



March 11th, 2025

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

Open Session Board Meeting

Agenda

Camden County Senate Bill 40 Board
DBA Camden County Developmental Disability Resources (CCDDR)
100 Third Street
Camdenton, MO 65020

Tentative Agenda for Open Session Board Meeting on March 11th, 2025, at 6:00 PM

This Meeting will be Held via WebEx/Phone Only:

<https://camdencountydevelopmentaldisabilityresources.my.webex.com/camdencountydevelopmentaldisabilityresources.my/j.php?MTID=m7eade912392fdc1ac9eb3f2f8f26bce9>

**To Join by Phone: 1-415-655-0001
Meeting Number (Access Code): 2555 677 7867
Meeting Password: 89899796**

Call to Order/Roll Call

Approval of Agenda

Approval of Open Session Board Meeting Minutes for February 11th, 2025

Acknowledgement of Distributed Materials to Board Members

- January 2025 I Wonder Y Preschool (IWYP) Monthly Reports
- January 2025 Children's Learning Center (CLC) Monthly Reports
- January 2025 Support Coordination Report
- January 2025 Agency Economic Report
- January 2025 Credit Card Statement
- Resolutions 2025-12, 2025-13, 2025-14, 2025-15, 2025-16, 2025-17, 2025-18, 2025-19, 2025-20, & 2025-21

Speakers/Special Guests/Announcements

- NONE

Monthly Reports

- OSL
- IWYP
- CLC

Old Business for Discussion

- NONE

New Business for Discussion

- Keystone Renovations – PCE Change Order

CCDDR Reports

- January 2025 Support Coordination Report
- January 2025 Agency Economic Report

January 2025 Credit Card Statements

Discussion & Conclusion of Resolutions

1. Resolution 2025-12: Approval of Amended Policy 1
2. Resolution 2025-13: Approval of Amended Policy 2
3. Resolution 2025-14: Approval of Amended Policy 8
4. Resolution 2025-15: Approval of Amended Policy 9
5. Resolution 2025-16: Approval of Amended Policy 13
6. Resolution 2025-17: Approval of Amended Policy 22
7. Resolution 2025-18: Approval of Amended Policy 23
8. Resolution 2025-19: Approval of Amended Policy 24
9. Resolution 2025-20: Approval of Amended Policy 33
10. Resolution 2025-21: Approval of Amended Policy 34

Open Discussions

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 of Open Session

Closed Session Pursuant to Section 610.021 RSMo, subsection (17)

The news media may obtain copies of this notice, and a direct link to the WebEx meeting can be submitted to anyone requesting access by contacting:

Ed Thomas, CCDDR Executive Director

100 Third Street (Physical Address), P.O. Box 722 (Mailing Address), Camdenton, MO 65065

Office: 573-317-9233 Fax: 573-317-9332 Email: director@ccddr.org

February 11th, 2025
Open Session Minutes

CAMDEN COUNTY DEVELOPMENTAL DISABILITY RESOURCES

Open Session Minutes of February 11th, 2025

Members Present Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins (joined after meeting began), Angela Richardson, Brian Willey, Ro Witt

Members Absent Nancy Hayes, Angela St. Joan

Others Present Ed Thomas, Executive Director

Guests Present Natalie Couch, Jim Rogers, Mary Hayslett (LAI)
Adrienne Anderson (CLC)
Rachel Baskerville, Jeanna Booth (CCDDR)

Approval of Agenda

Motion by Paul DiBello, second Ro Witt to approve the agenda as presented.

AYE: Paul DiBello, Kym Jones, Laura Martin, Angela Richardson, Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

Approval of Open Session Board Meeting Minutes for January 16th, 2025

Motion by Laura Martin, second Paul DiBello to approve the Open Session Board Meeting Minutes for January 16th, 2025, as presented.

AYE: Paul DiBello, Laura Martin, Brian Willey

NO: None

ABSTAIN: Kym Jones, Angela Richardson, and Ro Witt because they were not present at the January 16th, 2025, meeting.

Motion carries.

Acknowledgement of Distributed Reports & Documents to Board Members

- November & December 2024 Our Savior's Lighthouse Child & Family Developmental Center (OSL) Monthly Reports
- December 2024 I Wonder Y Preschool (IWYP) Monthly Reports
- December 2024 Children's Learning Center (CLC) Monthly Reports
- December 2024 Lake Area Industries (LAI) Monthly Reports
- 2024 Agency Performance Measures Summary as of the 3rd Quarter
- December 2024 Support Coordination Report
- December 2024 Agency Economic Report
- December 2024 Credit Card Statement
- Resolutions 2025-9, 2025-10, & 2025-11

Speakers/Special Guests/Announcements

Brian Willey – SB 40 Board Member

Brian Willey explained that he has been on the CCDDR Board for over 14 years. He has always been a supporter of LAI. On January 2nd, he attended a meeting with Angela Richardson, Ed Thomas, and Jeanna Booth at LAI's office at their request. After introductions, Brian asked what was to be discussed and what he could do to help. The first comment made by LAI was a bold statement of, "We're here because we don't trust Ed Thomas." Brian did not appreciate this comment and felt it was a slap in the face. CCDDR tried to explain the POS agreement and thought the meeting ended on good terms. CCDDR was later notified that LAI has refused to sign the agreement. To him, LAI is sending a clear message that they do not want to cooperate with the terms but continue to send monthly invoices and want to participate in CCDDR's monthly meetings as if nothing is going on.

Motion by Brian Willey, second Ro Witt to not reserve time on the agenda each month for LAI to give monthly reports or to have any Joint Committee meetings until a contract is signed and executed.

The final vote was tabled until later in the meeting.

Elizabeth Perkins joined the meeting at 6:13 pm.

Monthly Reports

Our Saviors Lighthouse (OSL)

OSL is currently serving two clients. They have transitioned to their new accounting software and submitted all their financial reports.

I Wonder Y Preschool (IWYP)

IWYP is serving one client but may have another client returning during the summer months

Children's Learning Center (CLC)

The Step Ahead program currently has 38 children enrolled with 28 out of 38 having special needs or developmental delays. There is one child in attendance one-on-one full time, 3 one-on-ones attending part time, 3 one-on-ones after school, and 16 day hab children with varying schedules. There have been lots of absences due to illness. CLC closed Monday for staff training with United Way and the MU Extension. CLC will also be attending the annual United Way meeting on Thursday. Megan and Adrienne will also be attending the Convention & Visitor Bureau dinner on March 4th. CLC is always looking for First Steps providers. The Quality Assurance Report will return to CLC on February 26th. They will be coming twice a month to work with teachers on areas that might be able to improve. CLC was pleased with their first evaluation and learned their scores are higher than the evaluator is used to seeing. CLC's Valentine's Day party will be Friday and Pizza 4 a Purpose is coming up on March 14th.

Lake Area Industries

LAI employed 51 people in January and 48 were CCDDR clients. There were 3 DESE only employees. There is one more potential new hire in the works. LAI hired one new staff person who will help with offsite crews and the garden center. LAI was scheduled to be closed on President's Day but will go on ahead and open with employees who can make it in to help make up for anticipated snow days. Packaging is busy and another creamer order has been received. Other jobs include ammo cans, rod and reel combos, and a few orders from BTI. The offsite jobs are going well and crews are going out when weather permits. Foam recycling is making progress and there is almost a load of plastic ready. Shredding is still a little behind but there is almost a load of electronics ready to send out. March 5th LAI will be closed for

Day of Choice and will be taking all interested employees to the Capitol. The Department of Labor has not made any announcements about 14(c) but they have to wait 30 days before anything can be announced. It is suspected that the proposed rule will not move forward. LAI's certificate renewal was submitted last week. LAI's financial audit was conducted on January 27th. The prevailing wage surveys came back with a smaller increase than was originally anticipated.

The Board circled back to the previous motion made by Brian Willey. Elizabeth Perkins asked for clarification about if this motion was just removing the compliance piece for LAI since they are not receiving funding at this time. Angela Richardson responded that she was correct and they could still speak during public comment.

(Restated Motion) Motion by Brian Willey, second Ro Witt to not reserve time on the agenda each month for LAI to give monthly reports or to have any Joint Committee meetings until a contract is signed and executed.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

Old Business for Discussion

None

New Business for Discussion

Keystone Renovations – PCE Change Orders

Two change orders have been received from PCE. One is for \$45,394.36 and would include removing existing siding, adding new building wrap, flashing windows properly, and installing new siding. The original contract already included new siding for the garage portion of the building. This will ensure that there are no future moisture issues.

The second change order is for \$31,242.20 and is to remove and replace the trusses with water damage in the garage. They would also replace the roof with proper flashing installed to prevent water from getting in again.

The total cost for both change orders is \$76,636.56.

Motion by Ro Witt, second Kym Jones to approve both change orders.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

CCDDR Reports

2024 Agency Performance Measures Summary as of the 3rd Quarter

The performance measures are internal goals. The overall trajectory shows that numbers are going up and quarter 4 will probably reflect that when it is tabulated. The new support coordinators are doing great.

December 2024 Support Coordination Report

There were 338 clients with 8 pending intakes. Medicaid eligibility was at 78.77% and the percentage of claims billed that were paid is 96.87%.

December 2024 Agency Economic Report

As of December 31st, 2024, SB 40 Tax income was higher than projected and Services program income was lower than projected. That was expected due to several vacancies throughout the year. TCM support was only distributed from tax funds when there was a negative cash flow reflected in the YTD financial reports at the time. TCM support was not needed during all months of the reporting period.

As of December 31st, 2024, YTD expenses were lower than budgeted in all categories on the Tax program side and lower than projected in all categories on the Services program side. Expenses are generally able to be reduced when income reduces as long as there is not catastrophic loss of income.

Motion by Brian Willey, second Elizabeth Perkins to approve the reports as presented.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

December 2024 Credit Card Statements

No questions and a vote not necessary.

Discussion & Conclusion of Resolutions

1. Resolution 2025-9: Amended Fiscal Year 2025 Budget

There was an error on the budget that reflected 3 pay periods in March when they should be in January. This amendment reflects that correction.

Motion by Kym Jones, second Laura Martin to approve Resolution 2025-9 as presented.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

2. Resolution 2025-10: Reallocation/Allocation of Restricted/Unrestricted Funds

This is the annual process of moving carryover funds from the previous year, and any current funds in restricted account codes can be moved and reutilized in other account codes.

Motion by Paul DiBello, second Kym Jones to approve Resolution 2025-10 as presented.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

3. Resolution 2025-11: Approval of Amended Client-Family Handbook

The Client-Family Handbook was amended to update links and staff titles. The People First language version was updated to include different graphics.

Motion by Elizabeth Perkins, second Paul DiBello to approve Resolution 2025-11 as presented.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

Open Discussion

None

Public Comment

Jim Rogers pointed out his background picture and all the lives affected by this funding. Jim stated is clear that Brian does not support LAI anymore. LAI's Board voted not to sign the agreement because of the waiting list. The waiting list is threatening and LAI's Board does not like it. CCDDR is affecting the lives of 55 to 60 families by not helping LAI. Jim expressed he felt like CCDDR is shutting off all discussions and slamming the door. He is not sure why the waiting list is so important, it has never been made clear and hopes CCDDR will rethink this meeting very carefully so LAI does not have to do other things to protect the lives of all the kids who work at LAI.

Angela Richardson asked Ed to give a brief overview of why the waitlist policy has been implemented. The waitlist policy was implemented so that in the future if there are not enough funds to cover all obligations through the POS contract, that is a way to control expenses and continue to support services. This is not uncommon. The State does it as do other agencies. The current POS Agreements are different in that they do not list a funding cap like the contracts before the POS agreements did. In 2016 when the POS agreements were introduced, LAI was strongly opposed to changing to a POS agreement. Since the implementation of those POS agreements the verbiage has mostly stayed the same until the addition of the waiting list language. Natalie has done a fantastic job in getting LAI to a place where they have so much money in the bank. The POS agreement also helped because it allowed LAI to earn revenue based

on the amount of services they provide. Future funding could be shaky, and this is a way to avoid implementing caps into the agreements and avoid the appearance of CCDDR controlling LAI's operations. LAI can still hire individuals who are CCDDR clients even if there is a waitlist in effect. There is no waitlist in effect at this time. It is not anticipated that a waitlist will be needed in the immediate future. It is a possibility that things will change around the way SB 40 funds are received or collected that could result in a decrease in or elimination of the amount of tax funds available. That policy is a preventive measure to ensure that CCDDR does not overspend. CCDDR cannot legally overspend.

Brian Willey stated that he has not shut the door on LAI. He has relationships through Special Olympics with many of LAI's employees and will always be supportive of them. It is nothing personal against the employees. This is strictly between the two Boards and the situation needs to be cleared up.

Jim responded that the waitlist concerns them, and it is also concerning that CCDDR has over \$800,000 in reserves for a building which has been a fiasco from the beginning in his opinion. They are very nervous about that. Take out the waitlist and they will sign the POS agreement tonight.

Mary Hayslett introduced herself as one of LAI's Board members. She joined the Board in July. She has reviewed the original ballot initiative that was passed saying the funds are to be raised for sheltered workshops. CCDDR has a responsibility as the SB 40 Board to be prompt and proper in administering these funds as quickly as possible when the need is there. That needs to be the first priority. The majority of the funds the Board administers comes from that tax revenue. If the POS agreements are only for a year at a time, remove the waitlist for this year and put it in next year if the building has overtaken the use of the funds.

Brian Willey responded that he does not think CCDDR's building has anything to do with this issue. It is an issue on which the Board is standing firm.

Angela Richardson responded that right now CCDDR would still have to pay rent and that cost over the years will far exceed the current cost of temporary storage and what is being invested in Keystone. There would still have to be a place to house all employees that serve CCDDR's clients. The ballot verbiage does not just talk about the money being just for sheltered workshops, it is in a broader sense for developmental disabilities. That means CCDDR is also obligated to help providers like CLC and OSL. All the other funded agencies agreed to the waitlist.

Ed Thomas clarified that the reason LAI is not receiving funding currently is because they are refusing to sign the agreement. There is no waitlist currently. There would be no hindrance on any funding coming to LAI if they signed the agreement right now. Right now, there is not a need for a waitlist. If something drastic happens with the SB 40 funding that could change. There is no immediate need for a waitlist. The reason LAI is not currently receiving funding is because they are refusing to sign the agreement.

Jim Rogers said that if there is no immediate need for a waitlist then leave it out.

Brian Willey responded that there may be a need in the future.

Angela Richardson stated that the Board is being proactive and fiscally responsible. The Board has taken the opportunity to review contracts other SB 40 Boards have with their sheltered workshops and feel confident in including that measure in the POS agreements this year.

Adjournment of Open Session

Motion by Laura Martin, second Ro Witt to adjourn the Open Session Board meeting.

AYE: Paul DiBello, Kym Jones, Laura Martin, Elizabeth Perkins, Angela Richardson
Brian Willey, Ro Witt

NO: None

ABSTAIN: None

Motion carries.

The Open Session Board meeting was adjourned.

Board Chairperson/Other Board Member

Secretary/Other Board Member

IWYP January 2025 Reports

Narrative:

I Wonder Y Preschool and WAVE Childcare are not for profit, 501(c)3 Missouri Methodist supported children's programs dedicated to providing exceptional care to children 3 to 12 years of age. Highly qualified staff provide gentle and loving support to children with the primary goal of aiding each child to reach their fullest potential. Independently created curriculum incorporates a skill set geared toward individual goals and is focused on reaching physical, mental, and spiritual growth in a safe environment. I Wonder Y Preschool and WAVE Childcare are housed by Camdenton United Methodist Church and gladly accepts subsidized payments to help support family needs. All child care programs strive to create an environment that is inclusive to the needs of each child while fostering a love of learning and friendships. Inquiries into the various outreach programs supported by Camdenton United Methodist can be made by calling 573-346-5350 or visiting our website at CamUMC.org.

CamUMC currently offers support through several children and youth programs. The current attendance numbers are:

22 I Wonder Y Preschoolers

14 WAVE After-School Care (Elementary Age)

22 CamUMC J-Force (Youth- Elementary Age)

14 CamUMCYF (Youth- Junior High and High School Age)

Currently, one participant qualifies for CCDDR assistance for one-on-one care. We offer an avg. of 2 hours of care to this child each day (Monday-Friday), and all day care on some of the days when public school is closed or released early.

IWY and WAVE will be closed March 10-14 for Spring Break and March 18th for staff training.

J Force and Youth meetings are held every week during the school session months and include special outings.

Preschool is offered Monday - Friday 7:00 am - 5:30 pm

All Day School-Age care is offered Monday - Friday 7:30 am - 5:30 pm and 3:00 pm - 5:30 pm

CamUMC I Wonder Y Preschool
Cash Flow Statement Jan. 2025

Inflow:	YTD Jan. 2025	
Tuitions:	\$ 6984.00	\$ 6984.00
Donations:	\$ 1198.00	\$ 1198.00
DESE:	\$ *0.0	\$ *0.0
CCDDR:	\$ 506.37	\$ 506.37
DESE Remittance:	\$	
Total Income:	\$ 8688.37	\$ 8688.37
Outflow:		
Staff Expenses:	\$ 8366.00	\$ 8366.00
Food:	\$ 555.53	\$ 555.53
Supplies:	\$ 0.0	\$ 0.0
Misc Expenses: (printer, shared utilities)	\$ 350.00	\$ 350.00
Training	\$ 0.0	\$ 0.0
Total Expenses:	\$ 9271.53	\$ 9271.53
Total cash in =	\$ 8688.37	\$ 8688.37
Total cash out =	\$ 9271.53	\$ 9271.53
Total profit =	-\$ 583.16	-\$ 583.16
Net liquidity =	\$ 14852.00	\$ 14852.00
Net Assets =	\$ 275439.00	\$ 275439.00
Net liabilities =	\$ 7996.06	\$ 7996.06
Net equity=	\$ 6855.94	\$ 6855.94
Shareholders equity =	\$ 275439.00	\$ 275439.00

*Error in processing payments from DESE. Some of these are in remittance review as of 03/03/2025. In February of 2025, we received a total of \$4553.09 in remittance payments from DESE and those figures will reflect on the Feb. 2025 Cash Flow statement. For this year, I will include a space for remittance payments to better reflect overall cash flow.

CLC January 2025 Reports

CHILDREN'S LEARNING CENTER
AGENCY UPDATE/PROGRESS REPORT
February 11, 2025

○ **CHILD COUNT/ATTENDANCE**

The Step Ahead program has 38 children enrolled.

28 out of 38 children enrolled have special needs or developmental delays.

We have 1 one on one children in attendance full time, 3 one on one children part time, 3 one on one children after school, & 16 day habilitation children with varying schedules.

CLC continues to have many children out due to illnesses going around the community.

○ **COMMUNITY EVENTS**

Attending:

Adrienne and Megan will attend the Annual Meeting and Luncheon for the United Way campaign kickoff on Thursday, February 13th.

Adrienne and Megan will be attending the Convention and Visitor Bureau Dinner on Tuesday, March 4th.

Current / Upcoming:

○ **GENERAL PROGRAM NEWS**

- CLC is always looking for providers (SLP, OT, PT, SI) to join our First Steps Agency.
- The QAR (Quality Assurance Report) will return to CLC on February 26th. They will be coming twice a month or so to work with our teachers to set goals in areas where we might be able to make some improvements. We were very pleased with our first evaluation from them, and our Quality Specialist was impressed with the scores that we received as well.
- This Friday, February 14th we will have a Valentine's Party with our families.

○ **GRANTS/FUNDRAISERS**

Our 9th Annual Pizza for a Purpose will be on Friday, March 14th at 6pm at Redhead's Lakeside Grill. Please share our event page if you use Facebook, to help us spread the word about the event. Tickets are available on our website. We will also have raffle tickets for sale again this year. We have some great items available for our silent auction, including Wicked Sugar and Ozark Cookie Company baskets, Cardinals and Royals Tickets, Aquarium and Zoo tickets, a basket from Three Brother's Meat Market, and more! We will also have our balloon pop again this year which is so fun for the kids to participate in. All of the students at CLC will receive a free shirt for the event and it's free for them to attend. We are very excited for this event!



**SB40/CCDDR
March 2025**

Utilizing December January
2025/February Records

CHILDREN'S LEARNING CENTER

Statement of Activity

January 1 - February 26, 2025

	FIRST STEPS	STEP AHEAD	NOT SPECIFIED	TOTAL
Revenue				
40000 INCOME				\$0.00
41000 Contributions & Grants				\$0.00
41100 CACFP		1,449.51		\$1,449.51
41200 Camden County SB40	719.46	12,440.98		\$13,160.44
Total 41000 Contributions & Grants	719.46	13,890.49		\$14,609.95
42000 Program Services				\$0.00
42100 First Steps				\$0.00
42130 Natural Environment Mileage	48.73			\$48.73
42150 Physical Therapy	500.00			\$500.00
42170 Speech/Language Therapy	318.75			\$318.75
Total 42100 First Steps	867.48			\$867.48
Total 42000 Program Services	867.48			\$867.48
43000 Tuition				\$0.00
43100 Dining		300.00		\$300.00
43500 Tuition		4,980.00		\$4,980.00
43505 Subsidy Tuition		2,733.12		\$2,733.12
Total 43500 Tuition		7,713.12		\$7,713.12
Total 43000 Tuition		8,013.12		\$8,013.12
45000 Other Revenue				\$0.00
45200 Fundraising Income				\$0.00
45280 Pizza For A Purpose		891.00		\$891.00
Total 45200 Fundraising Income		891.00		\$891.00
45300 Donation Income				\$0.00
45310 Donations		440.61		\$440.61
Total 45300 Donation Income		440.61		\$440.61
Total 45000 Other Revenue		1,331.61		\$1,331.61
Total 40000 INCOME	1,586.94	23,235.22		\$24,822.16
Total Revenue	\$1,586.94	\$23,235.22	\$0.00	\$24,822.16
GROSS PROFIT	\$1,586.94	\$23,235.22	\$0.00	\$24,822.16
Expenditures				
50000 EXPENDITURES				\$0.00
51000 Payroll Expenditures				\$0.00
51100 Employee Salaries		34,445.78	0.00	\$34,445.78
51400 Employee Retirement		530.00		\$530.00
51500 Employee Taxes		2,877.60	0.00	\$2,877.60
51900 Workermans Comp Insurance		2,369.00		\$2,369.00
Total 51000 Payroll Expenditures		40,222.38	0.00	\$40,222.38
54000 Fundraising/Grants				\$0.00
54510 United Way Grant		192.30		\$192.30
Total 54000 Fundraising/Grants		192.30		\$192.30
55000 Insurance				\$0.00

	FIRST STEPS	STEP AHEAD	NOT SPECIFIED	TOTAL
55100 Brokerage/Other Fees	10.00	40.00		\$50.00
55200 Commercial General Liability	195.80	783.20		\$979.00
55300 Commercial Property	240.00	960.00		\$1,200.00
55400 Director's & Officers	447.40	1,789.60		\$2,237.00
55500 Hired & Non-Owned Auto		63.00		\$63.00
55700 Crime Policy		558.00		\$558.00
Total 55000 Insurance	893.20	4,193.80		\$5,087.00
56000 Office Expenditures				\$0.00
56100 Copy Machine	2.26	9.04		\$11.30
56300 Office Supplies		18.48		\$18.48
Total 56000 Office Expenditures	2.26	27.52		\$29.78
57000 Office/General Administrative Expenditures		10.45		\$10.45
57160 QuickBooks Payments Fees	8.00	476.68		\$484.68
57400 Child Management Software		70.00		\$70.00
57700 Membership/Association Dues		110.00		\$110.00
Total 57000 Office/General Administrative Expenditures	8.00	667.13		\$675.13
58000 Operating Supplies				\$0.00
58150 Center Consumables		11.89		\$11.89
58200 Dining		2,029.24		\$2,029.24
58400 Sanitizing		89.11		\$89.11
Total 58000 Operating Supplies		2,130.24		\$2,130.24
59000 Program Service Fees				\$0.00
59100 First Steps				\$0.00
59130 Natural Environment Mileage	130.93			\$130.93
59150 Physical Therapy	418.75			\$418.75
59170 Speech/Language Therapy	308.12			\$308.12
Total 59100 First Steps	857.80			\$857.80
Total 59000 Program Service Fees	857.80			\$857.80
62000 Safety & Security	91.60	586.40		\$678.00
63000 Utilities				\$0.00
63100 Electric	222.33	889.30		\$1,111.63
63200 Internet	31.92	127.64		\$159.56
63300 Telephone	59.98	239.96		\$299.94
63400 Trash Service		84.68		\$84.68
Total 63000 Utilities	314.23	1,341.58		\$1,655.81
Total 50000 EXPENDITURES	2,167.09	49,361.35	0.00	\$51,528.44
Payroll Expenses				\$0.00
Company Contributions				\$0.00
Retirement		265.00	0.00	\$265.00
Total Company Contributions		265.00	0.00	\$265.00
Total Payroll Expenses		265.00	0.00	\$265.00
Reimbursements		520.67		\$520.67
Total Expenditures	\$2,167.09	\$50,147.02	\$0.00	\$52,314.11
NET OPERATING REVENUE	\$ -580.15	\$ -26,911.80	\$0.00	\$ -27,491.95
NET REVENUE	\$ -580.15	\$ -26,911.80	\$0.00	\$ -27,491.95

CHILDREN'S LEARNING CENTER

Statement of Activity

January 2025

	FIRST STEPS	STEP AHEAD	NOT SPECIFIED	TOTAL
Revenue				
40000 INCOME				\$0.00
41000 Contributions & Grants				\$0.00
41200 Camden County SB40	719.46	12,440.98		\$13,160.44
Total 41000 Contributions & Grants	719.46	12,440.98		\$13,160.44
43000 Tuition				\$0.00
43100 Dining		150.00		\$150.00
43500 Tuition		2,490.00		\$2,490.00
Total 43000 Tuition		2,640.00		\$2,640.00
45000 Other Revenue				\$0.00
45300 Donation Income				\$0.00
45310 Donations		225.00		\$225.00
Total 45300 Donation Income		225.00		\$225.00
Total 45000 Other Revenue		225.00		\$225.00
Total 40000 INCOME	719.46	15,305.98		\$16,025.44
Total Revenue	\$719.46	\$15,305.98	\$0.00	\$16,025.44
GROSS PROFIT	\$719.46	\$15,305.98	\$0.00	\$16,025.44
Expenditures				
50000 EXPENDITURES				\$0.00
51000 Payroll Expenditures				\$0.00
51100 Employee Salaries		23,148.13	0.00	\$23,148.13
51400 Employee Retirement		310.00		\$310.00
51500 Employee Taxes		1,933.80	0.00	\$1,933.80
51900 Workermans Comp Insurance		2,369.00		\$2,369.00
Total 51000 Payroll Expenditures		27,760.93	0.00	\$27,760.93
54000 Fundraising/Grants				\$0.00
54510 United Way Grant		192.30		\$192.30
Total 54000 Fundraising/Grants		192.30		\$192.30
55000 Insurance				\$0.00
55700 Crime Policy		558.00		\$558.00
Total 55000 Insurance		558.00		\$558.00
56000 Office Expenditures				\$0.00
56100 Copy Machine	2.26	9.04		\$11.30
56300 Office Supplies		18.48		\$18.48
Total 56000 Office Expenditures	2.26	27.52		\$29.78
57000 Office/General Administrative Expenditures		10.45		\$10.45
57160 QuickBooks Payments Fees	8.00	241.34		\$249.34
57400 Child Management Software		35.00		\$35.00
Total 57000 Office/General Administrative Expenditures	8.00	286.79		\$294.79
58000 Operating Supplies				\$0.00
58150 Center Consumables		11.89		\$11.89
58200 Dining		2,029.24		\$2,029.24

	FIRST STEPS	STEP AHEAD	NOT SPECIFIED	TOTAL
58400 Sanitizing		89.11		\$89.11
Total 58000 Operating Supplies		2,130.24		\$2,130.24
62000 Safety & Security	41.80	167.20		\$209.00
63000 Utilities				\$0.00
63100 Electric	92.87	371.46		\$464.33
63200 Internet	15.96	63.82		\$79.78
63300 Telephone	29.99	119.98		\$149.97
63400 Trash Service		42.34		\$42.34
Total 63000 Utilities	138.82	597.60		\$736.42
Total 50000 EXPENDITURES	190.88	31,720.58	0.00	\$31,911.46
Payroll Expenses				\$0.00
Company Contributions				\$0.00
Retirement		90.00	0.00	\$90.00
Total Company Contributions		90.00	0.00	\$90.00
Total Payroll Expenses		90.00	0.00	\$90.00
Reimbursements		520.67		\$520.67
Total Expenditures	\$190.88	\$32,331.25	\$0.00	\$32,522.13
NET OPERATING REVENUE	\$528.58	\$ -17,025.27	\$0.00	\$ -16,496.69
NET REVENUE	\$528.58	\$ -17,025.27	\$0.00	\$ -16,496.69

CHILDREN'S LEARNING CENTER

Statement of Cash Flows

January 1 - February 26, 2025

	TOTAL
OPERATING ACTIVITIES	
Net Revenue	-27,491.95
Adjustments to reconcile Net Revenue to Net Cash provided by operations:	
Accounts Receivable (A/R)	0.00
Accounts Payable (A/P)	0.00
21000 CBOLO MasterCard -8027	94.11
21200 Kroger-DS1634 CLC	-494.81
22000 Payroll Liabilities	81.51
22300 Payroll Liabilities:Federal Taxes (941/944)	-933.65
22400 Payroll Liabilities:MO Income Tax	-788.00
22500 Payroll Liabilities:MO Unemployment Tax	-174.98
Direct Deposit Payable	0.00
Payroll Liabilities:Ascensus	530.00
Total Adjustments to reconcile Net Revenue to Net Cash provided by operations:	-1,685.82
Net cash provided by operating activities	\$ -29,177.77
NET CASH INCREASE FOR PERIOD	\$ -29,177.77
Cash at beginning of period	283,652.19
CASH AT END OF PERIOD	\$254,474.42

CHILDREN'S LEARNING CENTER

Statement of Cash Flows

January 2025

	TOTAL
OPERATING ACTIVITIES	
Net Revenue	-16,496.69
Adjustments to reconcile Net Revenue to Net Cash provided by operations:	
Accounts Receivable (A/R)	0.00
Accounts Payable (A/P)	3,962.58
21000 CBOLO MasterCard -8027	-554.98
21200 Kroger-DS1634 CLC	2,041.13
22000 Payroll Liabilities	81.51
22300 Payroll Liabilities:Federal Taxes (941/944)	-933.65
22400 Payroll Liabilities:MO Income Tax	-788.00
22500 Payroll Liabilities:MO Unemployment Tax	-174.98
Direct Deposit Payable	0.00
Payroll Liabilities:Ascensus	180.00
Total Adjustments to reconcile Net Revenue to Net Cash provided by operations:	3,813.61
Net cash provided by operating activities	\$ -12,683.08
NET CASH INCREASE FOR PERIOD	\$ -12,683.08
Cash at beginning of period	283,652.19
CASH AT END OF PERIOD	\$270,969.11

CHILDREN'S LEARNING CENTER

Statement of Financial Position

As of February 26, 2025

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
11000 CBOLO Checking	253,874.42
Total Bank Accounts	\$253,874.42
Accounts Receivable	
Accounts Receivable (A/R)	120.00
Total Accounts Receivable	\$120.00
Other Current Assets	
14000 Undeposited Funds	600.00
Cash Advance	700.00
Payroll Corrections	-464.47
Prepaid Expenses	7,971.74
Repayment	
Cash Advance Repayment	-1,000.00
Total Repayment	-1,000.00
Total Other Current Assets	\$7,807.27
Total Current Assets	\$261,801.69
TOTAL ASSETS	\$261,801.69
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable (A/P)	0.00
Total Accounts Payable	\$0.00
Credit Cards	
21000 CBOLO MasterCard -8027	-348.50
21200 Kroger-DS1634 CLC	0.00
Total Credit Cards	\$ -348.50
Other Current Liabilities	
22000 Payroll Liabilities	81.51
22100 Anthem	2,191.63
22200 Childcare Tuition	3,141.44
22300 Federal Taxes (941/944)	-8,320.79
22400 MO Income Tax	-3,070.48
22500 MO Unemployment Tax	-1,140.82
22600 Primevest Financial	448.19
Aflac	8,859.15
Alieria	9,354.60
Ascensus	18,335.00
Globe Life - After Tax	147.81
Globe Life - After Tax Life Insurance Children	157.08
Globe Life Accidental Insurance - Pre-Tax Insurance	903.09

	TOTAL
Globe Life After Tax	113.52
Health Care (United HealthCare)	821.87
US Department of Education	1,115.65
Total 22000 Payroll Liabilities	33,138.45
Direct Deposit Payable	-50.00
Total Other Current Liabilities	\$33,088.45
Total Current Liabilities	\$32,739.95
Total Liabilities	\$32,739.95
Equity	
30000 Opening Balance Equity	13,816.12
Retained Earnings	242,737.57
Net Revenue	-27,491.95
Total Equity	\$229,061.74
TOTAL LIABILITIES AND EQUITY	\$261,801.69

CHILDREN'S LEARNING CENTER

A/P Aging Summary

As of February 26, 2025

	CURRENT	1 - 30	31 - 60	61 - 90	91 AND OVER	TOTAL
TOTAL						\$0.00

CHILDREN'S LEARNING CENTER

A/P Aging Summary


As of January 31, 2025

	CURRENT	1 - 30	31 - 60	61 - 90	91 AND OVER	TOTAL
Bankcard Services	3,782.58					\$3,782.58
Lebanon Phone Center & Alarm, Inc.	180.00					\$180.00
TOTAL	\$3,962.58	\$0.00	\$0.00	\$0.00	\$0.00	\$3,962.58

CHILDREN'S LEARNING CENTER

A/R Aging Summary

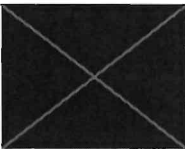
As of February 26, 2025

	CURRENT	1 - 30	31 - 60	61 - 90	91 AND OVER	TOTAL
	-600.00					\$ -600.00
			480.00			\$480.00
		-360.00				\$ -360.00
			600.00			\$600.00
TOTAL	\$ -600.00	\$ -360.00	\$1,080.00	\$0.00	\$0.00	\$120.00

CHILDREN'S LEARNING CENTER

A/R Aging Summary

As of January 31, 2025

	CURRENT	1 - 30	31 - 60	61 - 90	91 AND OVER	TOTAL
		-600.00				\$ -600.00
		480.00				\$480.00
		-360.00				\$ -360.00
		600.00				\$600.00
TOTAL	\$0.00	\$120.00	\$0.00	\$0.00	\$0.00	\$120.00

Support Coordination Report

January 2025

Client Caseloads

- Number of Caseloads as of January 31st, 2025: 337
- Budgeted Number of Caseloads: 335
- Pending Number of New Intakes: 9
- Medicaid Billable: 79.23%

Caseload Counts

Heather Becker – 30

Daniel Burrows – 31

Elizabeth Chambers – 35

Robyne Gerstner – 31

Angela Graves – 33

Ryan Johnson – 1

Jamie Merryman – 31

Christina Mitchell – 34

Treslyn Pollreisz – 32

Patricia Strouse – 38

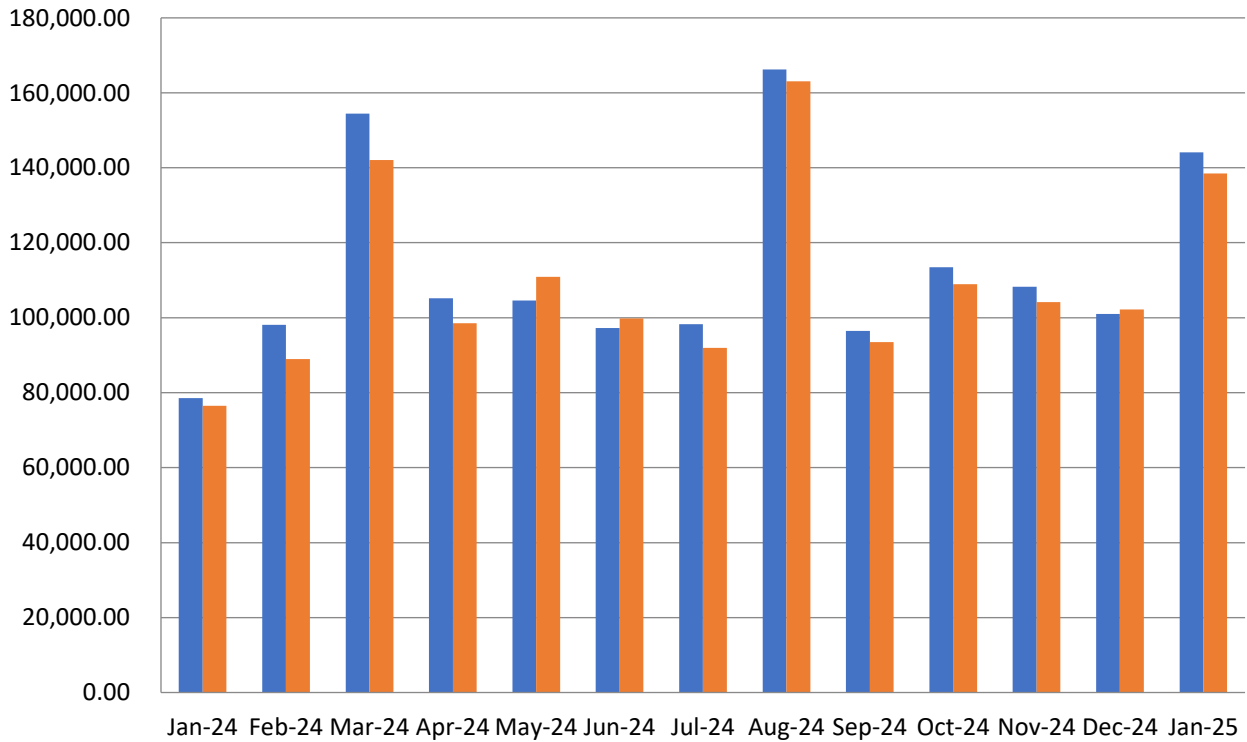
Mery Viebrock – 41

Agency Economic
Report
(Unaudited)

January 2025

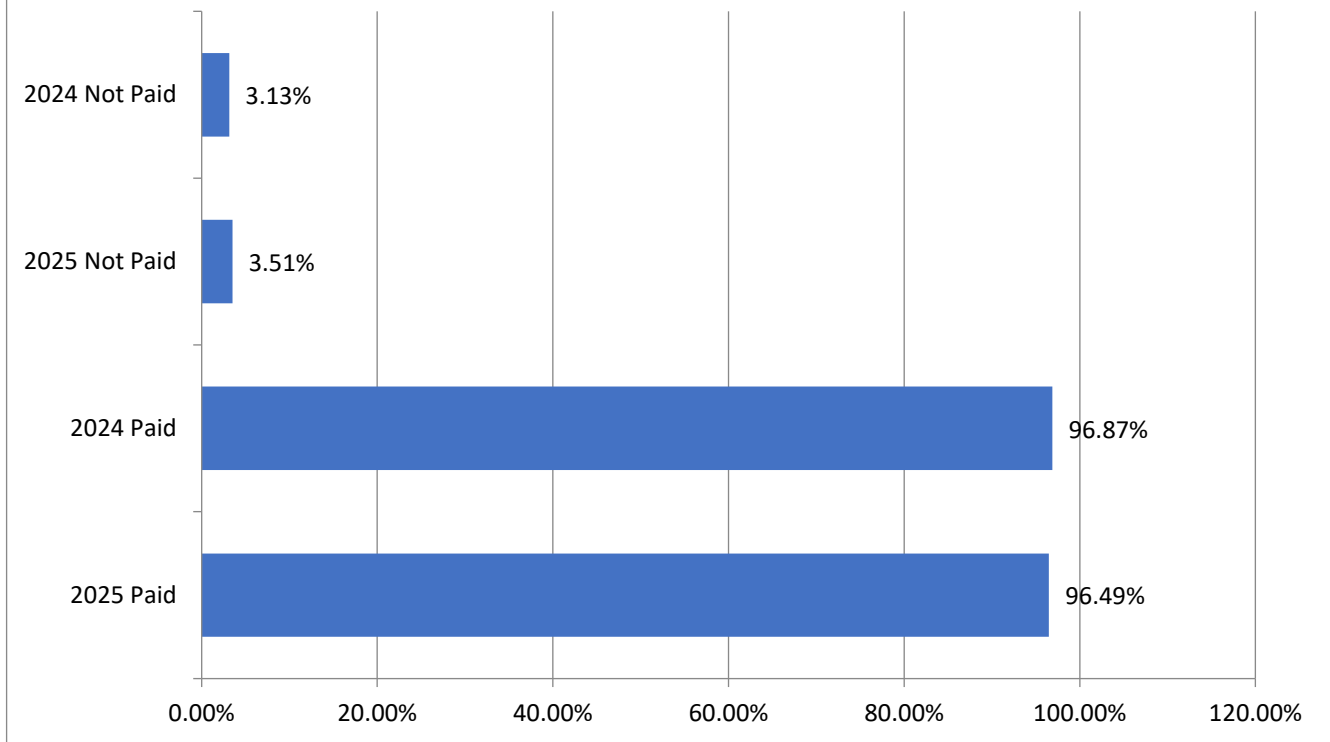
Medicaid Targeted Case Management Income

TCM Billed vs TCM Payment Received



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25
Total Payable Billed	78,589.44	98,124.48	154,431.36	105,166.08	104,621.76	97,208.64	98,245.44	166,242.24	96,508.80	113,495.04	108,293.76	101,010.24	144,106.56
Total Payment Received	76,481.28	88,957.44	142,076.16	98,565.12	110,894.40	99,792.00	91,951.08	163,114.56	93,458.88	108,915.84	104,120.64	102,189.85	138,516.48

2025 vs 2024 Percentage Comparison Medicaid Billed vs Medicaid Paid



Budget vs. Actuals: January 2025

	SB 40 Tax			Services		
	Actual	Budget	Variance	Actual	Budget	Variance
Income						
4000 SB 40 Tax Income	1,010,243	756,502	253,741			0
4500 Services Income			0	186,146	189,356	(3,210)
Total Income	1,010,243	756,502	253,741	186,146	189,356	(3,210)
Gross Profit	1,010,243	756,502	253,741	186,146	189,356	(3,210)
Expenses						
5000 Payroll & Benefits			0	170,684	172,155	(1,471)
5100 Repairs & Maintenance			0	54	526	(472)
5500 Contracted Business Services			0	8,320	11,383	(3,063)
5600 Presentations/Public Meetings			0	485	240	245
5700 Office Expenses			0	933	4,025	(3,092)
5800 Other General & Administrative		25	(25)	11,431	7,760	3,671
5900 Utilities			0	1,286	1,275	11
6100 Insurance			0	2,609	2,000	609
6700 Partnership for Hope	3,794	3,270	524			0
6900 CCDDR Programs & Services	46,941	27,021	19,920			0
7200 Children's Programs	14,233	17,550	(3,317)			0
7300 Sheltered Employment Programs	3,490	22,000	(18,510)			0
7600 Community Resources			0		0	0
7900 Special/Additional Needs	1,234	317	917			0
Total Expenses	69,691	70,183	(492)	195,803	199,364	(3,561)
Net Operating Income	940,552	686,319	254,233	(9,657)	(10,008)	351
Other Expenses						
8500 Depreciation			0	2,719	4,125	(1,406)
Total Other Expenses	0	0	0	2,719	4,125	(1,406)
Net Other Income	0	0	0	(2,719)	(4,125)	1,406
Net Income	940,552	686,319	254,233	(12,376)	(14,133)	1,757

Budget Variance Report

Total Income: As of January, YTD SB 40 Tax Program income was higher than projected, and YTD Services Program income was slightly lower than projected. Medicaid revenues were slightly lower due to lower than anticipated Medicaid claims paid vs. billed.

Total Expenses: As of January, overall YTD SB 40 Tax Program expenses were slightly lower than budgeted, and overall YTD Services Program expenses were slightly lower than budgeted. For the SB 40 Tax Program, Partnership for Hope and Special Additional Needs expenses were slightly higher than originally anticipated, and CCDDR Programs & Services expenses were higher than budgeted because offsets from restricted funds were not needed/recorded to cover expenses. For the Services Program, Presentations/Public Meetings expenses were higher due to preorders for the Community Transition Fair, Other General & Administrative expenses were higher because Evers CPA's final invoice for the 2023 audit was budgeted for December 2024 but not received and paid until January 2025, Insurance expenses were higher because the annual Assured Partners' broker fee was budgeted for December 2024 but was not received and paid until January 2025, and Utilities expenses were slightly higher than originally anticipated.

Balance Sheet as of January 31, 2025

	SB 40 Tax	Services
ASSETS		
Current Assets		
Bank Accounts		
1000 Bank Accounts		
1005 SB 40 Tax Bank Accounts		
1010 SB 40 Tax Account (County Tax Funds) - First Nat'l Bank	0	0
1015 SB 40 Tax Reserve Account (County Tax Funds) - Central Bank	0	
1020 SB 40 Tax Certificate of Deposit	0	
1025 SB 40 Tax - Bank of Sullivan	0	0
1030 SB 40 Tax Reserve - Bank of Sullivan	0	
1035 Heritage SB 40 Tax Account	2,272,711	
Total 1005 SB 40 Tax Bank Accounts	2,272,711	0
1050 Services Bank Accounts		
1055 Services Account - Oak Star Bank (Formerly 1st Nat'l Bank)	0	0
1060 Services Certificate of Deposit		0
1075 Services Account - Bank of Sullivan	0	0
1080 Heritage Services Account		24,663
Total 1050 Services Bank Accounts	0	24,663
Total 1000 Bank Accounts	2,272,711	24,663
Total Bank Accounts		
Accounts Receivable		
1200 Services		
1210 Medicaid Direct Service		98,669
1215 Non-Medicaid Direct Service		8,755
1220 Ancillary Services		9,944
1225 TCM Support		28,242
1230 Rent		0
Total 1200 Services	0	145,610
1300 Property Taxes		
1310 Property Tax Receivable	1,152,819	
1315 Allowance for Doubtful Accounts	(21,591)	
Total 1300 Property Taxes	1,131,228	0
Total Accounts Receivable	1,131,228	145,610
Other Current Assets		
1389 BANK ERROR Claim Confirmations (A/R)	0	0
1399 TCM Remittance Advices (In-Transit Payments)	0	0
1400 Other Current Assets		
1410 Other Deposits	0	
1430 Deferred Outflows Related to Pensions		163,716
1435 Net Pension Asset (Liability)		(82,705)
Total 1400 Other Current Assets	0	81,011
1450 Prepaid Expenses		
1455 Prepaid-Insurance	0	22,011
1470 Prepaid Transit Services	0	
Total 1450 Prepaid Expenses	0	22,011
Total Other Current Assets	0	103,022
Total Current Assets	3,403,938	273,295
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		(211,811)
1526 Accumulated Depreciation - Keystone		(46,120)
1530 100 Third Street Remodeling		165,351
1531 Keystone Remodeling	1,245	284,125
1532 Osage Beach Office Remodeling (Leased Space)		4,225
1535 Acc Dep - Remodeling - 100 Third Street		(103,812)
1536 Acc Dep - Remodeling - Keystone		(34,572)
1537 Acc Dep - Remodeling - Osage Beach Office		(4,219)
1540 Equipment		138,114
1545 Accumulated Depreciation - Equipment		(128,320)
1550 Vehicles		0
1555 Accumulated Depreciation - Vehicles		0
Total 1500 Fixed Assets	1,245	718,949
Total Fixed Assets	1,245	718,949
TOTAL ASSETS	3,405,183	992,244
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
1900 Accounts Payable	21,222	10,732
Total Accounts Payable	21,222	10,732
Other Current Liabilities		
2000 Current Liabilities		
2004 Medicaid Payable		0
2005 Accrued Accounts Payable	0	0
2006 DMH Payable	0	
2007 Non-Medicaid Payable	8,755	
2008 Ancillary Services Payable	9,944	
2009 TCM Support	28,242	
2010 Accrued Payroll Expense	0	0
2015 Accrued Compensated Absences	0	(2,157)
2025 Prepaid Services	0	
2030 Deposits	0	0
2050 Prepaid Tax Revenue	0	
2055 Deferred Inflows - Property Taxes	1,065,115	
2060 Payroll Tax Payable		0
2061 Federal W / H Tax Payable	0	(144)
2062 Social Security Tax Payable	0	301
2063 Medicare Tax Payable	0	55
2064 MO State W / H Tax Payable	0	(333)
2065 FFCRA Federal W/H Tax Credit		(3)
2066 FFCRA Health Insurance Credit		0
Total 2060 Payroll Tax Payable	0	(124)
2070 Payroll Clearing		
2071 Pre-tax W / H	0	469
2072 Post-tax W / H	0	334

2073 Vision Insurance W / H	0	434
2074 Health Insurance W / H	0	106
2075 Dental Insurance W / H	0	457
2076 Savings W / H		0
2078 Misc W / H		0
2079 Other W / H		0
Total 2070 Payroll Clearing	0	1,800
2090 Deferred Inflows		9,330
2091 Computer Lease Liability		9,801
2092 Current Portion of Lease Payable		0
2093 Less Current Portion of Lease Payable		0
Total 2000 Current Liabilities	1,112,056	18,650
Total Other Current Liabilities	1,112,056	18,650
Total Current Liabilities	1,133,278	29,383
Total Liabilities	1,133,278	29,383
Equity		
3000 Restricted SB 40 Tax Fund Balances		
3001 Operational	0	
3005 Operational Reserves	200,000	
3010 Transportation	0	
3015 New Programs	0	
3025 Housing	0	
3030 Special Needs	0	
3035 Childrens Programs	0	
3040 Sheltered Workshop	0	
3045 Traditional Medicaid Match	0	
3050 Partnership for Hope Match	0	
3055 Building/Remodeling/Expansion	715,265	
3065 Legal	0	
3070 TCM	0	
3075 Community Resource	0	
Total 3000 Restricted SB 40 Tax Fund Balances	915,265	0
3500 Restricted Services Fund Balances		
3501 Operational		(8,333)
3505 Operational Reserves		100,000
3510 Transportation		0
3515 New Programs		0
3530 Special Needs		0
3550 Partnership for Hope Match		0
3555 Building/Remodeling/Expansion		0
3560 Sponsorships		0
3565 Legal		0
3575 Community Resources		5,000
3599 Other		721,833
Total 3500 Restricted Services Fund Balances	0	818,500
3900 Unrestricted Fund Balances	348,975	12,268
3950 Prior Period Adjustment	0	0
3999 Clearing Account	81,411	130,172
Net Income	940,552	(12,376)
Total Equity	2,286,203	948,564
TOTAL LIABILITIES AND EQUITY	3,419,481	977,947

Statement of Cash Flows: January 2025

	SB 40 Tax	Services
OPERATING ACTIVITIES		
Net Income	940,552	(12,376)
Adjustments to reconcile Net Income to Net Cash provided by operations:		
1210 Services:Medicaid Direct Service		(46,915)
1215 Services:Non-Medicaid Direct Service		5,375
1220 Services:Ancillary Services		(300)
1225 Services:TCM Support		(28,242)
1230 Services:Rent		626
1455 Prepaid Expenses:Prepaid-Insurance		2,438
1525 Fixed Assets:Accumulated Depreciation - 100 Third Street		898
1526 Fixed Assets:Accumulated Depreciation - Keystone		366
1535 Fixed Assets:Acc Dep - Remodeling - 100 Third Street		723
1536 Fixed Assets:Acc Dep - Remodeling - Keystone		481
1545 Fixed Assets:Accumulated Depreciation - Equipment		251
1900 Accounts Payable	17,423	5,955
2007 Current Liabilities:Non-Medicaid Payable	(5,375)	
2008 Current Liabilities:Ancillary Services Payable	300	
2009 Current Liabilities:TCM Support	28,242	
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		87
2064 Current Liabilities:Payroll Tax Payable:MO State W / H Tax Payable		(257)
2071 Current Liabilities:Payroll Clearing:Pre-tax W / H		357
2072 Current Liabilities:Payroll Clearing:Post-tax W / H		77
2073 Current Liabilities:Payroll Clearing:Vision Insurance W / H		32
2075 Current Liabilities:Payroll Clearing:Dental Insurance W / H		234
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	40,590	(57,815)
Net cash provided by operating activities	981,142	(70,190)
INVESTING ACTIVITIES		
1531 Fixed Assets:Keystone Remodeling	(1,245)	(53,168)
Net cash provided by investing activities	(1,245)	(53,168)
FINANCING ACTIVITIES		
3055 Restricted SB 40 Tax Fund Balances:Building/Remodeling/Expansion	(53,168)	
3501 Restricted Services Fund Balances:Operational		(8,333)
3599 Restricted Services Fund Balances:Other		53,168
3900 Unrestricted Fund Balances	47,759	(53,684)
3999 Clearing Account	(47,759)	53,684
Net cash provided by financing activities	(53,168)	44,835
Net cash increase for period	926,729	(78,523)
Cash at beginning of period	1,345,982	103,186
Cash at end of period	2,272,711	24,663

Check Detail: SB 40 Tax Account - January 2025

Date	Transaction Type	Num	Name	Amount
01/13/2025	Bill Payment (Check)	1286	Camden County Senate Bill 40 Board	(23,774.00)
01/13/2025	Bill Payment (Check)	1287	I Wonder Y Preschool	(543.77)
01/13/2025	Bill Payment (Check)	1288	OATS, Inc.	(3,799.50)
01/13/2025	Bill Payment (Check)	1289	Skillset LLC	(953.53)
01/16/2025	Bill Payment (Check)	1290	Our Saviors Lighthouse Child & Family Development Center	(1,275.91)
01/24/2025	Bill Payment (Check)	1291	Professional Contractors & Engineers, Inc.	(53,167.50)

Check Detail: Services Account - January 2025

Date	Transaction Type	Num	Name	Amount
01/03/2025	Expense	01/03/2025	ADP TAX	(11,730.79)
01/03/2025	Expense	01/03/2025	Connie L Baker	(1,759.49)
01/03/2025	Expense	01/03/2025	Rachel K Baskerville	(1,636.12)
01/03/2025	Expense	01/03/2025	Heather Becker	(1,481.78)
01/03/2025	Expense	01/03/2025	Myrna Blaine	(1,515.15)
01/03/2025	Expense	01/03/2025	Jeanna K Booth	(1,981.20)
01/03/2025	Expense	01/03/2025	Emily J Breckenridge	(1,521.32)
01/03/2025	Expense	01/03/2025	Daniel Burrows	(1,585.79)
01/03/2025	Expense	01/03/2025	Lori Cornwell	(2,051.37)
01/03/2025	Expense	01/03/2025	Robyne Gerstner	(1,414.13)
01/03/2025	Expense	01/03/2025	Angela D Graves	(1,427.64)
01/03/2025	Expense	01/03/2025	Ryan Johnson	(2,004.21)
01/03/2025	Expense	01/03/2025	Jennifer Lyon	(1,935.16)
01/03/2025	Expense	01/03/2025	Jamie Merryman	(1,436.93)
01/03/2025	Expense	01/03/2025	Christina R. Mitchell	(1,526.26)
01/03/2025	Expense	01/03/2025	Mary P Petersen	(1,825.30)
01/03/2025	Expense	01/03/2025	Treslyn Pollreisiz	(1,321.76)
01/03/2025	Expense	01/03/2025	Patricia L. Strouse	(1,205.46)
01/03/2025	Expense	01/03/2025	Eddie L Thomas	(3,227.00)
01/03/2025	Expense	01/03/2025	Meri Viebrock	(1,461.20)
01/03/2025	Expense	01/03/2025	Nicole M Whittle	(2,046.21)
01/03/2025	Expense	01/03/2025	Elizabeth L Chambers	(1,303.25)
01/03/2025	Bill Payment (Check)	2589	All Seasons Services	(375.00)
01/03/2025	Bill Payment (Check)	2590	Angela D Graves	(197.01)
01/03/2025	Bill Payment (Check)	2591	Charter Communications	(289.94)
01/03/2025	Bill Payment (Check)	2592	Christina R. Mitchell	(126.80)
01/03/2025	Bill Payment (Check)	2593	Direct Service Works	(1,195.00)
01/03/2025	Bill Payment (Check)	2594	Eddie L Thomas	(50.00)
01/03/2025	Bill Payment (Check)	2595	Elizabeth L Chambers	(175.44)
01/03/2025	Bill Payment (Check)	2596	Emily J Breckenridge	(50.00)
01/03/2025	Bill Payment (Check)	2597	Happy Maids Cleaning Services LLC	(120.00)
01/03/2025	Bill Payment (Check)	2598	Heather Becker	(137.68)
01/03/2025	Bill Payment (Check)	2599	Jennifer Lyon	(50.00)
01/03/2025	Bill Payment (Check)	2600	Lake Media	(40.60)

01/03/2025	Bill Payment (Check)	2601	Lori Cornwell	(50.00)
01/03/2025	Bill Payment (Check)	2602	MACDDS	(6,086.00)
01/03/2025	Bill Payment (Check)	2603	Mary P Petersen	(50.00)
01/03/2025	Bill Payment (Check)	2604	Nicole M Whittle	(50.00)
01/03/2025	Bill Payment (Check)	2605	Rachel K Baskerville	(50.00)
01/03/2025	Bill Payment (Check)	2606	Ryan Johnson	(63.06)
01/03/2025	Bill Payment (Check)	2607	SUMNERONE	(4,306.90)
01/03/2025	Bill Payment (Check)	2608	Treslyn Pollreis	(150.10)
01/03/2025	Bill Payment (Check)	2609	VERIZON	(225.36)
01/11/2025	Bill Payment (Check)	2610	AT&T	(117.50)
01/11/2025	Bill Payment (Check)	2611	Camden County Fire & Safety	(54.00)
01/11/2025	Bill Payment (Check)	2612	Camden County PWSD #2	(41.28)
01/11/2025	Bill Payment (Check)	2613	Daniel Burrows	(123.79)
01/11/2025	Bill Payment (Check)	2614	HRdirect	(106.74)
01/11/2025	Bill Payment (Check)	2615	Jamie Merryman	(133.20)
01/11/2025	Bill Payment (Check)	2616	Jeanna K Booth	(54.86)
01/11/2025	Bill Payment (Check)	2617	LaClede Electric Cooperative	(486.41)
01/13/2025	Bill Payment (Check)	2618	City Of Camdenton	(200.55)
01/14/2025	Bill Payment (Check)	2619	City Of Camdenton	(25.00)
01/14/2025	Bill Payment (Check)	2620	CNA Surety	(359.00)
01/16/2025	Bill Payment (Check)	2621	All Seasons Services	(725.00)
01/16/2025	Bill Payment (Check)	2622	AssuredPartners of Missouri	(881.10)
01/16/2025	Bill Payment (Check)	2623	AT&T	(220.00)
01/16/2025	Bill Payment (Check)	2624	Bankcard Center	(1,238.96)
01/16/2025	Bill Payment (Check)	2625	FP Mailing Solutions	(102.00)
01/16/2025	Bill Payment (Check)	2626	Lake Area Industries	(50.00)
01/16/2025	Bill Payment (Check)	2627	Meri Viebrock	(274.90)
01/16/2025	Bill Payment (Check)	2628	MSW Interactive Designs LLC	(49.00)
01/16/2025	Bill Payment (Check)	2629	Patricia L. Strouse	(119.63)
01/16/2025	Bill Payment (Check)	2630	Pens.com	(285.40)
01/16/2025	Bill Payment (Check)	2631	Robyne Gerstner	(180.69)
01/17/2025	Expense	1/17/2025	Connie L Baker	(1,647.60)
01/17/2025	Expense	1/17/2025	Rachel K Baskerville	(1,636.13)
01/17/2025	Expense	1/17/2025	Heather Becker	(1,359.67)
01/17/2025	Expense	1/17/2025	Myrna Blaine	(1,565.00)
01/17/2025	Expense	1/17/2025	Jeanna K Booth	(1,978.07)
01/17/2025	Expense	1/17/2025	Emily J Breckenridge	(1,659.71)
01/17/2025	Expense	1/17/2025	Daniel Burrows	(1,458.60)
01/17/2025	Expense	1/17/2025	Elizabeth L Chambers	(1,303.24)
01/17/2025	Expense	1/17/2025	Lori Cornwell	(2,051.66)
01/17/2025	Expense	1/17/2025	Robyne Gerstner	(1,437.41)
01/17/2025	Expense	1/17/2025	Angela D Graves	(1,384.22)
01/17/2025	Expense	1/17/2025	Ryan Johnson	(2,004.21)
01/17/2025	Expense	1/17/2025	Jennifer Lyon	(1,935.17)
01/17/2025	Expense	1/17/2025	Jamie Merryman	(1,436.92)
01/17/2025	Expense	1/17/2025	Christina R. Mitchell	(1,530.50)
01/17/2025	Expense	1/17/2025	Mary P Petersen	(1,825.31)
01/17/2025	Expense	1/17/2025	Treslyn Pollreis	(1,238.77)

01/17/2025	Expense	1/17/2025	Patricia L. Strouse	(1,041.14)
01/17/2025	Expense	1/17/2025	Eddie L Thomas	(3,226.99)
01/17/2025	Expense	1/17/2025	Meri Viebrock	(1,461.21)
01/17/2025	Expense	1/17/2025	Nicole M Whittle	(2,102.05)
01/17/2025	Expense	01/17/2025	ADP TAX	(11,584.41)
01/24/2025	Bill Payment (Check)	2632	Office Business Equipment	(103.51)
01/24/2025	Bill Payment (Check)	2633	MSW Interactive Designs LLC	(49.00)
01/24/2025	Bill Payment (Check)	2634	MO Consolidated Health Care	(21,562.91)
01/24/2025	Bill Payment (Check)	2635	Happy Maids Cleaning Services LLC	(60.00)
01/24/2025	Bill Payment (Check)	2636	Globe Life Liberty National Division	(271.99)
01/24/2025	Bill Payment (Check)	2637	Delta Dental of Missouri	(639.93)
01/24/2025	Bill Payment (Check)	2638	Big Oak Storage LLC	(148.00)
01/26/2025	Expense	791783	Aflac	(856.73)
01/31/2025	Expense	1/31/2025	Connie L Baker	(1,647.60)
01/31/2025	Expense	1/31/2025	Rachel K Baskerville	(1,636.11)
01/31/2025	Expense	1/31/2025	Heather Becker	(1,481.78)
01/31/2025	Expense	1/31/2025	Myrna Blaine	(1,565.00)
01/31/2025	Expense	1/31/2025	Jeanna K Booth	(1,978.06)
01/31/2025	Expense	1/31/2025	Emily J Breckenridge	(1,659.72)
01/31/2025	Expense	1/31/2025	Daniel Burrows	(1,475.18)
01/31/2025	Expense	1/31/2025	Elizabeth L Chambers	(1,302.88)
01/31/2025	Expense	1/31/2025	Lori Cornwell	(2,051.67)
01/31/2025	Expense	1/31/2025	Robyne Gerstner	(1,395.17)
01/31/2025	Expense	1/31/2025	Angela D Graves	(1,373.96)
01/31/2025	Expense	1/31/2025	Ryan Johnson	(2,004.21)
01/31/2025	Expense	1/31/2025	Jennifer Lyon	(1,935.17)
01/31/2025	Expense	1/31/2025	Jamie Merryman	(1,436.94)
01/31/2025	Expense	1/31/2025	Christina R. Mitchell	(1,526.26)
01/31/2025	Expense	1/31/2025	Mary P Petersen	(1,825.30)
01/31/2025	Expense	1/31/2025	Treslyn Pollreis	(1,235.24)
01/31/2025	Expense	1/31/2025	Patricia L. Strouse	(1,248.60)
01/31/2025	Expense	1/31/2025	Eddie L Thomas	(3,227.00)
01/31/2025	Expense	1/31/2025	Meri Viebrock	(1,461.20)
01/31/2025	Expense	1/31/2025	Nicole M Whittle	(2,102.06)
01/31/2025	Expense	January 2025	Lagers	(10,102.41)
01/31/2025	Expense	01/31/2025	ADP TAX	(11,712.67)
01/31/2025	Check	SVCCHRG		(4.10)

January 2025
Credit Card Statement

CAMDEN COUNTY SENATE BILL 40 BOARD

SERVICES ACCOUNT

2666

02/07/2025

Bankcard Center

Date	Type	Reference	Original Amount	Balance Due	Payment
01/31/2025	Bill	01/31/2025 - SVCS	1,235.86	1,235.86	1,235.86
		Check Amount			1,235.86

Bank Accounts: Servi

1,235.86

WLONGM1 EDWARD J. RICE CO., INC. 417-869-3312

PRINTED IN U.S.A.

CAMDEN COUNTY SENATE BILL 40 BOARD

SB 40 TAX ACCOUNT

1298

02/07/2025

Bankcard Center

Date	Type	Reference	Original Amount	Balance Due	Payment
01/31/2025	Bill	01/31/2025 - SB40	280.00	280.00	280.00
		Check Amount			280.00

Bank Accounts: SB 40

280.00

WLONGM1 EDWARD J. RICE CO., INC. 417-869-3312

PRINTED IN U.S.A.

002oz 886016/4345913

POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION	AMOUNT	NOTATIONS
00/00	00/00		PURCHASES	1,643.82	-----
00/00	00/00		MISCELLANEOUS CREDITS	-127.96	-----
00/00	00/00		PAYMENTS	-1,238.96	-----
01/21	01/21	75397355021612500010978	LOCKBOX PMT-THANK YOU	-1,238.96	-----

FOR CUSTOMER SERVICE PLEASE CONTACT US AT 1-800-472-1959.

*****3515		CONNIE BAKER		AMOUNT	NOTATIONS
00/00	00/00		PURCHASES	626.12	-----
01/09	01/08	55432865008205070113175	AMZN Mktp US*ZP65I6IC1	Amzn.com/bill WA	✓61.98 5720
01/10	01/09	05416015009141000219947	WAL-MART #0089	CAMDENTON MO	✓33.18 5720
01/10	01/09	55432865009205327183079	Amazon.com*Z54C421E2	Amzn.com/bill WA	✓29.98 5720
01/10	01/09	55488725009036502242045	BOMGAARS 146	CAMDENTON MO	✓38.76 5720
01/10	01/09	87021305009000003010804	HEARO	SPRINGFIELD MO	✓280.00 7999
01/15	01/14	02305375015000546054237	USPS PO 2812420020	CAMDENTON MO	✓41.68 5725
01/28	01/27	55483825028006322053021	WAL-MART #0089	CAMDENTON MO	✓50.38 5020
01/29	01/29	55432865029201486573024	AMAZON MKTPL*ZC88I5CG1	Amzn.com/bill WA	✓90.16
*****1306		JEANNA BOOTH		AMOUNT	NOTATIONS
00/00	00/00		PURCHASES	199.86	-----
				327.82	-----



AVERAGE DAILY BALANCE	MONTHLY PERIODIC RATE	ANNUAL PERCENTAGE RATE	ANNUAL PERCENTAGE RATE	ACCOUNT SUMMARY
PURCHASES	0.00	1.3875%	16.65%	PREVIOUS BALANCE 1,238.96
			00.00%	PURCHASES 1,643.82
			NUMBER OF DAYS IN THE BILLING CYCLE	CASH ADVANCES 0.00
			31	CREDITS 01/31/2025 - SVCS \$1,235.86
			NEW CASH ADVANCES	PAYMENTS -1,238.96
			0.00	OTHER CHARGES 0.00
CASH ADVANCES	0.00	1.8042%	21.65%	FINANCE CHARGE \$280.00
			CASH ADVANCE FEE	NEW BALANCE = 1,515.86
			0.00	

CURRENT PAYMENT DUE: 45.47 + PAST DUE AMOUNT: 0.00 = TOTAL AMOUNT DUE: 45.47

DIRECT INQUIRIES TO: BANKCARD SERVICES P.O. BOX 8100
JEFFERSON CITY, MO 65102 1-800-472-1959

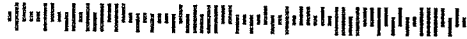
RECEIVED

FEB 07 2025



ACCOUNT NUMBER	BILLING DATE	STATEMENT BALANCE	DUE DATE	MINIMUM PAYMENT DUE
**** * 9588	01/31/2025	\$1,515.86	02/25/25	\$ 45.47
BR BRCB X003 YY * 016882				ENTER PAYMENT AMOUNT

00988


 BANKCARD SERVICES
 P.O. BOX 8100
 JEFFERSON CITY, MO 65102

CAMDEN CO DD RES
 CAMDEN CO DD RES
 PO BOX 722
 CAMDENTON, MO 65020 0722

000454701515860140580949462064

BR * BRCB Page 1 of 3

ACCOUNT NUMBER	COMPANY NUMBER	BILLING DATE	DUE DATE	CREDIT LIMIT	AVAILABLE CREDIT
**** * 9588		01/31/2025	02/25/25	10,000.00	8,484.14

POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION	AMOUNT	NOTATIONS
00/00	00/00		PURCHASES	1,643.82	-----
00/00	00/00		MISCELLANEOUS CREDITS	-127.96	-----
00/00	00/00		PAYMENTS	-1,238.96	-----
01/21	01/21	75397355021612500010978	LOCKBOX PMT-THANK YOU	-1,238.96	-----
FOR CUSTOMER SERVICE PLEASE CONTACT US AT 1-800-472-1959.					
*****	3515		CONNIE BAKER	626.12	
00/00	00/00		PURCHASES	626.12	-----
01/09	01/08	55432865008205070113175	AMZN Mktpl US*ZP65161C1	Amzn.com/bill WA ✓ 61.98	5720
01/10	01/09	05416015009141000219947	WAL-MART #0089	CAMDENTON MO ✓ 33.18	5720
01/10	01/09	55432865009205327183079	Amazon.com*Z54C421E2	Amzn.com/bill WA ✓ 29.98	5720
01/10	01/09	55488725009036502242045	BOMGAARS 146	CAMDENTON MO ✓ 38.76	5720
01/10	01/09	87021305009000003010804	HEARO	SPRINGFIELD MO ✓ 280.00	7999
01/15	01/14	02305375015000546054237	USPS PO 2812420020	CAMDENTON MO ✓ 41.68	5725
01/28	01/27	55483925028006322053021	WAL-MART #0089	CAMDENTON MO ✓ 50.38	5020
01/29	01/29	55432865029201486573024	AMAZON MKTPL*ZC8815CG1	Amzn.com/bill WA ✓ 90.16	-----
*****	1306		JEANNA BOOTH	199.86	
00/00	00/00		PURCHASES	327.82	-----



AVERAGE DAILY BALANCE	MONTHLY PERIODIC RATE	ANNUAL PERCENTAGE RATE	ANNUAL PERCENTAGE RATE	ACCOUNT SUMMARY
			00.00%	
PURCHASES	0.00	1.3875%	16.65%	PREVIOUS BALANCE 1,238.96
			NUMBER OF DAYS IN THE BILLING CYCLE	PURCHASES 1,643.82
			31	CASH ADVANCES 0.00
			NEW CASH ADVANCES	CREDITS 01/31/2025 - SVGF \$1,235.86
			0.00	PAYMENTS + 1,238.96
CASH ADVANCES	0.00	1.8042%	21.65%	OTHER CHARGES - 0.00
			CASH ADVANCE FEE	FINANCE CHARGE 01/31/2025 - SB40 \$280.00
			0.00	NEW BALANCE = 1,515.86

CURRENT PAYMENT DUE: 45.47	PAST DUE AMOUNT: 0.00	TOTAL AMOUNT DUE: 45.47
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DIRECT INQUIRIES TO: BANKCARD SERVICES P.O. BOX 8100
JEFFERSON CITY, MO 65102 1-800-472-1959

CAMDEN CO DD RES
 CAMDEN CO DD RES
 PO BOX 722

CAMDENTON, MO 65020



Central Bank

Strong roots. Endless possibilities.™

BR*BRCB Page 3

POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION	AMOUNT	NOTATIONS
01/07	01/06	82305095006000031751476	AMAZON MARK* ZD6VO47D2 SEATTLE WA	✓ 207.94	5660
01/15	01/15	82305095015000030670254	AMAZON MARK* ZG0N88E72 SEATTLE WA	✓ 119.88	5610
00/00	00/00		MISCELLANEOUS CREDITS	✓ -127.96	----
01/15	01/13	82305095014000047451145	AMAZON MARK* ZD6VO47D2 SEATTLE WA	-127.96	----
*****9314			EDDIE THOMAS	689.88	
00/00	00/00		PURCHASES	689.88	----
01/02	01/01	75418235001218252416851	PY *PATRIOT STORAGE L OSAGE BEACH MO	✓ 150.00	5580
01/02	01/01	75418235001218252444465	PY *SMART SPOT STORAG CAMDENTON MO	✓ 185.00	5580
01/06	01/04	55432865004203657165480	INTUIT *QBooks Online CL.INTUIT.COM CA	✓ 235.00	5567
01/21	01/18	55432865018208188222605	DROPBOX*WBLC1NDS4HRZ DROPBOX.COM CA	✓ 119.88	5567

00207 8860164345913 0001205 0007003 1-1000



BANKCARD SERVICES
P.O. BOX 8100
JEFFERSON CITY, MO 65102

10/13/22 12:13 PM 3 0001205 20250201 5800F101 DXCBRCB1 1 oz DOM 5800F10000* 166595 MS

000001205 I=1000



CAMDEN CO DD RES
PO BOX 722
CAMDENTON MO 65020-0722



002oz 886016/4345913 0001205 0006999 I=1000



CONNIE BAKER
CAMDEN CO DD RES
PO BOX 722

CAMDENTON, MO 65020



POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION			AMOUNT	NOTATIONS
------	------	------------------	----------------------	--	--	--------	-----------

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
0.00/ 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
1000YRRR 65804 831866561 Y MO hsfpa-5870379

01/10 01/09 05416015009141000219947 03423CWAL-MART #0089 CAMDENTON MO 33.18 5720
WAL-MART #0089

ORDER DATE FROM POST CD TO POST CD TO COUNTRY
00/00/00 65020

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
0.00/ 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
1000YNNN 65020 710415188 Y MO

01/10 01/09 5548872500903650224204505506CBOMGAARS 146 CAMDENTON MO 38.76 5720
BOMGAARS 146

ORDER DATE FROM POST CD TO POST CD TO COUNTRY
00/00/00 65020 USA

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
2.78/Y 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
1000YYYY 65020 420795588 Y MO 00046118

01/15 01/14 0230537501500054605423705573CUSPS PO 2812420020 USPS CAMDENTON MO 41.68 5725
PO 2812420020

ORDER DATE FROM POST CD TO POST CD TO COUNTRY
00/00/00 65020 USA

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
None 0.00/N 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
9000YNNN 65020 410760000 Y MO

ITEM

PRODUCT CODE	DESCRIPTION	QUANTITY	EXTENDED AMT/IND DISCOUNT AMT/IND	UNIT OF MEAS RATE/TYPE	UNIT PRICE/SHIP DATE	TOTAL AMOUNT
EXFLMailsRetailExpress Fit Env		1.0000	32.00 / D 0.00 / D	Default 0 / C	32.00 / 00/00/00	32.00
FCMLMailsRetailfirst-Class Letter		1.0000	9.68 / D 0.00 / D	Default 0 / C	9.68 / 00/00/00	9.68

01/28 01/27 5548382502800632205302106038CWAL-MART #0089 CAMDENTON MO 50.38 5020
WAL-MART #0089

ORDER DATE FROM POST CD TO POST CD TO COUNTRY
00/00/00 65020 USA

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
0.00/ 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
1000YYYY 65020 710415188 Y MO 71324519

01/29 01/29 5543286502920148657302408100CAMAZON Amzn.com/bill WA 90.16 5720
MKTPL*ZC88I5CG1 AMAZON
MKTPL*ZC88I5CG1

* * * * *
THE ABOVE LISTED TRANSACTIONS HAVE BEEN TRANSFERRED TO THIS ACCOUNT'S
ASSOCIATED CENTRAL BILL ACCOUNT. THE NET BALANCE WAS 626.12
* * * * *

FOR CUSTOMER SERVICE PLEASE CONTACT US AT 1-800-472-1959.

ORDER DATE FROM POST CD TO POST CD TO COUNTRY

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
112-6806499-71010 0.00/N 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
1000YNNN 98109 202936165 Y WA 1a3zOgRm3UcNZXW6c3On

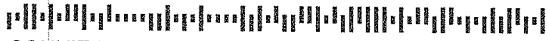
PRODUCT CODE	DESCRIPTION	QUANTITY	EXTENDED AMT/IND DISCOUNT AMT/IND	UNIT OF MEAS RATE/TYPE	UNIT PRICE/SHIP DATE	TOTAL AMOUNT
B013SX3T08	Tork Multifold Hand Towel, Natural,	1.0000	35.15 / D 0.00 / D	PIECE 0.00 / C	0.00 / 00/00/00	0
B0D63J8HK6	Mr. Pen- Correction Tape, 0.2" x 23	1.0000	6.84 / D 0.00 / D	PIECE 0.00 / C	0.00 / 00/00/00	0
B07VRYX57R	(24 Pack) Sticky Notes 3x3 in Post	1.0000	14.99 / D 0.00 / D	PIECE 0.00 / C	0.00 / 00/00/00	0
B013J42CCM	3 Pack of 2 Pentel Refill Erasers f	1.0000	6.88 / D 0.00 / D	PIECE 0.00 / C	0.00 / 00/00/00	0
B0047CT6SE	Pentel Clic Retractable Eraser with	1.0000	4.31 / D 0.00 / D	PIECE 0.00 / C	0.00 / 00/00/00	0

002oz 866016/4345913 0001245 0007237 I=0000

BANKCARD SERVICES
P.O. BOX 8100
JEFFERSON CITY, MO 65102

10/13/22 12:13 PM 3 0001245 20250201 5800F101 DXCBRCB1 1 oz DOM 5800F10000* 166595 MS

000001245 I=0000



CONNIE BAKER
CAMDEN CO DD RES
PO BOX 722
CAMDENTON MO 65020-0722



002oz 886016/4345913 0001245 0007233 I=0000



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FEB 07 2025



ACCOUNT NUMBER	BILLING DATE	STATEMENT BALANCE	DUE DATE	MINIMUM PAYMENT DUE
**** * 1306	01/31/2025	\$ 0.00	02/25/25	\$ 0.00
BR BRCB X003 YY * 015977				ENTER PAYMENT AMOUNT

00100



BANKCARD SERVICES
P.O. BOX 8100
JEFFERSON CITY, MO 65102

JEANNA BOOTH
CAMDEN CO DD RES
PO BOX 722
CAMDENTON, MO 65020 0000

0000000000000000968749949462064

BR * BRCB Page 1 of 2

ACCOUNT NUMBER	COMPANY NUMBER	BILLING DATE	DUE DATE	CREDIT LIMIT	AVAILABLE CREDIT
**** * 1306		01/31/2025	02/25/25	2,000.00	2,000.00

POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION	AMOUNT	NOTATIONS
------	------	------------------	----------------------	--------	-----------

01/07 01/06 8230509500600003175147603647CAMAZON MARK* SEATTLE WA ✓ 207.94 5610
 ZD6VO47D2 AMAZON MARK*
 ZD6VO47D2

ORDER DATE 00/00/00 FROM POST CD TO POST CD TO COUNTRY
 CUSTOMER CODE 111-1371237-59642 SALES TAX AMT/IND 0.00/ DUTY AMT 0.00 FREIGHT 0.00

MERCHANT
 TYPE 1000YRRR POSTAL CODE 98109 TAX ID 202936165 CD Y ST WA REFERENCE NUMBER 2PQ7jk9PDorSjaqTqH4X

01/15 01/15 8230509501500003067025402415CAMAZON MARK* SEATTLE WA ✓ 119.88 5610
 ZGON88E72 AMAZON MARK*
 ZGON88E72

ORDER DATE 00/00/00 FROM POST CD TO POST CD TO COUNTRY
 CUSTOMER CODE 111-6161215-83522 SALES TAX AMT/IND 0.00/ DUTY AMT 0.00 FREIGHT 0.00

MERCHANT
 TYPE 1000YRRR POSTAL CODE 98109 TAX ID 202936165 CD Y ST WA REFERENCE NUMBER 1DD7CHNn3RCwVxaG2Mez

01/15 01/13 82305095014000047451145 AMAZON MARK* ZD6VO47D2 SEATTLE WA ✓ -127.96
 AMAZON MARK* ZD6VO47D2

THE ABOVE LISTED TRANSACTIONS HAVE BEEN TRANSFERRED TO THIS ACCOUNT'S ASSOCIATED CENTRAL BILL ACCOUNT. THE NET BALANCE WAS 199.86

FOR CUSTOMER SERVICE PLEASE CONTACT US AT 1-800-472-1959.

AVERAGE DAILY BALANCE	MONTHLY PERIODIC RATE	ANNUAL PERCENTAGE RATE	ANNUAL PERCENTAGE RATE	ACCOUNT SUMMARY
0.00	1.3875%	16.65%	00.00%	PREVIOUS BALANCE 0.00
			NUMBER OF DAYS IN THE BILLING CYCLE	PURCHASES - 0.00
			31	CASH ADVANCES - 0.00
			NEW CASH ADVANCES	CREDITS + 0.00
			0.00	PAYMENTS + 0.00
			CASH ADVANCE FEE	OTHER CHARGES - 0.00
			0.00	FINANCE CHARGE + 0.00
				NEW BALANCE = 0.00

CURRENT PAYMENT DUE: 0.00	+ PAST DUE AMOUNT: 0.00	= TOTAL AMOUNT DUE: 0.00
---------------------------	-------------------------	--------------------------

DIRECT INQUIRIES TO: BANKCARD SERVICES P.O. BOX 8100
JEFFERSON CITY, MO 65102 1-800-472-1959

BANKCARD SERVICES
P.O. BOX 8100
JEFFERSON CITY, MO 65102

10/13/22 12:13 PM 3 0001226 20250201 5B00F101 DXCBRCB1 1 oz DOM 5B00F10000* 166595 MS

000001226 I=0000



JEANNA BOOTH
CAMDEN CO DD RES
PO BOX 722
CAMDENTON MO 65020-0722



002oz 886016/4345913 0001226 0007115 I=0000



EDDIE THOMAS
 CAMDEN CO DD RES
 PO BOX 722

CAMDENTON, MO 65020



POST	TRAN	REFERENCE NUMBER	MERCHANT DESCRIPTION			AMOUNT	NOTATIONS
------	------	------------------	----------------------	--	--	--------	-----------

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
 0.00/ 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
 1000YNNN 94043 770034661 Y CA T1-1616059b-0

01/21 01/18 5543286501820818822260508135CDROPBOX*WBLC1NDS4HRZ DROPBOX.COM CA ✓ 119.88

5567

DROPBOX*WBLC1NDS4HRZ

* * * * *
 THE ABOVE LISTED TRANSACTIONS HAVE BEEN TRANSFERRED TO THIS ACCOUNT'S
 ASSOCIATED CENTRAL BILL ACCOUNT. THE NET BALANCE WAS 689.88

* * * * *
 FOR CUSTOMER SERVICE PLEASE CONTACT US AT 1-800-472-1959.

ORDER DATE FROM POST CD TO POST CD TO COUNTRY

CUSTOMER CODE SALES TAX AMT/IND DUTY AMT FREIGHT
 595850643 0.00/N 0.00 0.00

MERCHANT

TYPE POSTAL CODE TAX ID CD ST REFERENCE NUMBER
 1000YNNN 94107 260138832 Y CA BXX66J2Y



002oz 886016/4345913 0001242 0007219 I=0000

BANKCARD SERVICES
P.O. BOX 8100
JEFFERSON CITY, MO 65102

10/13/22 12:13 PM 3 0001242 20250201 5B00F101 DXCBRCB1 1 oz DOM 5B00F10000* 166595 MS

000001242 I=0000



EDDIE THOMAS
CAMDEN CO DD RES
PO BOX 722
CAMDENTON MO 65020-0722



002oz 886016/4345913 0001242 0007215 I=0000



HEARO

Connie's Card

Invoice

Hearo Technologies

1548 E Primrose St
Springfield, MO 65804
United States

acct- 17999
-5B40

Bill to

Robyne Gerstner
Camden County Developmental
Disability Resources
100 3rd Street
Camdenton, MO 65020
United States

Invoice number INV-1025

Invoice date January 9, 2025

Due date January 9, 2025

Total \$280.00

PRODUCTS & SERVICES	QTY	UNIT PRICE	AMOUNT
Hearo Watch - Personal Emergency Response System (PERS) with single-button activation Fall detection - Programmable up to 8 custom numbers - Calls can be setup to go to family or Hearo Monitoring - SOS button connects via voice call - GPS and Geolocation - Large face with simple, easy to use interface	1	\$200.00	\$200.00
Hearo Watch Service Provides access to the Hearo platform for managing the watch configuration, events, notifications, user access, etc	2	\$40.00	\$80.00

Subtotal	\$280.00
Total	\$280.00

This is for [REDACTED] for 2 months of service and the watch.

All fees are listed in USD and are subject to sales tax (as applicable).

Connie's Card

Print this page for your records.

5720

Order Placed: January 7, 2025

Amazon.com order number: 112-3512064-3571459

Order Total: \$61.98

Not Yet Shipped

Items Ordered

2 of: *On-Site Laser Compatible Toner Alternative for HP CB435A, Works with: Laserjet P1002, P1003, P1004, P1005, P1006, P1009 - Jumbo Toner - 100% More Yield! (Black)*

Price
\$30.99

Sold by: On-Site Laser, LLC (seller profile)

Supplied by: Other

Business Price

Condition: New

Shipping Address:

Connie Baker
100 3RD ST
CAMDENTON, MO 65020-7336
United States

Shipping Speed:

Standard Shipping

Payment information

Payment Method:

Mastercard ending in 3515

Billing address

Connie Baker
100 3RD ST #
P O BOX 722
CAMDENTON, MO 65020-7336
United States

Item(s) Subtotal: \$61.98
Shipping & Handling: \$0.00

Total before tax: \$61.98
Estimated tax to be collected: \$0.00

Grand Total: **\$61.98**

To view the status of your order, return to Order Summary.

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Connie's Card

#5720

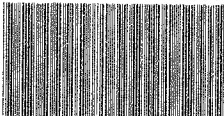
You could win a \$1000 GiftCard!
Visit survey.walmart.com#7VMZH0YY70
For more details, see back of receipt.



WM Supercenter
573-346-3588 Mgr. PAUL
94 CECIL ST
CAMDENTON MO 65020

ST# 00089 OP# 009027 TE# 27 TR# 02025

ITEMS SOLD 2
TC# 6176 9933 3991 6005 2373



GV COLB 100 194346203560 F 28.44 0
27.70Z GV 078742359240 F 4.74 0

Coffee

Hot Choc.

SUBTOTAL 33.18
TOTAL 33.18
MCARD TEND 33.18
CHANGE DUE 0.00

MASTERCARD- 3515 I 1 APPR#03423C
33.18 TOTAL PURCHASE

REF # 500970209401
AID A0000000041010
TERMINAL # 22850356

*No Signature Required
01/09/25 11:18:12



Get free delivery
from this store
with Walmart+

Scan for 30-day free trial.

Low prices You Can Trust. Every Day.
01/09/25 11:18:35

Connie Card

Print this page for your records.

5720

Order Placed: January 7, 2025

Amazon.com order number: 112-0507323-7304234

Order Total: \$29.98

Not Yet Shipped

Items Ordered

2 of: *Poo-Pourri Before-You-Go Toilet Spray, Royal Flush, 4 Fl Oz - Eucalyptus and Spearmint*

Price

\$14.99

Sold by: Amazon.com Services, Inc (seller profile)

Supplied by: Other

Business Price

Condition: New

Shipping Address:

Connie Baker
100 3RD ST #
P O BOX 722
CAMDENTON, MO 65020-7336
United States

Shipping Speed:

FREE Prime Delivery

Payment information

Payment Method:

Mastercard ending in 3515

Billing address

Connie Baker
100 3RD ST #
P O BOX 722
CAMDENTON, MO 65020-7336
United States

Item(s) Subtotal: \$29.98

Shipping & Handling: \$0.00

Total before tax: \$29.98

Estimated tax to be collected: \$0.00

Grand Total: **\$29.98**

To view the status of your order, return to Order Summary.

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Have an idea to help us improve? [Send feedback](#)

Connie's Card

#50720



1089 East Hwy 54
Camdenton, MO 65020
573-346-9721

HANNAH M
REGULAR SALE

INV NO 212169

ICE MELT 2@17.99 35.98 tx

024378501501

SUBTOTAL 35.98

7.725 % SALES TAX 7.725% 2.78

TOTAL 38.76

M/C xxxxxxxxxxxx3515 38.76

05506C

CTROUTD: 44826

Card entry mode: Chip Read

CVM: SIGNATURE

Mode: Online

AID: A0000000041010

Mastercard

ARC: 00

TVR: 0000008000

TSI: E800

IAD: 1010A040012200000000000000000000FF

Result: APPROVED

→ filled out
form for tax
exempt.

THANK YOU FOR SHOPPING BOMGAARS!
MONDAY-FRIDAY 7:30 AM - 8 PM
SATURDAY 7:30 AM - 8 PM
SUNDAY 9 AM - 6 PM
RETAIN RECEIPT FOR RETURN OR
EXCHANGE. COMPLETE POLICY POSTED
AT STORE.



001 4000 1000 1000

Connie's Card

#5725



CAMDENTON
625 W US HIGHWAY 54
CAMDENTON, MO 65020-9998
(800)275-8777

01/14/2025 04:29 PM

Product	Qty	Unit Price	Price
PM Express Flat Rate Env	1		\$32.00
Saint Louis, MO 63195			
Flat Rate Signature Waiver			
Scheduled Delivery Date			
Wed 01/15/2025 06:00 PM			
Money Back Guarantee			
Tracking #:			
EI605857057US			
Insurance			\$0.00
Up to \$100.00 included			
Total			\$32.00

CNA Surety Direct

First-Class Mail® Letter	1		\$0.73
Camdenton, MO 65020			
Weight: 0 lb 1.00 oz			
Estimated Delivery Date			
Thu 01/16/2025			
Certified Mail®			\$4.85
Tracking #:			
9589 0710 5270 2021 6457 24			
Return Receipt			\$4.10
Tracking #:			
9590 9402 7272 1284 6667 48			
Total			\$9.68

Grand Total: \$41.68

Credit Card Remit \$41.68

Card Name: MasterCard
Account #: XXXXXXXXXXXX3515
Approval #: 05573C
Transaction #: 649
AID: A0000000041010
AL: Mastercard
PIN: Not Required

Chip

Save this receipt as evidence of insurance. For information on filing an insurance claim go to <https://www.usps.com/help/claims.htm> or call 1-800-222-1811

9589 0710 5270 2021 6457 24

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

CAMDENTON, MO 65020

OFFICIAL USE

Certified Mail Fee	\$4.85
Extra Services & Fees (check box, add fee as appropriate)	
<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	\$0.73
Total Postage and Fees	\$7.68

Postmark Here: 14 2025

01/14/2025

45 Day sign mod

Connie's Card

www.surveymaster.com

Sweepstakes period ends on the date outlined in the

You could win a \$1000 GiftCard!
Visit survey.walmart.com#7VN1COYZK5
For more details, see back of receipt.



WM Supercenter
573-346-3588 Mgr. PAUL
94 CECIL ST
CAMDENTON MO 65020
ST# 00089 OP# 009025 TE# 25 TR# 03301

ITEMS SOLD 13
TC# 7128 8986 9685 2336 2999



#5720

CARD	605030546480	0.98 N
CARD	059584417320	0.98 N
CARD	605030546440	0.98 N
CARD	605030546470	0.98 N
CARD	059584417310	0.98 N
HAND SOAP	194346056190 H	2.97 N
HAND SOAP	194346056210 H	2.97 N
SPKL 6D PAS	030400222530	7.28 N
KLX US 4PK	036000543160	6.98 N
FACIALTISSUE	078742352790	6.73 N
SM MLK CHC	070920476970 F	7.83 O
GV 40PK	078742279090 F	5.36 N
GV 40PK	078742279090 F	5.36 N

SUBTOTAL	50.38
TOTAL	50.38
MCARD TEND	50.38
CHANGE DUE	0.00

MASTERCARD- 3515 I 1 APPR#06038C

50.38 TOTAL PURCHASE

REF # 502771324519

PAYMENT SERVICE - A

AID A0000000041010

TERMINAL # 22853647

*No Signature Required

01/27/25 11:21:49



Get free delivery
from this store
with Walmart+

Scan for 30-day free trial.

Low prices You Can Trust. Every Day.
01/27/25 11:22:10

Sweepstakes period ends on the date outlined in the
official rules. Survey must be taken within ONE week

Connie's Card
#5720



Details for Order #112-6806499-7101038

Order Placed: January 28, 2025
Amazon.com order number: 112-6806499-7101038
Order Total: \$90.16

Not Yet Shipped

Items Ordered

Price

1 of: <i>Mr. Pen- Correction Tape, 0.2" x 236", 12pcs, Pastel Colors, White Out Tape Correction Tape, White Out Correction Tape, Whiteout Tape, Whiteout Correction Tape, White Out Strips, Cute Correction Tape</i> Sold by: Mr. Pen (seller profile) Business Price Condition: New	\$6.84
1 of: <i>3 Pack of 2 Pentel Refill Erasers for Clic Eraser, Contains 6 Erasers (ZER-2)</i> Sold by: Product Movement (seller profile) Business Price Condition: New	\$6.88
1 of: <i>Pentel Clic Retractable Eraser with Grip, 3 Pack</i> Sold by: Amazon (seller profile) Condition: New	\$4.31
1 of: <i>(24 Pack) Sticky Notes 3x3 in Post Bright Stickies Colorful Super Sticking Power Memo Pads, Strong Adhesive, 74 Sheets/pad</i> Sold by: Vanpad (seller profile) Condition: New	\$14.99
1 of: <i>Tork Multifold Hand Towel, Natural, 100% recycled, FSC certified, Compatible with H2 Dispensers, 16 packs x 250 sheets (MK520A)</i> Sold by: Amazon (seller profile) Condition: New	\$35.15
1 of: <i>Wireless Keyboard and Mouse Combo, EarlyLit 2.4G Full-Sized Ergonomic Keyboard Mouse, Cordless USB Mouse and Keyboard, 12 Shortcut Keys and Quiet Click for Computer/Laptop/Windows/Mac</i> Sold by: EarlyLit (seller profile) Condition: New	\$21.99

Shipping Address:

Connie Baker
100 3RD ST #
P O BOX 722
CAMDENTON, MO 65020-7336
United States

Shipping Speed:

FREE Prime Delivery

Payment information

Payment Method:

MasterCard | Last digits: 3515

Item(s) Subtotal: \$90.16
Shipping & Handling: \$0.00

Billing address

Connie Baker
100 3RD ST #
P O BOX 722
CAMDENTON, MO 65020-7336
United States

Total before tax: \$90.16

Estimated Tax: \$0.00

Grand Total: **\$90.16**

To view the status of your order, return to [Order Summary](#).

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Jeanna's card

Your refund for Shappy 72 Pcs Inspirational...

From return@amazon.com <return@amazon.com>

Date Tue 1/14/2025 4:47 PM

To Jeanna Booth <jeanna@ccddr.org>

Amazon return

Hello Jeanna,

We've issued a refund for the item(s) below. This is an advanced refund issued prior to our receipt and verification of the item(s). Upon verification, we may charge your card partially/fully for the refunded amount*.

[View return & refund status](#)

Return summary

Order #111-1371237-5964263

Refund subtotal

\$127.96

Total refund

-\$127.96^

Acct 5610

Refund will appear on your Master Card in 3-5 business days.

*Based on our verification of the item, if the item is not the item for which you had requested a return, is not in the same quantity, or not in new/unused condition, we will charge your original payment method or another valid payment method in your account.

^Learn more about [refunds](#)

Item to be returned: 1

Shappy 72 Pcs Inspirational Stress...

Quantity: 4

Products related to your return



Final Details for Order #111-1371237-5964263

#5610

Order Placed: January 3, 2025
Amazon.com order number: 111-1371237-5964263
Order Total: \$207.94

Shipped on January 6, 2025

Items Ordered

	Price
4 of: Shappy 72 Pcs Inspirational Stress Relief Balls Motivational Stress Ball Encouraging PU Bulk Stress Ball for Adults Small Therapy Stress Relief Toys for Valentines Gifts Fidget Anxiety Anger (Blue) Sold by: Hayend (seller profile) Condition: New	\$31.99
2 of: Thenshop 150 Pack Mini Notebooks Bulk Small Notepad Unlined Journals Pocket Blank Sketchbooks Kids Students Gifts Back t o School Supplies 4 x 4 Inch 24 Sheets(Bright Color) Sold by: StarSuoee (seller profile) Condition: New	\$39.99

Shipping Address:

Jeanna Booth
PO BOX 722
CAMDENTON, MO 65020-0722
United States

Item(s) Subtotal:	\$207.94
Shipping & Handling:	\$0.00

Total before tax:	\$207.94
Sales Tax:	\$0.00

Shipping Speed:

FREE Prime Delivery

Total for This Shipment: \$207.94

Payment information

Payment Method:

MasterCard | Last digits: 1306

Item(s) Subtotal:	\$207.94
Shipping & Handling:	\$0.00

Billing address

Jeanna Booth
PO BOX 722
CAMDENTON, MO 65020-0722
United States

Total before tax:	\$207.94
Estimated Tax:	\$0.00

Grand Total: \$207.94

Credit Card transactions

MasterCard ending in 1306: January 6, 2025: \$207.94

To view the status of your order, return to [Order Summary](#) .



Final Details for Order #111-6161215-8352234

#5610

Order Placed: January 13, 2025
Amazon.com order number: 111-6161215-8352234
Order Total: \$119.88

Shipped on January 15, 2025

Items Ordered

12 of: 24 Pack 24 Blocks Fidget Snake Cube, Mini Snake Ruler Twist Puzzle Toys for Kids Party Bag Fillers, Party Favors Supplies, Fidget Sensory Toys, Random Color	Price \$9.99
Sold by: Xieneng (seller profile)	
Condition: New	

Shipping Address:

Jeanna Booth
PO BOX 722
CAMDENTON, MO 65020-0722
United States

Item(s) Subtotal:	\$119.88
Shipping & Handling:	\$0.00

Total before tax:	\$119.88
Sales Tax:	\$0.00

Shipping Speed:

FREE Prime Delivery

Total for This Shipment: \$119.88

Payment information

Payment Method:

MasterCard | Last digits: 1306

Item(s) Subtotal:	\$119.88
Shipping & Handling:	\$0.00

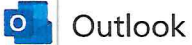
Billing address

Jeanna Booth
PO BOX 722
CAMDENTON, MO 65020-0722
United States

Total before tax:	\$119.88
Estimated Tax:	\$0.00

Grand Total: \$119.88

To view the status of your order, return to [Order Summary](#) .



Your refund for Shappy 72 Pcs Inspirational...

From return@amazon.com <return@amazon.com>

Date Tue 1/14/2025 4:47 PM

To Jeanna Booth <jeanna@cddr.org>

Hello Jeanna,

We've issued a refund for the item(s) below. This is an advanced refund issued prior to our receipt and verification of the item(s). Upon verification, we may charge your card partially/fully for the refunded amount*.

[View return & refund status](#)

Return summary

Order #111-1371237-5964263

Refund subtotal

\$127.96

Total refund

\$127.96^

Refund will appear on your Master Card in 3-5 business days.

*Based on our verification of the item, if the item is not the item for which you had requested a return, is not in the same quantity, or not in new/unused condition, we will charge your original payment method or another valid payment method in your account.

^Learn more about [refunds](#)

Item to be returned: 1

Shappy 72 Pcs Inspirational Stress...

Quantity: 4

Products related to your return

Payment Receipt

Patriot Storage LOZ
6760 US Hwy 54
Osage Beach, MO 65065
(573) 746-2552
<https://www.patriotstorageloz.com>

#5580

1/1/2025 12:58AM

Camden County Developmental Disability Resources
PO Box 722
Camdenton, Missouri 65020

Name	Item	Description	Quantity	Unit Price	Tax	Total	Paid
Rent	103001374	Unit A23 rent for 1 month period starting 1/1/2025	1	\$150.00	\$0.00	\$150.00	\$150.00

Paid by Master ending in 9314

\$150.00

Payment Receipt

Camdenton
4595 Osage Beach
Osage Beach, MO 65065
(573) 552-1125
<https://smartspotstorage3.storageunitsoftware.com>

Camden County Developmental Disability Resources
PO Box 722
Camdenton, Missouri 65026

1/1/2025 02:38AM

#5580

Name	Item	Description	Quantity	Unit Price	Tax	Total	Paid
Rent	103203295	Unit A23 rent for 1 month period starting 1/1/2025	1	\$185.00	\$0.00	\$185.00	\$185.00

Paid by Master ending in 9314

\$185.00



#550

Invoice

Intuit Inc.
2800 E. Commerce Center Place
Tucson, AZ 85706

Invoice number: 10001362474661
Total: \$235.00
Date: Jan 4, 2025
Payment method: MASTER ending 9314
Payment authorization code: 05601C

Bill to

Edmond J Thomas
Camden County Developmental Disability Resources
PO Box 722
Camdenton, MO 65020-0722
US
Address may be standardized for tax purposes
Company ID: 464240995

Payment details

Item	Qty	Unit price	Amount
QuickBooks Online Advanced	1	\$235.00	\$235.00
Sales tax - Exempt:			\$0.00

Total invoice:

\$235.00

Tax reporting information

Period for monthly fees:	Jan 4, 2025 - Feb 4, 2025
Total without tax:	\$235.00
Total tax:	\$0.00

(1) For subscriptions, your payment method on file will be automatically charged monthly/annually at the then-current list price until you cancel. If you have a discount it will apply to the then-current list price until it expires or is canceled. To cancel your subscription at any time, go to the Subscriptions and billing page and cancel the subscription. If your subscription is managed by an account manager, contact your account manager for changes to your subscription. (2) For one-time services, your payment method on file will reflect the charge in the amount referenced in this invoice. Terms, conditions, pricing, features, service, and support options are subject to change without notice.

All dates and times are Pacific Standard Time (PST).



Dropbox Inc.
1800 Owens Street
San Francisco, CA 94158
United States
billing-support@dropbox.com

Invoice for director@ccddr.org

TO	DATE	INVOICE ID
Ed Thomas director@ccddr.org 65020 United States	January 18, 2025 4:30 PM GMT	WBLC1NDS4HRZ

Acct 5567

PRODUCT	AMOUNT
Dropbox Plus (1/18/2025 to 1/18/2026)	\$119.88
Total	\$119.88

All amounts shown are in USD.

Dropbox Inc.
1800 Owens St
San Francisco, CA 94158
United States
billing-support@dropbox.com

Receipt for director@ccddr.org

Payment	Date	Amount	Receipt ID
MasterCard ending in 9314 approved	1/18/2025	\$119.88	Q8RM2C8554ZL

Description	Amount
Dropbox Plus (1/18/2025 to 1/18/2026)	\$119.88
Total	\$119.88

All amounts shown are in USD. This is not an invoice. No additional payment is required.

**Resolutions 2025-12,
2025-13, 2025-14,
2025-15, 2025-16,
2025-17, 2025-18,
2025-19, 2025-20,
& 2025-21**



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-12

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, and job descriptions and creates new Bylaws, policies, 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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-12



Policy Number:
1
Effective Date: 5/1/2008
Revised: 4/20/09, 9/27/2017,
12/12/2020, 3/11/2025

Subject: Person-Centered Planning

PURPOSE:

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

POLICY:

It is CCDDR’s policy to develop an Individual Support Plan for each client who receives Support Coordination services from CCDDR. Planning is a client/family-directed and person-centered 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 Department of Mental Health (DMH) billing system, including all Medicaid waiver plans, shall comply with Division of Developmental Disabilities (DDD) Service Monitoring guidelines.

DEFINITIONS:

DDD Individual Support Plan Guidelines: The DDD Individual Support Plan Guidelines describes requirements of Individual Support Plans, as well as information for maintaining and updating Individual Support Plans.

Missouri Quality Outcomes: Positive outcomes are developed to emphasize the quality of life for individuals receiving services through The DDD *Missouri Quality Outcomes: A Guide for Individuals and Families*. The *Guide* document serves as a tool designed to assist the user in discussions around important life areas and interests of the individual being supported that define quality of life. The Missouri Quality Outcomes can be found at <https://dmh.mo.gov/media/pdf/missouri-quality-outcomes-guide-individuals-and-families>.

Individual Support Plan: A document resulting from a process directed by the client 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 client who are able to serve as contributors to the process. The person-centered planning process enables and assists the client to access a personalized mix of paid and unpaid services and supports that will assist them in achieving 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 fundamental values that form the foundation of the Outcomes, and these should be considered throughout the planning process.

II. Support Planning Process

A. Individual Support Plans:

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 of the individual being found eligible for services through the DDD. The plan must contain a description of immediate needs, especially needs relating to issues of health and safety. The plan must include information clearly identifiable to staff and others how to support the client and to ensure a client's immediate needs are met, especially needs relating to health and safety. The Support Coordinator ensures each item in the plan has enough detail and/or examples where someone new in the client's life can quickly understand what is meant and how to support the client.

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 DDD's approved format. Accordingly, all Individual Support Plans developed by CCDDR Support Coordinators shall define desirable changes in the client's life and create personal outcomes and goals in six life areas as discussed by the client's support team. The six life areas are as follows:

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

III. Updating Plans

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

- The client or the client's guardian requests that information be changed or added

- Others invited by the client to participate in the client's planning process provide additional information
- The need for supports and services change, i.e. the client's level of functioning may change requiring either a reduction or increase in services; the client'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
- Contact information has changed

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

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

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

The 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 including waived services, the CCDDR Support Coordinator shall consider what supports are needed in the areas covered by the Level of Care information from the most Missouri Adaptive Ability Scale Assessment (MAAS). The MAAS will identify adaptive functioning skills in life areas where a client might require support. These areas will be addressed in the client's 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. The Health Risk Screening Tool (HRST) must be completed for all clients receiving Waiver residential support services (i.e. Individualized Supported Living, Group Home, Companion Home, and Host Home services). A HRST must also be completed for all other clients receiving Waiver services unless a client/guardian opts out of the HRST. Quarterly Reviews shall be completed for all clients, and Monthly Reviews shall be completed for clients receiving Waiver residential support services. The Quarterly/Monthly Reviews 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 DDD and/or CCDDR must be documented in a client's annual Individual Support Plan or amended Individual Support Plan before the services are authorized, delivered, and/or purchased.

VIII. Quality Assurance

The DDD's Targeted Case Management Technical Assistance Coordinator or other designee will evaluate a sample of plans from CCDDR on a quarterly and annual basis to ensure that the mandatory components of the Missouri Individual Support Plan Guidelines are implemented.

REFERENCES:

- CARF Standards Manual
- [Missouri Individual Support Plan Guidelines](#)
- [Developmental Disabilities Waiver Program Manual](#)
- [RSMo 633.110](#)
- [Missouri Quality Outcomes: A Guide for Individuals and Families](#)
- [9 CSR 45-3.010](#)
- [RSMo 630.655](#)
- [DDD Directive 3.020](#)
- [DDD Directive 4.060](#)



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-13

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, and job descriptions and creates new Bylaws, policies, 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/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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-13



Policy Number: 2 Effective: May 1, 2008 Revised: October 16, 2017; April 9, 2020; March 11, 2025
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:

Upon intake of new, reactivated, or transferred clients receiving Support Coordination services, CCDDR shall provide materials at the time of the initial plan meeting. Those materials include, but are not limited to:

- 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
 - Information about abuse, neglect, and exploitation
 - 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 Information Form (if client plans to participate in CCDDR-sponsored programs/activities in coming year)
- H. Disaster Preparedness Brochure
- I. CCDDR Brochure
- J. CCDDR Media Release Permission Form
- K. Abuse and Neglect Pamphlet/Signature Page

- L. Department of Social Services Authorized Representative form (if client desires support in communication with the Department of Social Services to ensure Medicaid eligibility)

REFERENCES:

- CARF Standards Manual



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-14

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, and job descriptions and creates new Bylaws, policies, 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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-14



Policy Number: 8
Effective: May 1, 2008
Revised: April 19, 2010;
October 16, 2017; April 9, 2020;
March 11, 2025

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:

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.

CCDDR protects the rights of clients served in accordance with the State of Missouri Statutes (RSMo 630.110 and 630.115) and Division of Developmental Disabilities (DDD) Rules and Regulations, specifically the DDD Due Process Referral Form User Guide and the DDD publication, "Individual Rights of Persons Receiving Services from the Division of Developmental Disabilities."

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.

Prior to the beginning of service delivery and/or at the initiation of service delivery at the initial Person-Centered Plan meeting and annually thereafter, each client served by CCDDR and/or their legal representative is provided with a copy of CCDDR's Client Rights Statement, 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 (i.e., an audio media for visually impaired, the translation of documents as needed, etc.). This explanation of rights and procedures is documented in the client's record by obtaining the signature page for 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, which further explains their rights and the grievance/complaint processes.

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 the 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 DDD's designated Due Process Review Committee (DPRC).

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 client, their guardian (if applicable), and any other appropriate members of the planning team to meet to determine if a rights restriction is warranted in lieu of or in conjunction with positive behavioral supports.
2. The Support Coordinator will utilize the information from the team discussion to complete the DPRC Referral Form (<https://dddprc.dmh.mo.gov/Referral>)
3. The client and/or the client's guardian, if applicable, 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.
4. Signed documentation is available to reflect the client and/or client's guardian was involved with the decision to limit rights.
5. The Support Coordinator shall make every effort to make sure the client is aware of the proposed limitation of the client's rights. The Support Coordinator shall use communicational aides to ensure the client can comprehend, to the best of the client's abilities, the proposed limitation of the client's rights. The number for the Department of Mental Health (DMH) Constituent Services shall be provided to the client as part of the process.
6. Upon review of the referral form, the DPRC Coordinator will determine if the referral is complete and will request additional information if necessary.
7. If the referral is complete, a DPRC chairperson will be assigned and will hold a meeting to review the Due Process within 30 calendar days from the date of receipt of all required information.
8. The client, client's guardian (if applicable), Support Coordinator, and waiver providers will be notified of the meeting to discuss the proposed limitation of rights. The findings from the committee meeting will be returned to the DPRC Coordinator within 3 business days. The DRPC Coordinator will then submit the findings to the client, client's guardian (if applicable), service providers, Support Coordinators, and any other relevant team members within 5 business days of receiving the committee findings.
9. In the event the client, client's guardian (if applicable), and/or client's advocate (if applicable) 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 client, client's guardian (if applicable), and/or client's advocate (if applicable) with any questions pertaining to the appeal and inform them as to when and where their appeal will be reviewed.
10. If applicable, the client's guardian must provide consent of the rights limitation by signature on the appropriate document(s).
11. The length of time on limiting the rights of any client shall be reviewed by the DPRC and communicated to the CCDDR Support Coordinator when a review is needed.
12. Rights restrictions are to be reviewed periodically, but no less than annually, by the Support Coordination team and the DRPC.
13. DMH may contract with a third-party agency for the annual Due Process review as part of the Quality Assurance process.

If a client has an emergency restriction that needs to be in place to protect and/or keep the client or others safe, a service provider may implement an intervention in order to keep the client and/or others safe. The service provider will then notify the guardian (if applicable) and Support Coordinator. The Support Coordinator will then make the referral into the referral system. Clients who are recipients of Forensic Case Monitoring services with court-ordered restrictions, youth in child-specific agreements funded through Children's Division, or individuals with restrictions imposed in the family home by natural support are exempt from the DPRC. 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 and outcomes needed to remove the restriction as well as the phone number of the outside advocate for DMH.

REFERENCES:

- Section 630.110 and 630.115 RSMo
- CARF Standards Manual
- DDD Publication: "Individual Rights of Persons Receiving Services From the Division of Developmental Disabilities"
- 9 CSR 45-3.030
- [DDD Due Process Referral Form User Guide](#)



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-15

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, and job descriptions and creates new Bylaws, policies, 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/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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-15



Policy Number: 9
Effective: 5/1/2008
Revised: 4/19/2010; 10/16/2017;
12/10/2020; 3/11/2025

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 DMH Department Operating Regulation (DOR) 2.210; it shall be the policy of CCDDR 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 DMH.

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 DMH 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 Developmental Disabilities (DDD) 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 submitted 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 Executive Director or DDD 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 practicable
- 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 whether 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 DMH 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 people who have 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 DDD, who is the determiner for disposition of the complaint.

The DDD reviews the investigative report and recommendations then determines if sufficient information is present within the investigative report to make a preliminary finding. If the DDD determines that additional information is needed prior to making a finding, the DDD completes the Determiner Response form to seek additional information. If the information is sufficient, the DDD 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 DDD or providing additional information in writing to the DDD for review and further consideration. The DDD 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 DDD, that person may appeal the decision to the Director of the DMH. 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](#)
- [DOR 4.270](#)
- [Division Guideline 75](#)
- [Division Directive 4.070](#)
- [9 CSR 10-5.200](#)
- [RSMo 36.390](#)
- [RSMo 630.167](#)
- [RSMo 630.168](#)
- [RSMo 630.170](#)
- CARF Standards Manual



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-16

APPROVAL OF AMENDED POLICY #13

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, and job descriptions and creates new Bylaws, policies, 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 #13, Consent for Services.
- 2.** That the Board hereby amends and adopts Policy #13 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-16



Policy Number: 13 Effective: May 1, 2008 Revised: March 11, 2025
Subject: Consent for Services

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy for obtaining written consent from the client and/or the client’s guardian/legal representative prior to authorizing and/or providing supports or services that have been identified through the Person-Centered Planning process, as well as obtaining consent from the client served and/or the client’s guardian/legal representative for CCDDR Support Coordination services.

POLICY:

Consent for Services Identified in the Individual Support Plan

Through the Person-Centered Planning process, Interdisciplinary Team members shall make a determination as to the services required, both paid and generic, in order for the client to meet the outcomes and action steps identified in the client’s Individual Support Plan (ISP). The client and/or the client’s guardian/legal representative shall be provided with a clear, concise explanation of proposed services, supports, and activities to meet the client’s needs and preferences, if such services are readily available or subject to a waiting list, and the potential benefits (or risks, if any) of proposed services and supports have been identified in the ISP. The ISP shall reflect the client’s desires in life, preferences, and needs, with the client’s input being the primary importance in developing the ISP.

Annually and as needed, the Support Coordinator will review the needs of the client, determining if paid supports are necessary and feasibly able to be acquired. They will obtain accurate information on rates and units from chosen providers, creating a budget and accurate Budget Authorization sheet.

The client and/or the client’s guardian/legal representative shall then authorize any and all services identified in the client’s ISP by signing all components of the ISP, including the completed Budget Authorization sheet. By signing, the client and/or the client’s guardian/legal representative are also indicating their agreement with the content of the ISP. If the plan requires approval at the state level, the client and/or the client’s guardian/legal representative will be kept up to date on the status of the approval. The budget will be adjusted accordingly if the Division of Developmental Disabilities (DDD) Utilization Review Committee requests any portion(s) of the ISP be modified, with a new Budget Authorization sheet and ISP modification being created and signed.

The client and/or the client's guardian/legal representative shall have a copy of the current ISP and budget authorizing services identified.

Significant changes to the client's ISP (adding or changing outcomes/action steps; adding, changing, or terminating services; etc.) require prior written authorization from the client and/or the client's guardian/legal representative. Informational changes only to an ISP (correcting a typo in the ISP, correcting a name in the ISP, etc.) do not require written consent of the client and/or the client's guardian/legal representative.

All clients who have been enrolled in the Missouri Home & Community Based Waiver program shall be provided the opportunity to choose their provider(s) of service(s) within this program and shall annually state their desire to continue as participants in this program.

No limitation of a client's rights or other adverse action shall be made without the client's and/or client's guardian's/legal representative's signed consent.

All proposed Behavioral Support Plans and accompanying due process must be incorporated into the current ISP, be approved by the DDD Due Process Review Committee, and have consent by the client and/or client's guardian/legal representative.

No services identified in the ISP that will be paid by the DDD and/or CCDDR shall be delivered or paid unless authorized prior to implementation.

All ISPs must be signed and dated by the client or the client's guardian/legal representative prior to the ISP implementation date.

Consent to have CCDDR Provide Support Coordination Services

Clients and/or their guardians/legal representatives shall provide consent to have CCDDR provide Support Coordination services for the client by signing a Support Coordination Acknowledgement attached to the Client Rights Acknowledgement form on an annual basis. This form acknowledges that the client and/or the client's guardian/legal representative have authorized CCDDR to provide Support Coordination services on the client's behalf.

REFERENCES:

- CARF Standards Manual
- RSMo 633.110
- Developmental Disabilities Waiver Manual
- DDD Support Coordination Manual
- Targeted Case Management for Individuals with Developmental Disabilities Manual



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-17

APPROVAL OF AMENDED POLICY #22

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, and job descriptions and creates new Bylaws, policies, 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 #22, Event Reporting.
2. That the Board hereby amends and adopts Policy #22 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-17



Policy Number:

22

Effective: May 1, 2008

Revised: March 11, 2025

Subject: Event Reporting

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy for Event Reporting of all incidents of injury, alleged/suspected abuse, neglect, misuse of funds/property, death, medication errors, elopement, or other unusual events per the Division of Developmental Disabilities (DDD) Directive 4.070; Department of Mental (DMH) Department Operating Regulation (DOR), 2.210; 9 CSR 10.5-200; and 9 CSR 10-5.206.

POLICY:

Event Reports

Upon notification/receipt of any event report, CCDDR Support Coordination staff shall take the appropriate actions to:

- Review event reports to ensure that community providers have taken all reasonable measures necessary to protect the health and safety of the clients
- Review event reports to ensure accuracy, timeliness, completeness, and conformity with reporting regulations (DMH DOR 2.210, DDD Directive 4.070, 9 CSR 10-5.200, and 9 CSR 10-5.206)
- If CCDDR staff identify incidents of abuse, neglect, and/or misuse of funds/property during the review, they shall report the incident according to 9 CSR 10-5.200
- Determine the efficacy of corrective action plans and whether any additional actions must be taken
- Notify the Executive Director, Targeted Case Management Supervisor, or other authorized CCDDR designee

Events which meet the DDD Required Event Report Criteria of the following nature must be entered into the DMH/DDD EMT system:

- Alleged or suspected client abuse, neglect, and/or misuse of funds/property
- Client death
- Client emergency room visits
- Client non-scheduled hospitalizations
- Medication errors which reach a client
- Client incidents
- Falls or suspected falls
- Uses of emergency procedures with a client
 - ✓ Chemical restraint
 - ✓ Manual restraint

- ✓ Mechanical restraint
- ✓ Time-out
- Client events where there is law enforcement involvement
- Client elopement
- Events of fire, theft, or natural disaster resulting in disruption of service(s) to the client(s)
- Events of sexual misconduct involving a client, and it is alleged, suspected, or reported that one of the parties is not a consenting adult
- Events involving a client when there is a realistic threat or physical action of serious self-harm or assault of others
- Events when the client ingests a nonfood item
- Events which result in a need for a client to receive lifesaving intervention or medical/psychiatric emergency intervention

The timelines for Event Reporting are:

- Immediate notification – death, abuse/neglect, critical
 - ✓ During DMH business hours – immediate entry into the EMT system can meet the immediate notification requirement – enter the event the same date the event occurred or was discovered
 - ✓ After DMH business hours – make a verbal report to the Rolla Satellite Regional Office on call system – in the Notification Section of the EMT system, enter the date/time of the verbal report to document DMH immediate notification, then enter the event into the EMT system by the end of the next business day from the date the event occurred or was discovered
- Next Business Day Notification – all other events not death, abuse/neglect, critical
 - ✓ Must be entered into the EMT system by the end of the next business day from the date the event occurred or was discovered
 - ✓ If this entry is your “Next Business Day Notification” and there was no need to verbally notify the Rolla Satellite Regional Office staff, you will enter Regional Office as Notified Type and “Direct Entry” as the Person’s Name in the Notification section of the EMT system

CCDDR will receive a DMH DD electronic notification summary of the event the next day after entry of the event into the EMT system. A Consumer Event Summary report is sent via an encrypted email to the Support Coordinator and Targeted Case Management Supervisor who is active in the client record for a client involved in an event.

To ensure automated event summary notifications are distributed to the client’s Support Coordinator and Targeted Case Management Supervisor, it is the responsibility of the:

- Rolla Satellite Regional Office to maintain the Human Resource record each Support Coordinator and Targeted Case Management Supervisor record with the correct email address and “Yes” selected for the primary email address
- Designated CCDDR employee to maintain the Consumer Resource Record to have the current Support Coordinator and Targeted Case Management Supervisor listed for clients CCDDR through its services

A Consumer Event Summary report is created using only the most critical fields of the event report to provide notice of a reportable event to a Support Coordinator and Targeted Case Management Supervisor who is active in the client record for a client involved in an event. Critical fields include:

- EMT #
- Event Date/Time
- Discovery Date/Time
- State Oversight Organization
- Responsible Organization
- Program Category-Primary Oversight
- Location of Event
- Event Narrative
- Lists Consumers Involved
- Consumer Role/s
- Detail Module Indicator
- Notified Type/Date

Event reports are protected internal department documents under sections 630.167(3) and 630.165, RSMo that shall be kept confidential, and shall not be deemed a public record. As such, the Consumer Event Summary reports shall also be kept confidential and not deemed a public record.

If, following the review of the Consumer Event Summary report, the Support Coordinator or the Targeted Case Management Supervisor have follow up information which would be pertinent to the event, they shall email the Rolla Satellite Regional Office or Regional Office staff who will review follow up actions and may include their information in the EMT record.

If CCDDR has concerns about follow up action conducted by DMH/DDD, CCDDR may contact the DDD Assistant Director for the region, Director of State Operated Program-Waiver Program, or other impartial designee of the Division Director for the state oversight organization involved in the event.

Events that are unusual and not being addressed in a person's plan are to be reported to the designated quality management staff as well as any findings of concerns or issues related to health, safety/environment, money, rights, or services that were noted in the event report that require action. Failure of CCDDR staff to report suspected or observed abuse/neglect or misuse of funds/property will be cause for disciplinary action, including dismissal.

NOTE: Event Reports are an administrative tool and not part of the clinical record. All event reports are filed separately from the client's record. Event reports may be referenced by event number in log notes. The content of an event report or event report summary shall not be included within a log note as they are not part of a client's clinical record.

Review of Event Reports

Support Coordinators may request event data for client planning and trending purposes.

Information surrounding individual issues such as behavior incidents, use of restraints, falls, environment, health, etc., should be reviewed and discussed by the interdisciplinary team when evaluating, updating, and developing person-centered plans.

CCDDR management staff has access to event data for reviewing and trending of event report information. This is also important for the identification of issues needing further investigation due to recurring themes and serious events.

The Rolla Satellite Regional Office designee or Regional Office Director or designee shall make available training for all applicable CCDDR employees regarding event reporting requirements, event notification procedures, EMT system event entry procedures, and required timelines for event notification and entry. The training is to be conducted for applicable new employees and, if required by DMH/DDD, for all other applicable staff during annual updates or whenever a major change in policies and procedures occurs.

REFERENCES:

- [Division Directive 4.070](#)
- CARF Standards Manual
- [9 CSR 10-5.200](#)
- [9 CSR 10.5.206](#)
- [DOR 2.210](#)



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-18

APPROVAL OF AMENDED POLICY #23

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, and job descriptions and creates new Bylaws, policies, 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 #23, Medication Monitoring.
2. That the Board hereby amends and adopts Policy #23 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-18



Policy Number: 23

Effective: May 1, 2008
Revised: March 11, 2025

Subject: Medication Monitoring

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy for Support Coordination staff to properly monitor medication management practices of agencies serving persons with developmental disabilities in residential and day habilitation settings, per Division of Developmental Disabilities' guidelines and regulations. Through the Service Monitoring process, CCDDR Support Coordination staff will be required to monitor agency practices with regard to medication management. All agencies monitored by CCDDR shall have staff properly trained in medication management, shall implement proper medication management techniques, and shall provide adequate documentation with regard to client medication administration.

POLICY:

As part of the Service Monitoring function that CCDDR Support Coordination staff provide via the Division of Developmental Disabilities' Service Monitoring guidelines, CCDDR staff regularly monitor the health and safety of clients served, including medication management practices of the provider agency.

I. Monthly Monitoring

The monthly Service Monitoring function performed by the Support Coordinator shall include:

- Review of agency Medication Administration Records to ensure all medications have been signed off by staff after consumption and there are no missing entries or errors
- Review of employee training records/personnel file to verify certification in Level I Med
- Aide course for all employees passing meds
- Physician Orders/Doctor's Orders (P.O.) are reviewed, and include physician signature and date, name of medication, dosage, time, route, reason/purpose for taking medication
- Refused medications and/or PRN medications are fully documented with name of med, date, reason given
- All medications, including over the counter medications, have been prescribed by a licensed physician and current doctor's orders are present
- All medications have been properly transcribed to the client's Medication Administration Record
- All medication doses have been administered by appropriate route
- All medications are locked when not in use, and they are monitored at all times

- Support staff is aware of and follow agency policy for monitoring of vital signs and for monitoring the effectiveness of medications, as needed
- Information for medication side effects is available, and agency staff have reviewed and signed off on these
- Allergy information is listed on the client Medication Administration Record
- All medication errors are reported per policy and an Event Report completed
- Storage of medications is appropriate (i.e. refrigerated if necessary, controlled substances double-locked as required, etc.)
- All PRN medications include directions for use
- All medications are labeled properly
- Expired meds are replaced timely
- Agency staff should know the intended effect of medications.
- The client's health status is reviewed regularly
- All medications have: dosage, time, purpose, expiration date and side effects listed.
- Client is given appropriate information to make informed choice. Any related risks are explained to the client
- There is a process for prescription renewal and drug regimen review determined by physician and this is recorded
- Staff and client know the prescription renewal process and drug regimen/medication review process
- Annual physician's orders for mechanical supports/adaptive equipment
- Staff knows medical history, medication history and diagnosis or where to find the information in the file
- At least annual review of effectiveness of medications by physician's orders
- Client or their legal representative should have access to following with regard to medication management: type of medications; purpose of medications; time to take medications; side effects of medications; how the medication is to be taken; what supports, if any, will be necessary; and how long the medication is to be taken

II. Supports for Self-Administration of Meds

For clients who are learning to self-medicate or need support to ensure medications are administered appropriately, CCDDR Support Coordination staff shall ensure that:

- The goals and individual responsibilities for self-administration of medications are documented thoroughly in the current Individual Support Plan
- The individual has been provided training in administering their own medications and recording their medications administered
- The client demonstrates appropriate ability/responsibility
- The individual knows how to obtain assistance/support if an error occurs or an adverse reaction is experienced
- The individual has been instructed and is able to utilize the pharmacy and/or physician to access medical records, report problems, etc.
- Emergency information, physician orders and side effect information is available to staff
- Must have physician's orders' documentation and what steps client does if partial administration, and what steps staff assists with

- If a client is in the process of learning any step of self-administration, the Individual Support Plan will need a Personal Outcome with goals to address this, and provider progress notes should document client progress in learning self-administration of medications

III. Preservation Of Medications Sensitive To Temperature, Light and Moisture

Support Coordination staff shall check to determine if facilities to be monitored per Service Monitoring Directive properly maintain and store medications to ensure protection from temperature, light, and moisture. Typically, the prescription label will note how the medication is to be stored.

Most medications are to be stored at room temperature. Room temperature is defined as 59 degrees to 86 degrees Fahrenheit. Medications stored at higher temperatures for prolonged periods can deteriorate.

Facilities monitored may use a refrigerator for cold or cool storage of medications. If a refrigerator is used to store medications at the facility, the temperature is to be kept at thirty-six to forty-six (36-46) degrees Fahrenheit (F). If food is stored in the same refrigerator, medications should be kept separate in a labeled, covered container.

Light may affect medications and these medications are typically dispensed by the pharmacist in light-resistant containers (dark colored or opaque bottles), however storage should also be in an environment free of light. Support Coordination staff shall ensure that light sensitive medications are stored in opaque containers and cabinets or closets free from light.

Moisture, and especially excessive moisture or humidity can reduce the shelf life of a medication. A refrigerator is a high-moisture area so containers should be kept tightly closed. A bathroom medicine cabinet is also subject to high moisture and humidity levels and is not the best environment in which to store medications.

IV. Storage and Control of Medications

During monthly Service Monitoring, CCDDR Support Coordination staff shall note the following with regard to storage and control of medications:

- A locked room is used for medication only or medication cabinets/closets with locks are used
- Each client's medications are stored in a separate compartment or bin from those of other clients
- Medication carts with locks that have individual bins or trays and a lockable drawer may be used
- Refrigerator – any medications stored in a refrigerator should be stored in a locked container with the client's name on the box and the name of the medication, dosage, frequency, time and any individual instructions on the medication label
- Controlled Medications: Support Coordination staff shall ensure that a double lock is

used for all schedule II medications in facilities monitored – facilities can accomplish this by using a locked container or compartment within a locked cabinet

- Other controlled medications can be double locked as needed for security – it is advisable to place all narcotics/controlled medications under a double lock so that staff do not have to determine if the medication is a schedule II medication
- The keys should always be kept secure with limited staff having access to the keys for the medication storage unit

V. Storage for Different Kinds of Medications

Support Coordination staff shall ensure that facilities monitored properly separate different types of medication to prevent contamination:

- Internal medications should be stored separately from external medications – this includes both tablets and liquids
- Eye, ear, or nose medications may be stored with the rest of the client’s internal medications, but it’s important to keep the container clean – it is advisable to store these medications in a separate container than the oral medications
- Inhalers and suppositories as well as other medications may need to be refrigerated – be sure to read the label on the medication for directions on appropriate storage
- External medication should be stored separately from internal medications to reduce the chance of error and contamination – liquids and ointments should be stored in a separate container, perhaps in a separate cabinet or on a separate shelf from internal medications
- If “stock” medications are kept in the facility, they should be stored separately from the clients’ medications
- First aid, non-prescription medications for simple medical emergencies should be stored separately from other medications in a locked cabinet
- Emergency medications which consist of prescription medications are kept in a separate container, in a locked cabinet

VI. Facility Policies

Each facility monitored by CCDDR Support Coordination staff should have an accountability system in place for all medications. This should include a written policy regarding storage and security of medications and should include documentation of medication counts as well as reporting of missing medications.

- The agency may have a designated individual who checks in all medications at the beginning of each month and then documents the findings on a form developed by the agency
- Medication aides are to initial each dose of medication given on the Medication Administration Record as soon as administration is complete
- If bubble packs are used, the staff may also initial and date each slot as they administer the medication for any particular slot
- If “stock” medications consisting of non-prescription, first aid medications and emergency medications consisting of prescription medications are available in a

facility, the agency must have a system such as a logbook, etc. to provide accountability for these medications

- Controlled medications should have a label which reads “Federal law prevents the transfer of the medication to anyone other than for whom it was prescribed” – all doses are recorded on the regular Medication Administration Record after administration; however, a count sheet should be kept for each controlled medication and the medications must be reconciled every shift

VII. Disposal of Medications

All facilities monitored by CCDDR shall have a policy in place regarding proper disposal of medications. At a minimum, the following issues shall be incorporated into the facility medication disposal policy:

1. Contaminated: A contaminated dose is disposed of (destroyed) by the Level I Medication Aide or the DMRDD Medication Aide at the time of the contamination. Witnesses are required for destruction of any medication. Proper documentation procedures should be followed (see sample drug disposal record following).
2. Unused or discontinued medications may be returned to the pharmacy by the facility if the pharmacy will accept them. If not, the medication will need to be destroyed.
3. Flush prescription medications down the toilet *only* if the label or accompanying patient information specifically instructs doing so. The preferred method of disposing of medications is crushing and mixing them with coffee grounds, kitty litter or other non-edible substances and placing them in a non-descript, impermeable container to go out with the regular trash. Medication destruction involves two persons. The medication aide can be one person and the other must be a pharmacist, nurse or state inspector.

Some agencies have developed their own “Destruction of Medication” forms and the medication aide needs to be familiar with the form and any policy regarding medication destruction that the agency may have.

REFERENCES:

- CARF Standards Manual
- 9 CSR 45-3.070
- MO Department of Mental Health Medication Aide Manual

MEDICATION DESTRUCTION RECORD

Client Name _____

Case Number _____ State ID Number _____

Date _____

Medication/Strength/ Rx Number _____

Number of tabs/doses of medication disposed of _____

Signature 1 _____

Signature 2 _____

Date _____

Medication/Strength/ Rx Number _____

Number of tabs/doses of medication disposed of _____

Signature 1 _____

Signature 2 _____

Date _____

Medication/Strength/ Rx Number _____

Number of tabs/doses of medication disposed of _____

Signature 1 _____

Signature 2 _____



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-19

APPROVAL OF AMENDED POLICY #24

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, and job descriptions and creates new Bylaws, policies, 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 #24, Monitoring Positive Behavioral Interventions/Restraints.
2. That the Board hereby amends and adopts Policy #24 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-19



Policy Number: 24

Effective: May 1, 2008
Revised: March 11, 2025

Subject: Monitoring Positive Behavioral Interventions/Restraints

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy to ensure agencies supporting clients served by CCDDR utilize appropriate Positive Behavioral Support techniques when deemed necessary by the client's planning team and agencies utilize proper crisis intervention techniques implemented by properly trained staff. Furthermore, CCDDR Support Coordination staff, through the Service Monitoring and Plan Development processes, shall ensure agencies serving persons with developmental disabilities are in compliance with adopted Division of Developmental Disabilities' and Rolla Satellite Regional Office's crisis intervention methods guidelines and policies.

POLICY:

I. Referrals To Behavior Support Review Committee

Contracted providers shall monitor and implement positive proactive strategies to reduce the likelihood that an individual will require reactive strategies or restrictive interventions. If a provider has a reactive strategy (one which is not part of the individual's plan used to maintain safety of the individual or others in the threat of imminent harm) occur, it may be used for one (1) or two (2) incidents until a planned intervention is developed in the safety crisis plan or behavior support plan. If the Reactive Strategy Threshold of five (5) or more reactive strategies within a one (1) month period is crossed, the planning team should convene within five (5) business days to complete the review and any restrictions of the supports, or other issues that might affect the individual, identify triggers, consider the need of a functional behavior assessment, and develop new or revised proactive strategies that are less likely to result in the use of reactive strategies. If an individual meets the Reactive Strategy Threshold for three (3) consecutive quarters, they should be referred to the Regional Behavior Support Review Committee. If an individual meets the Reactive Strategy Threshold five (5) or more times in a one (1) month period, the planning team should request the Support Coordinator submit a request for behavioral services.

II. Tiered Supports Team Referrals and Process

1. Referral Process for Waivered Clients

- Tiered Support Referrals are to be emailed, faxed, or mailed to the [Positive Supports Lead](#) at the designated Regional Office
- The Positive Supports lead will assign the referral to a Positive Supports Consultant
- The Positive Supports Lead or Consultant will contact the Support Coordinator or provider/family member and aid in determining the Tiered Support level needed for the

individual – if the assessment indicates the individual has shown an increase in serious behaviors in which there is police involvement, in-patient hospitalizations, restraints, or 1:1 level of supervision, the individual may qualify for Tier 3 support and be referred to Applied Behavior Analyst Services

- The Tiered Support lead or referred Tiered Support member will assist the Support Coordinator, as needed, with creating Tiered Support outcomes and action steps to be included in the behavior plan attached to the Individual Support Plan (ISP)
- The Support Coordinator will add the outcomes and action steps to the modified ISP
- The Provider & Services Choice form and Authorization form, with Tiered Support Services identified, are completed and signed by the Support Coordinator and individual/guardian:
 - The Support Coordinator, TCM TAC, and Tiered Support member can work together to determine how many units to authorize for at current rate per unit
- Once the plan is modified and signatures are received, the Utilization Review (UR) Packet will be completed and submitted to the TCM TAC contact – the UR packet includes a copy of the signed Provider & Services Choice form, signed Authorization form, modified ISP, and justification for service
- Once the Tiered Support team receives confirmation back from UR, they will begin services based on the tier level determined

2. Referral Process for Non-Waivered Clients

- Tiered Support Referrals are to be emailed, faxed, or mailed to the [Positive Supports Lead](#) at the designated Regional Office
- The Positive Supports Lead will assign the referral to a Positive Supports Consultant
- The Positive Supports Lead or Consultant will contact the Support Coordinator or provider/family member and aid in determining the Tiered Support level needed for the individual. The Tiered Support Lead or referred Tiered Support member will assist the Support Coordinator, as needed, with creating Tiered Support outcomes & action steps to be included in the behavior plan attached to the individual's ISP
- The Support Coordinator will add the outcomes & action steps to the ISP
- The Provider of Choice document is completed and signed by the Support Coordinator and the individual/guardian
- The Support Coordinator and Tiered Support member will work together to begin services based on the tier level determined
- To have only one contact, the modified ISP and Provider of Choice document may be sent to the TCM TAC

3. Tiered Support Process for Waivered and Non-Waivered Client Referrals

- A. The Tiered Support member will schedule a team meeting with the individual and the individual's planning team once the environmental assessment has been completed and an action plan, based on the assessment, has been developed. The planning team will review the action plan to ensure they agree with the action steps identified. A signature page will be presented at the meeting for all parties to sign if planning team members (individual, guardian, designated provider staff member, Support Coordinator, and/or family member) agree upon the contents of the action plan. If revisions are needed, the Tiered Support member will email, fax, or mail the planning team the revised document.
- B. During the referral process, if an individual's behaviors increase in intensity to the point there is police involvement or in-patient hospitalization due to behavioral issues, the

person may need to be referred to Applied Behavior Analysis Services (ABA) or have an enhanced staffing pattern based on their Tiered Support Level needs

III. Agency Use of Behavioral Interventions/Crisis Intervention Techniques

Per Division of Developmental Disabilities guidelines and Rolla Satellite Regional Office procedures, agencies that support clients served by CCDDR and the Division of Developmental Disabilities may adopt a curriculum of Positive Behavioral Support training, subject to the Division of Developmental Disabilities and Rolla Satellite Regional Office approval. Support Coordination staff shall ensure agencies implement such behavioral intervention strategies in accordance with the Division of Developmental Disabilities and Rolla Satellite Regional Office policy. The Division provides oversight for services provided to individuals with significantly challenging behaviors through the Regional Behavior Supports Committee. The following general principles apply:

A. Physical Restraints:

In cases of imminent harm to a person or persons, agency staff may utilize physical restraint. Staff must first be trained in a nationally recognized crisis management program which must be included in the individual's crisis safety plan. Techniques other than those must be made, in writing, to the Chief Behavior Analyst of the Division. If internally developed systems are approved and utilized, a quarterly analysis of the use of the restraint procedures and strategies to eliminate the need is completed and submitted to the Chief Behavior Analyst. All specific instances of physical restraint must be documented in an Event Report form. Improper use of physical restraint techniques by agency staff or use of excessive force shall be considered abuse and cause for disciplinary action. Use of and authorization for physical restraints shall be documented in the individual's Plan by the Support Coordinator.

B. Mechanical/Chemical Restraints:

These techniques may be used to prevent a person from injuring self or others, only after other less aversive techniques have been tried, and it has been documented in the person's record by a QDDP that less restrictive alternatives do not work as a means of curbing aggressive behavior. The Support Coordinator and other team members shall design such techniques which shall be incorporated into the person's Plan as outlined in DOR 4.145.

C. Time Out:

This may only be used under conditions set out in a written behavioral modification program (incorporated into the Person-Centered Plan) and shall meet guidelines set out in DOR 4.145. The Rolla Satellite Regional Office Regional Behavioral Supports Committee shall review/approve all plans that propose time out as part of the due process review. The Rolla Satellite Regional Office Regional Behavioral Supports Committee shall review all instances of restraint to assess the appropriateness of restraints.

Support Coordination staff shall determine if the agency has a "no-restraint" policy, and if so, what emergency procedures are in place should a client served by the agency become a danger to himself or others.

III. Prohibited Behavioral Intervention Techniques

Support Coordination staff shall ensure that agencies do not use techniques that are strictly prohibited per Division of Developmental Disabilities policy as methods of behavioral support.

The following is a general list of behavioral interventions ***not approved*** by the Division of Developmental Disabilities:

- Seclusion -Placement of a person alone in a locked room or area which he or she cannot leave at will; this does not include seclusion time out
-
- Any reactive strategy that may exacerbate a known medical or physical condition, or endanger the individual's life or is otherwise contraindicated for the individual by medical or professional evaluation
- Containment without continuous monitoring and documentation of vital signs and status with respect to release criteria
- Use of any reactive strategy on a "PRN" or "as required" basis. Identification of safe procedures for use during a crisis in an individual's safety crisis plan is not considered approval for a restraint procedure on an as needed basis
- Any procedure used as punishment, for staff convenience, or as a substitute for engagement, active treatment or behavior support service
- Standing orders for use of Restraint Procedures—unless part of a comprehensive safety crisis plan that delineates prevention, de-escalation and least restrictive procedures to attempt prior to use of restraint
- Inclusion of a restrictive support, manual restraint procedures or chemical, mechanical restraints calling police or hospitalization as part of a behavior support plan as a contingency designed to produce a reduction or elimination of a behavior
- Reactive strategy techniques administered by other individuals who are being supported by the agency
- Corporal punishment or use of aversive conditioning—Applying painful stimuli as a penalty for certain behavior, or as a behavior modification technique
- Overcorrection –Requiring the performance of repetitive behavior as a consequence of undesirable behavior designed to produce a reduction of the frequency of the behavior. – Examples: Contingent exercise, writing sentences, over cleaning an area, repeatedly walking down a hallway after running
- Placing persons in totally enclosed cribs or barred enclosures other than cribs
- Any treatment, procedure, technique, or process prohibited elsewhere by federal or state statute

Certain physical interventions are prohibited. These include:

- Physical restraint techniques that interfere with breathing
- Prone restraints
- Restraints which involve staff lying/sitting on top of a person
- Restraints that use the hyperextension of joints
- Any technique which has not been approved by the Division of Developmental Disabilities and for which the staff person has not received Division of Developmental Disabilities approved training

Support Coordination staff, through Service Monitoring and review of Event Reports, shall determine if any of the above unauthorized methods are being implemented by agency staff as a means of crisis intervention. Referrals shall be made to the Regional Office Provider Relations Team as needed, or, if abuse or neglect is suspected by the Support Coordinator, shall be reported to the proper authorities per CCDDR's Abuse/Neglect reporting policy.

REFERENCES

- CARF Standards Manual
- [Missouri's Department of Mental Health Tiered Support Services](#)
- Rolla Satellite Regional Office DOR/Restraints & Time Out
- [Individual Support Plan Guide, 2-15-18](#)
- [DOR 4.145](#)
- [Division of Developmental Disabilities Directive 4.300](#)



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-20

APPROVAL OF AMENDED POLICY #33

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, and job descriptions and creates new Bylaws, policies, 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 #33, Log Notes.
2. That the Board hereby amends and adopts Policy #33 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-20



Policy Number: 33
Effective: January 1, 2013
Revised: September 18, 2017;
December 10, 2020; March 11, 2025

Subject: Log Notes

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy that log notes are to be maintained electronically, and to document all contact, attempts at contact, and other pertinent information regarding the clients CCDDR serves.

DEFINITIONS:

Log Note (aka Case Note): This is the written documentation of contact and other pertinent information regarding a client, usually written by the Support Coordinator. These log notes are protected under The Health Insurance Portability and Accountability Act (HIPAA) and may contain sensitive information. Log notes are written electronically and saved in CCDDR's online Targeted Case Management database system.

Review Process: This is any regular review of the effectiveness of the services outlined in the Individual Support Plan.

PHI: Protected Healthcare Information.

HIPAA: Health Insurance Portability and Accountability Act

POLICY:

Log notes are part of the PHI protected by HIPAA. Log notes will be written in complete sentences, without misspelled words, and shall adequately explain the service provided and time allotted to the note. The note should tell what action occurred and why, and identify the parties involved. The reader should be able to infer from the description of who, what, where, when, why, and the benefit the individual received. The note should include observations, data, activities, and descriptions. The log note should always describe what the Support Coordinator has done. If referring to another document, the note should state the specifics related to that document. Each note must be able to stand on its own, explaining all abbreviations, and explain the connection of each individual person mentioned to the individual being logged upon. Log notes will not be sent to any individual, guardian, agency, or client as part of a regular review process. Log notes will not leave the premises, be they physically printed or in digital correspondence, in the absence of a court order or a valid authorization completed by the client or applicable personal representative, with limited exceptions.

The Targeted Case Management Supervisors, Targeted Case Management Director, Executive Director, or designated 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 and/or release form, they shall direct it to the Targeted Case Management Supervisors, Targeted Case Management Director, Executive Director, or designated CCDDR Privacy Officer for review. A Transfer Request received from another TCM entity after a client has re-located shall serve as authorization to release the last 6 months of log notes in an attempt to make the client's transition to new services more efficient.

Any other 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:

- The client or guardian authorizes the disclosure
- Disclosures required by law

Clients and guardians of clients can access these files according to the guidelines established by HIPAA and Division of Developmental Disabilities Directives.

REFERENCES:

- [Division of DD Directive 3.020](#)
- [Health Insurance Portability and Accountability Act Of 1996/Public Law 104-191](#)
- [DDD Targeted Case Management for Individuals with Developmental Disabilities \(Section 7.1\)](#)
- [Division of DD Technical Assistance Manual](#)



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2025-21

APPROVAL OF AMENDED POLICY #34

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, and job descriptions and creates new Bylaws, policies, 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 #34, Quarterly-Monthly Review.
2. That the Board hereby amends and adopts Policy #34 (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.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution
2025-21



Policy Number: 34

Effective: 1/1/2013

Revised: 9/18/2017;

12/10/2020; 1/9/2024; 3/11/2025

Subject: Quarterly/Monthly Reviews

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy to perform a Quarterly or Monthly Review of the Individual Support Plan for each person who receives Support Coordination services from CCDDR.

DEFINITIONS:

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

Individual Support Plan: This is 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. If possible, the individual served should be present for the person-centered planning meeting. 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/or supports that will assist the individual in achieving personally defined outcomes.

Quarterly Review: This is a review of the effectiveness of the services outlined in the Individual Support Plan that occurs every three months. The quarters are established from the implementation date of the Individual Support Plan

Monthly Review: This is a review of the effectiveness of the services outlined in the Individual Support Plan that occurs every calendar month

POLICY:

Services authorized in all Individual Support Plans that are funded through the Department of Mental Health, including all Medicaid Waiver plans, shall comply with Division of Developmental Disabilities' Service Monitoring guidelines. Service provision, programming, and progress shall be documented. This information may result in the modification of the Individual Support Plan. Such plans shall be modified and updated, depending on the client's needs and preferences.

I. Plan_Monitoring/Reviews

Quarterly or Monthly Reviews shall be completed for all clients. The review period requirements shall be identified by the Division of Developmental Disabilities, which is also based on the type of services authorized for each individual client. The Quarterly and Monthly Reviews shall provide an overview of progress made toward Personal Outcomes and Goals, need for changes to the plan, Support Coordinator and client contacts, Service Monitoring notes, and other pertinent information relating to the client.

The Support Coordinator and provider agency Qualified Developmental Disability Professional (QDDP) (if applicable) shall regularly monitor implementation of the Individual Support Plan and progress in meeting Personal Outcomes and Goals. Changes shall be made as necessary to plan outcomes and action steps based upon input from team members.

II. Quality Assurance

The Quality Assurance Coordinator(s), Targeted Case Management Supervisor(s), and/or other designated CCDDR staff will monitor Quarterly Reviews, Monthly Reviews, and Individual Support Plans to ensure that the mandatory components of the Individual Support Plan Guidelines are implemented.

REFERENCES:

- CARF Standards Manual
- [Individual Support Plan Guidelines – Medicaid Waiver Manual](#)
- [RSMo 633.110](#)
- [Division of DD Quality Outcomes Discussion Guide](#)
- [9 CSR 45-3.010](#)
- [RSMo 630.655](#)
- [Division of DD Directive 3.020](#)
- [Division Directive 4.060](#)