. CCDDR may invest in commercial paper issued by domestic corporations, which has received the highest rating issued by Moody's Investor Services, Inc. or Standard and Poor's Corporation. Eligible paper is further limited to issuing corporations that have total commercial paper program size in excess of five hundred million dollars (\$500,000,000).
7. Money Market Accounts. CCDDR may invest in money market accounts at Federally insured banks, credit unions, and other financial institutions. Money market accounts are required to be backed by acceptable collateral securities as dictated by State statute.

## B. Security Selection

The following list represents the entire range of United States Agency Securities that CCDDR will consider and which shall be authorized for the investment of funds by CCDDR. Additionally, the following definitions and guidelines should be used in purchasing the instruments:

1. U.S. Govt. Agency Coupon and Zero Coupon Securities. Bullet coupon bonds with no embedded options.
2. U.S. Govt. Agency Discount Notes. Purchased at a discount with maximum maturities of one (1) year.
3. U.S. Govt. Agency Callable Securities. Restricted to securities callable at par only with final maturities of five (5) years.
4. U.S. Govt. Agency Step-Up Securities. The coupon rate is fixed for an initial term. At coupon date, the coupon rate rises to a new, higher fixed term. Restricted to securities with final maturities of five (5) years.
5. U.S. Govt. Agency Floating Rate Securities. The coupon rate floats off one index. Restricted to coupons with no interim caps that reset at least quarterly.
6. U.S. Govt. Mortgage Backed Securities. Restricted to securities with final maturities of five (5) years.

## C. Investment Restrictions and Prohibited Transactions

To provide for the safety and liquidity of CCDDR's funds, the investment portfolio will be subject to the following restrictions:

1. Borrowing for investment purposes ("Leverage") is prohibited.
2. Instruments known as Structured Notes (e.g. inverse floaters, leveraged floaters, and

equity-linked securities) are not permitted. Investment in any instrument, which is commonly considered a “derivative” instrument (e.g. options, futures, swaps, caps, floors, and collars), is prohibited.

3. Contracting to sell securities not yet acquired in order to purchase other securities for purposes of speculating on developments or trends in the market is prohibited.
4. No more than 5% of the total market value of the portfolio may be invested in bankers’ acceptances issued by any one commercial bank and no more than 5% of the total market value of the portfolio may be invested in commercial paper of any one issuer.

#### D. Collateralization

Collateralization will be required on three types of investments: certificates of deposit, money market accounts, and repurchase agreements. The market value (including accrued interest) of the collateral should be at least 100%.

For certificates of deposit, the market value of collateral must be at least 100% or greater of the amount of certificates of deposits plus demand deposits with the depository, less the amount, if any, which is insured by the Federal Deposit Insurance Corporation, or the National Credit Unions Share Insurance Fund.

All securities, which serve as collateral against the deposits of a depository institution, must be safe-kept at a non-affiliated custodial facility. Depository institutions pledging collateral against deposits must, in conjunction with the custodial agent, furnish the necessary custodial receipts within five business days from the settlement date.

CCDDR shall have a depository contract and pledge agreement with each safekeeping bank that will comply with the Financial Institutions, Reform, Recovery, and Enforcement Act of 1989 (FIRREA). This will ensure that CCDDR’s security interest in collateral pledged to secure deposits is enforceable against the receiver of a failed financial institution.

#### E. Repurchase Agreements

The securities for which repurchase agreements will be transacted will be limited to U.S. Treasury and government agency securities that are eligible to be delivered via the Federal Reserve's Fedwire book entry system. Securities will be delivered to CCDDR’s designated Custodial Agent. Funds and securities will be transferred on a delivery vs. payment basis.

### VI. Investment Parameters

#### A. Diversification

The investments shall be diversified to minimize the risk of loss resulting from over concentration of assets in specific maturity, specific issuer, or specific class of securities. Diversification strategies shall be established and periodically reviewed. At a minimum, diversification standards by security type and issuer shall be:

1. U.S treasuries and securities having principal and/or interest guaranteed by the U.S. government.....100%
2. Collateralized time and demand deposit.....100%
3. U.S. Government agencies, and government sponsored enterprises.....no more than 60%
4. Collateralized repurchase agreements.....50%
5. U.S. Government agency callable securities.....no more than 30%
6. Commercial Paper.....no more than 30%
7. Bankers' Acceptances.....no more than 30%

B. Maximum Maturities

To the extent possible, CCDDR shall attempt to match its investments with anticipated cash flow requirements. Investments in bankers' acceptances and commercial paper shall mature and become payable not more than one hundred eighty days (180) from the date of purchase. All other investments shall mature and become payable not more than five (5) years from the date of purchase. CCDDR shall adopt weighted average maturity limitations that should not exceed three (3) years and is consistent with the investment objectives.

Because of inherent difficulties in accurately forecasting cash flow requirements, a portion of the portfolio should be continuously invested in readily available funds such as in bank deposits or overnight repurchase agreements to ensure that appropriate liquidity is maintained to meet ongoing obligations.

VII. Reporting

A. Methods

The investment officer shall prepare an investment report at least quarterly, including a management summary that provides an analysis of the status of the current investment portfolio and transactions made over the last quarter. This management summary will be prepared in a manner that will allow CCDDR to ascertain whether investment activities during the reporting period have conformed to the investment policy. The report should be provided to the governing body of CCDDR. The report will include the following:

- Listing of individual securities held at the end of the reporting period.
- Realized and unrealized gains or losses resulting from appreciation or depreciation by listing the cost and market value of securities over one-year duration (in accordance with Government Accounting Standards Board (GASB) 31 requirements). [Note, this is only required annually].

- Average weighted yield to maturity of portfolio on investments as compared to applicable benchmarks.
- Listing of investment by maturity date.
- Percentage of the total portfolio which each type of investment represents.

#### B. Performance Standards

The investment portfolio will be managed in accordance with the parameters specified within this policy. The portfolio should obtain a market average rate of return during a market/economic environment of stable interest rates. A series of appropriate benchmarks may be established against which portfolio performance shall be compared on a regular basis.

Commercial paper and bankers' acceptances must be reviewed monthly to determine if the rating level has changed. The commercial paper and bankers' acceptances should be reviewed for possible sale if the securities are downgraded below the minimum acceptable rating levels.

#### C. Marking to Market

The market value of the portfolio shall be calculated at least quarterly and a statement of the market value of the portfolio shall be issued at least annually to the governing body of CCDDR. This will ensure that review of the investment portfolio, in terms of value and price volatility, has been performed.

### VIII. Policy Considerations

#### A. Exemption

Any investment currently held that does not meet the guidelines of this policy shall be exempt from the requirements of this policy. At maturity or liquidation, such monies shall be reinvested only as provided by this policy.

#### B. Adoption

This policy shall be adopted by resolution of CCDDR's governing body. The policy shall be reviewed annually by the investment officer and recommended changes will be presented to the governing body for consideration.

### **REFERENCES:**

- Section 30.950 RSMo



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-70*

**APPROVAL OF AMENDED POLICY #28**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #28, Conflict of Interest.
2. That the Board hereby amends and adopts Policy #28 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-70





Policy Number:

28

Effective: November 10, 2008

Revised: October 16, 2017

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Subject: Conflict Of Interest

## **POLICY:**

Camden County Developmental Disability Resources (CCDDR) is a political subdivision of Camden County Missouri responsible for overseeing a county tax levy dedicated to meeting the needs of Camden County citizens with developmental disabilities.

Consequently, there exists between CCDDR and its Board, officers, management employees, and the public, a fiduciary duty, which carries with it a broad and unbending duty of loyalty and fidelity. The Board, officers, and management employees have the responsibility of administering the affairs of CCDDR honestly and prudently, and of exercising their best care, skill, and judgment for the sole benefit of CCDDR. Those persons shall exercise the utmost good faith in all transactions involved in their duties, and they shall not use their positions with CCDDR or knowledge gained there from for their personal benefit. The interests of the organization must be the first priority in all decisions and actions.

## **PROCEDURES:**

### **I. Persons Concerned**

This statement is directed not only to directors, Board, officers, and management employees but to all employees who can influence the actions of CCDDR. For example, this would include all who make purchasing decisions, all persons who might be described as "management personnel," and anyone who has proprietary information concerning CCDDR.

### **II. Areas in which Conflict May Arise**

Conflicts of interest may arise in the relations of directors, officers, and management employees with any of the following third parties:

- Persons and firms supplying goods and services to CCDDR
- Persons and firms from whom CCDDR leases property and equipment
- Persons and firms with whom CCDDR is dealing or planning to deal in connection with the gift, purchase, or sale of real estate, securities, or other property
- Competing or affinity organizations
- Donors and others supporting CCDDR
- Agencies, organizations, and associations which affect the operations of CCDDR
- Family members, friends, and other employees

### III. Nature of Conflicting Interest

A conflicting interest may be defined as an interest, direct or indirect, with any persons or firms mentioned in Section II. Such an interest might arise through:

- Owning stock or holding debt or other proprietary interests in any third party dealing with CCDDR
- Holding office, serving on the Board, participating in management, or being otherwise employed (or formerly employed) with any third party dealing with, or funded by, CCDDR
- Receiving remuneration for services with respect to individual transactions involving CCDDR
- Using CCDDR's time, personnel, equipment, supplies, or good will for other than agency-approved activities, programs, and purposes
- Receiving personal gifts or loans from third parties dealing or competing with CCDDR – no personal gift of money should ever be accepted

### IV. Interpretation of this Statement of Policy

The areas of conflicting interest listed in Section III, and the relations in those areas which may give rise to conflict, as listed in Section II, are not exhaustive. Conflicts might arise in other areas or through other relations. It is assumed that the directors, officers, and management employees will recognize such areas and relation by similiarity. The fact that one of the interests described in Sections II and III exists does not necessarily mean that a conflict exists, or that the conflict, if it exists, is material enough to be of practical importance, or if material, that upon full disclosure of all relevant facts and circumstances it is necessarily adverse to the interests of CCDDR. However, it is the policy of the Board that the existence of any of the interests described in Sections II and III shall be disclosed before any transaction is consummated. It shall be the continuing responsibility of the Board, officers, and management employees to scrutinize their transactions and outside business interests and relationships for potential conflicts and to immediately make such disclosures.

### V. Disclosure Policy and Procedure

Transactions with parties with whom a conflicting interest exists may be undertaken only if all of the following are observed:

- The conflicting interest is fully disclosed
- The person with the conflict of interest is excluded from the discussion and approval of such transaction
- A competitive bid or comparable valuation exists
- The Board, duly constituted committee thereof, or CCDDR legal counsel has determined that the transaction is in the best interest of the organization

Disclosure in the organization should be made to the Executive Director (or if she or he is the one with the conflict, then to the Board Chairperson), who shall bring the matter to the

attention of the Board or a duly constituted committee thereof. Disclosure involving directors should be made to the Board Chairperson, (or if she or he is the one with the conflict, then to the Board Vice Chairperson) who shall bring these matters to the Board, duly constituted committee thereof, or CCDDR legal counsel.

The Board, duly constituted committee thereof, or CCDDR legal counsel shall determine whether a conflict exists and in the case of an existing conflict, whether the contemplated transaction may be authorized as just, fair, and reasonable to CCDDR. The decision of the Board, duly constituted committee thereof, or CCDDR legal counsel on these matters will rest in their sole discretion, and their concern must be the welfare of CCDDR and the advancement of its purpose.

**REFERENCES:**

- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-71*

**APPROVAL OF AMENDED POLICY #30**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #30, Donations.
2. That the Board hereby amends and adopts Policy #30 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-71



Policy Number:

30

Effective: April 19, 2010

Revised: October 16, 2017

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Subject: Donations

## **PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to follow sound legal and ethical business practices that comply with all applicable state and federal laws with regard to acceptance of donations.

## **POLICY:**

As a tax-supported entity, it is also the policy of CCDDR not to compete with or otherwise undermine the efforts of affiliated 501(c)3 nonprofit agencies in their efforts in soliciting donations and/or grant funds.

### **I. Gift Acceptance Policy**

CCDDR may occasionally solicit and accept gifts for purposes that will help the organization further and fulfill its mission. Donations shall only be accepted by the Board to support agency-wide programs and activities, and use of all donations shall comply with the Board's stated mission as well as statutory guidelines regarding use of County Board funds (Sections 205.968-205.972 RSMo). Potential donations made with the intent to support individual clients and/or programs and activities that do not fall within the Board's statutory authority shall be referred to other affiliated nonprofit agencies based in Camden County that serve persons with developmental disabilities. As a tax-supported entity, CCDDR shall not solicit donations from funding sources that typically would fund affiliated nonprofit agencies supported by the Board. The following policies and guidelines govern acceptance of gifts made to CCDDR for the benefit of any of its operations, programs, or services.

### **II. Use of Legal Counsel**

CCDDR will seek the advice of legal counsel in matters relating to acceptance of gifts when appropriate. Review by counsel is recommended for:

- Gifts of securities that are subject to restrictions or buy-sell agreements
- Documents naming CCDDR as trustee or requiring CCDDR to act in any fiduciary capacity
- Gifts requiring CCDDR to assume financial or other obligations
- Transactions with potential conflicts of interest
- Gifts of property which may be subject to environmental or other regulatory restrictions

CCDDR urges all prospective donors to seek the assistance of personal legal and financial advisors in matters relating to their gifts, including the resulting tax and estate planning consequences.

### III. Gifts Generally Accepted Without Review

#### *Cash*

Cash gifts are acceptable in any form, including by check, money order, or credit card. Donors wishing to make a gift by credit card must provide the card type (e.g., Visa, MasterCard, American Express), card number, expiration date, and name of the card holder as it appears on the credit card.

#### *Marketable Securities*

Marketable securities may be transferred electronically to an account maintained at one or more brokerage firms or delivered physically with the transferor's endorsement or signed stock power (with appropriate signature guarantees) attached. All marketable securities will be sold promptly upon receipt unless otherwise directed by CCDDR's Board of Directors. In some cases, marketable securities may be restricted, for example, by applicable securities laws or the terms of the proposed gift; in such instances the decision whether to accept the restricted securities shall be made by the Board of Directors.

#### *Bequests and Beneficiary Designations under Revocable Trusts, Life Insurance Policies, Commercial Annuities and Retirement Plans*

Donors are encouraged to make bequests to CCDDR under their wills, and to name CCDDR as the beneficiary under trusts, life insurance policies, commercial annuities, and retirement plans.

#### *Charitable Remainder Trusts*

CCDDR will accept designation as a remainder beneficiary of charitable remainder trusts.

#### *Charitable Lead Trusts*

CCDDR will accept designation as an income beneficiary of charitable lead trusts.

### IV. Gifts Accepted Subject to Prior Review

#### *Tangible Personal Property*

The Executive Director shall review and make a recommendation to the Board of Directors as to whether to accept any gifts of tangible personal property in light of the following considerations:

- Does the property further the organization's mission?
- Is the property marketable?
- Are there any unacceptable restrictions imposed on the property?
- Are there any carrying costs for the property for which the organization may be responsible?
- Is the title/provenance of the property clear?

### *Life Insurance*

CCDDR will accept gifts of life insurance where CCDDR is named as both beneficiary and irrevocable owner of the insurance policy. The donor must agree to pay, before due, any future premium payments owing on the policy.

### *Real Estate*

All gifts of real estate are subject to review by the Executive Director and approval by the Board of Directors. Prior to acceptance of any gift of real estate other than a personal residence, CCDDR shall require an initial environmental review by a qualified environmental firm. In the event that the initial review reveals a potential problem, the organization may retain a qualified environmental firm to conduct an environmental audit. Criteria for acceptance of gifts of real estate include:

- Is the property useful for the organization's purposes?
- Is the property readily marketable?
- Are there covenants, conditions, restrictions, reservations, easements, encumbrances or other limitations associated with the property?
- Are there carrying costs (including insurance, property taxes, mortgages, notes, or the like) or maintenance expenses associated with the property?
- Does the environmental review or audit reflect that the property is damaged or otherwise requires remediation?

Certain forms of gifts or donated properties may be subject to review prior to acceptance. Examples of gifts subject to prior review include, but are not limited to gifts that would:

- Result in CCDDR violating its statutory authority
- Are too difficult or too expensive to administer in relation to their value
- Result in any unacceptable consequences for CCDDR
- Are for purposes outside CCDDR's mission

Decisions on the restrictive nature of a gift, and its acceptance or refusal, shall be made by the Board of Directors, in consultation with the Executive Director and, if appropriate, legal counsel.



V. Monitoring Restricted Gifts Policy

CCDDR will fulfill a donor's specified gift intent to the extent that doing so is legal, consistent with the organization's statutory authority, and capable of being performed. CCDDR will discourage donors from imposing investment and transferability restrictions on assets given to the organization. However, once donations with such restrictions have been accepted, the organization will comply with such restrictions.

VI. Policy Concerning the Use of Solicitors

The Executive Director of CCDDR shall approve any proposed fundraising plan before funds are solicited on behalf of the organization. The plan must indicate the targeted groups or audience that will be solicited, the literature that will be used to support the fundraising effort, the timeframe for the campaign, and the names of the persons who will be soliciting funds on the organization's behalf.

**REFERENCES:**

- CARF Standards Manual
- Sections 205.968-205.972 RSMo



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-72*

**APPROVAL OF AMENDED POLICY #35**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #35, Social Media Policy.
2. That the Board hereby amends and adopts Policy #35 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A” to Resolution  
2017-72



Policy Number:

35

Effective: September 15, 2014

Revised: October 16, 2017

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Subject: Social Media Policy

## **PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to implement sound social media management practices that allow for information distribution, information gathering, communications, program/service/support promotion, and all related activities. All social media management practices of the Board shall comply with applicable state and federal laws.

## **POLICY:**

### **I. Expectations**

CCDDR expects all of their employees who participate in online social networking and the use of social media to understand and follow the guidelines set forth in this policy. These guidelines cover all social media websites including but not limited to Facebook, MySpace, LinkedIn, blogs (Twitter), newsgroups, chat rooms, video and photo sharing websites (YouTube, Flickr), Forums and discussion boards (Google Groups, Yahoo! Groups), and online encyclopedias (Wikipedia, Sidewiki). Social media websites are widely accessible allowing users a means of communicating worldwide. What you post may linger around a long time, so consider the content carefully before you post. CCDDR's clients and their business are confidential. Be smart about protecting yourself, your privacy and our agency's confidential information. Don't post about clients or potential clients!

Employees of CCDDR are allowed to access social media on company computers; however, this access should not interfere with productivity during working hours. If blogging and/or posting is done while an employee is on duty, from agency equipment, it must pertain to the CCDDR agency and comply with all agency policies and procedures related to confidentiality, ethics, code of conduct, use of agency equipment, and discrimination/harassment. CCDDR reserves the right to monitor employee profiles and postings on social media sites.

## II. Responsibility for Content

Only employees authorized by the Executive Director are to post on social media websites on CCDDR's behalf. An employee making unauthorized posts may be personally and legally responsible for the content of information which the employee posts on social media sites. Employees are prohibited from using their agency e-mail address as their login name or user "handle" in their personal profiles or when posting, blogging, or tweeting. Employees are also prohibited from using CCDDR logos, trademarks and other intellectual property unless authorized.

## III. Know You're Always "On"

You represent CCDDR at all times and you must assume that your social media usage is visible to clients, managers and prospects. Be sure to manage what and with whom you are sharing.-

## IV. Maintaining Confidentiality of Agency Information

State and federal laws, as well as agency policies, prohibit current and past employees from divulging confidential agency information. In particular, employees are required to maintain the confidentiality of protected agency information and are prohibited from disseminating such information through the use of social media sites. Confidential information may include financial, legal, internal policies and procedures, and client photos or information, as well as other employees' personal information.

## V. Maintaining CCDDR's Positive Image

Employees may not make discriminatory, harassing, defamatory, libelous or slanderous statements about the agency, its employees, Board of Directors, vendors, clients, or providers. Be respectful as you can have an edge without being obscene. Do not make remarks that could be interpreted as off topic or offensive. Always demonstrate respect for others' points of view, even when they are not offering the same in return.

Employees may not blog/post comments regarding any sensitive or confidential matters of the agency. Employees are responsible for conducting themselves as role models for those persons the agency serves and must act accordingly.

## VI. Speaking on Behalf of CCDDR

Blogs are individual, not agency communications, and employees must represent that they are expressing their personal opinions and not those of the agency while blogging using social media on their own time. Only CCDDR's Executive Director and Executive Director's designees are permitted to speak on behalf of CCDDR.

## VII. Disciplinary Action

Violation of any aspect of this Social Media Policy may result in disciplinary action up to and including immediate termination.

If in the event an employee is deemed eligible for rehire at time of separation, slanderous remarks made about CCDDR or its employees would result in an ineligible status for rehire.

These terms and conditions govern your use of any social media platform and are subject to change without notice.

You are responsible for the content you post and all activity that occurs under your account. You may not misrepresent yourself or take on the identity of someone else in order to post any content relating to CCDDR.

*You agree not to use any social media sites for:*

- Defamation
- Harassment
- Offensive content
- Illegal activities
- Activities damaging to the reputation, public trust, or confidence placed in CCDDR

You agree not to post content that is illegal, obscene, threatening or abuse intellectual property rights on any social media site that can be reasonably linked to your status as an employee of CCDDR.

CCDDR reserves the right to review, edit and/or delete any of your postings at its sole discretion. This may require you to log on to your social media identities in the presence of CCDDR management to remove or alter posts as a condition of employment.

### **REFERENCES:**

- CARF Standards Manual



*CAMDEN COUNTY SB40 BOARD OF DIRECTORS  
RESOLUTION NO. 2017-73*

**NEW POLICY 43 – STAFF TRAINING**

**WHEREAS**, Sections 205.968-205.972 RSMo and subsequent passage by Camden Co. voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

**WHEREAS**, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, manuals, and job descriptions and creates new Bylaws, policies, plans, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

**NOW, THEREFORE, BE IT RESOLVED:**

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the “Board”, hereby acknowledges the need to create Policy Number 43, Staff Training.
2. That the Board hereby adopts Policy 43 as presented in Attachment “A” hereto.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary, Vice Chairman, or Treasurer

\_\_\_\_\_  
Date

Attachment “A”  
Resolution 2017-73





Policy Number:

43

Effective Date: October 16, 2017

Revised: N/A

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Subject: Staff Training

**PURPOSE:**

Camden County Developmental Disability Resources (CCDDR) shall have a policy to provide ongoing training opportunities for all staff in an effort to ensure best practices are implemented in all areas of CCDDR.

**POLICY:**

- I. Each employee will be trained by their immediate supervisor and/or designee in the responsibilities and duties of the position they were hired for. This includes introducing knowledge of all procedures, forms and information necessary to perform their duties,
- II. Each employee will have opportunities to receive on-going training from their supervisor at staff meetings, agency meetings, and one-on-one instruction as the need arises.
- III. Each employee will be encouraged to attend seminars, webinars, and conferences relative to their duties at CCDDR, presented and prepared by experts outside of CCDDR. Attendance at outside training must be approved by the immediate supervisor and is contingent on budget, staffing patterns, and workload.

**REFERENCES:**

- CCDDR Employee Manual
- Targeted Case Management Agreement with DMH