

CONNECTIONS OF MOORHEAD

Program Policies

LEARNING OBJECTIVES

- ▶ To gain a general understanding of the Program Policies of Connections
- ▶ To understand the expectations of staff in regards to situations involving the program participants

PRINCIPLES OF PERSON-CENTERED PLANNING

- ▶ 'Person centered planning' may be defined as a way of discovering:
 - ▶ How a person wants to live their life &
 - ▶ What is required to make that possible.
- ▶ Staff will be prepared to help accomplish this in many ways with the participant:
 - ▶ Help move a person's life in the direction they want;
 - ▶ Help build a person's place in the community;
 - ▶ Help the community to welcome, appreciate and value them.
- ▶ This can happen by:
 - ▶ taking time to really get to know people and build relationships over time
 - ▶ Discovering and responding effectively to the various dreams, goals, and concerns of the participants you work with
 - ▶ Identifying and exploring **CHOICES** available to the individual.

INCIDENT RESPONSE & REPORTING

- ▶ All incidents must be reported by filling out a GER on Therap:
 - ▶ within 24 hours of the occurrence, or
 - ▶ within 24 hours **of receipt of the information** unless the incident has been reported by another license holder, using a GER on Therap.

- ▶ When the incident involves more than one participant:
 - ▶ a **separate** GER must be written for each participant.
 - ▶ ***Identifying information*** regarding the ***other participant*** be **MUST NOT** be included (INCLUDING initials).
 - ▶ For example: The incident involved participant 1 pinching participant 2. Two incident reports will be written and information that could identify participant 2 should not be included in the incident report for participant 1.

MALTREATMENT: REPORTING AND INTERNAL REVIEW

- ▶ **ALL EMPLOYEES OF CONNECTIONS ARE MANDATED REPORTERS.**
- ▶ **Therefore, if you know or suspect that a vulnerable adult has been maltreated, you must report it immediately.**



Immediately means as soon as possible, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received.

A mandated reporter who negligently or intentionally fails to report suspected maltreatment of a vulnerable adult is liable for damages caused by the failure to report.

- ▶ Reports may be made in the following ways:

- ▶ You may make an **external** report to the Common Entry Point at 218-299-5200
 - ▶ *The report to the Common Entry Point must be as soon as possible, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received.*
- ▶ You may make an **internal** report to the respective Program Coordinator or the Director of Client Services, Trish McGarry.
 - ▶ **If you have reported internally, you must receive, within two working days, a written notice that tells you whether or not your report has been forwarded to the Common Entry Point.**

MALTREATMENT: REPORTING AND INTERNAL REVIEW

▶ Examples of Abuse:

- ▶ Hitting, kicking, slapping, pinching, biting
- ▶ Criminal sexual conduct
- ▶ Use of disparaging, embarrassing, humiliating, harassing, or threatening language
- ▶ Use of aversive or deprivation procedures
- ▶ Financial exploitation or fraudulent activities of a vulnerable adults funds

SAFETY PRACTICES

THE SERVICE SITE SHALL BE SAFE AND HAZARD FREE

- ▶ Toxic substances or dangerous items are inaccessible to participants **ONLY** when a known risk is present to protect the safety of a participant.
- ▶ Doors are locked from the inside to protect the safety of a participant, and to prevent a participant from leaving **only when a risk is known**----not as a substitute for staff supervision or interactions with the person.
- ▶ Be prepared for emergencies and follow emergency response plans
- ▶ Follow universal precautions and sanitary practices, **ESPECIALLY** including hand washing, to prevent infectious diseases

GRIEVANCE PROCEDURE

HOW TO ASSIST A PARTICIPANT IN FILING A GRIEVANCE

- ▶ *a grievance is a complaint that can be made about something one does not like about where one works or lives. It may have something to do with the rules or the people that one works or lives with.*
- ▶ *If a person wants to file a grievance, it can be done without being afraid of being criticized or threatened by staff.*
 - ▶ If you have a problem or complaint the participant should follow these steps:
- ▶ **Step 1:** Talk to a staff person who you feel comfortable with about your complaint or problem. That person will help you to write down your complaint .That person will help you tell the supervisor about your complaint.
- ▶ **Step 2:** If the staff person and the supervisor were not able to help you solve your complaint or problem, you can talk to: Connections Director of Client Services Trish McGarry (218)233-8657 ex. 12. She will help you within two days to solve your complaint.

GRIEVANCE PROCEDURE

- ▶ **Step 3:** If Trish McGarry was able to solve your complaint, you can talk to: Connections Executive Director, Sheila Sartwell (218)233-8657 ex. 14. she will talk to you within 2-5 days and provide a written response to your complaint within 2 weeks explaining how your complaint will be solved.
- ▶ **Step 4:** If your complaint is still not solved in a way that you like or agree with, then you or your legal representative can send your complaint to the person with the highest level of authority within the program (e.g., Administrator, CEO, or Board of Directors) for a final review. A written response explaining how your complaint will be solved will be provided within 2 weeks.

WHERE TO GET HELP WHEN YOU MAKE A COMPLAINT

THESE ARE RESOURCES YOU OR SOMEONE YOU AUTHORIZE CAN CALL FOR HELP TO FILE A COMPLAINT.

Clay County Social Services

715 11th St. N. Moorhead, Mn 56560

Child Protection: (218)299-5200

Adult Protection: (218)299-5200

social.services@co.clay.mn.us

Department of Human Services (DHS)

PO Box 64976

St. Paul, MN 55614

651-431-2000

dhs.info@state.mn.us

Office of Ombudsman for Managed Health Care Programs

PO Box 64249

St. Paul, MN 55164

651-296-3848

Disability Law Center (Legal Advocacy)

430 1st Ave N Ste 300

Minneapolis, MN 55401

612-332-1441

www.mndlc.org

SERVICE SUSPENSION & TERMINATION

- ▶ Connections will only suspend or terminate persons receiving services for situations in which the person's behavior causes immediate and serious danger to the health and safety of the individual or others. The person will participate in the decision making process, applicable laws will be followed regarding this process, and program staff will advocate for the best decision for the person.
- ▶ A. "Suspension" means temporary discontinuation of service to a person, which includes temporary removal of the person from the service site.
- ▶ B. "Termination" means discharge from the program.

UNIVERSAL PRECAUTIONS

- ▶ Wear gloves whenever handling body fluids. (saliva, blood, nose secretions, eye secretions, urine, BM, vomit, semen, vaginal secretions)
- ▶ Change gloves and wash hands after each contact with an individual's blood and/or body fluids.
- ▶ Wear a gown or apron when clothing could become soiled with body fluids.
- ▶ Wear a mask and eye protection if splashing is possible—when helping participants brush and floss teeth, for example.

- ▶ **Hard Surface exposure to Blood and Body Fluid**

- ▶ Wear gloves and remove excess fluids with paper towels and place in a plastic-lined wastebasket.
- ▶ Promptly clean with a disinfectant solution such as 1:10 dilution of household bleach.
- ▶ Dispose of gloves in a plastic-lined wastebasket.

- ▶ **Contaminated Laundry**

- ▶ Wear gloves when handling unwashed contaminated laundry.



UNIVERSAL PRECAUTIONS

▶ Prevention of Infections

- ▶ Report any sign of infections or symptoms of communicable disease to RN consultant ASAP.
- ▶ If staff has draining lesions or wounds they must be evaluated by their physician before working with individuals.
- ▶ Staff with communicable bacterial infections may return to work after having received antibiotics for 24 hours or per physician's order.

SAFE TRANSPORTATION

- ▶ Program vehicles (BUSES) used to provide transportation to the program participants will contain the following information and items:

Name, address, phone number.	Program phone numbers	Parents and residential names and phone number
Medical information	Name and phone number of person(s) to call in case of emergency	First aid kit
Name of hospital, clinic, and doctor and phone number	Cellular phone Proof of insurance card	Current route list

- ▶ **TEXTING WHILE DRIVING IS STRICTLY PROHIBITED.**
- ▶ All drivers and staff will be familiar with individual vulnerabilities, medical issues, behaviors and any concerns regarding transportation via persons' Risk Management Plans and Participant Information Sheets.

DATA PRIVACY

- ▶ 1. Staff persons **DO NOT AUTOMATICALLY HAVE ACCESS** to private data about the persons served by this program or about other staff or agency personnel.
 - ▶ *Staff persons must have a specific work function need for the information.*
 - ▶ *If you don't need the information in order to do your job, you do not have access to it and if you do have access, you should not browse through it.*

- ▶ 2. Any written or verbal exchanges about a person's private information by staff with other staff or any other persons will be done in such a way as to **PRESERVE CONFIDENTIALITY** and **RESPECT THE DIGNITY** of the person whose private data is being shared.

MALTREATMENT OF VULNERABLE ADULTS REPORTING

- ▶ As a mandated reporter, if you know or suspect that a vulnerable adult has been maltreated, you must report it immediately (within 24 hours).
- ▶ You can report to the Common Entry Point 218-299-5200
- ▶ Or, you can report internally to your supervisor.
 - ▶ if your supervisor is involved in the maltreatment, you must report to the Director of Client Services
- ▶ When an internal report is received, the supervisor must decide if it will be forwarded to the Common Entry Point. The supervisor must also provide a Written Notice to the Reporter of the action that was taken.
- ▶ An Internal Review will be conducted by the supervisor or Director of Client Services.

MEDICATION ADMINISTRATION

- ▶ Prior to administering medication to program participants, every staff person must complete the agency Medication Administration training taught by the agency nurse.
- ▶ The training will include successful performance of simulated administering of medication.
- ▶ Staff persons who administer medications will record medications and treatments given on the MAR, located on Therap, according to the time, route, and methods determined by the participant's physician.
- ▶ All PRN (to be given as needed) medications and treatments must be given according to physician's orders, and must be documented on the MAR.

MEDICATION ADMINISTRATION

- ▶ All medications should remain locked until administration time
- ▶ Administer medications to ONE PERSON at a time.
 - ▶ Medications to be given when participant is on leave
- ▶ Whenever an individual needs to receive medications when not under the direct care of the facility, the medications are packaged and labeled according to labeling guidelines. N
- ▶ If the participant is going to be with friends or family during leave, and the participant is unable to administer their own medication, directives should be given to any persons unfamiliar with the participant's medication routine.

MEDICATION ADMINISTRATION

Self-Administration Medications

- ▶ The person's Team shall assess an individual's ability to self-administer medications and shall inform the individual's physician of their decision.
- ▶ A. An individualized program with measurable objectives shall be designed by the IDT to determine competency.
- ▶ B. The individual shall be supervised during the training program and shall be allowed to self-administer when he or she demonstrates competency.

MEDICATION ADMINISTRATION

Medication/Treatment Errors

- ▶ A. Shall be reported to the agency RN, the Program Supervisor and MD as soon as it is discovered.
- ▶ B. In the event of overdose or an individual receiving the incorrect medication, staff are to call Poison Control immediately and follow their directives
 - ▶ 1. AFC: All administration errors shall be reported to the prescriber immediately
 - ▶ 2. ESS: Notify the individual's residence, the supervisor, agency RN, or poison control as appropriate.

POSITIVE BEHAVIOR SUPPORT AND EMERGENCY USE OF CONTROLLED PROCEDURES

- ▶ Connections encourages the use of positive approaches as an alternative to aversive or deprivation procedures.
- ▶ “Positive Behavior Support” is **PROACTIVE**, and it involves:
 - ▶ teaching alternative skills and changing the environment.
 - ▶ reflects person-centered values that honor the dignity and preferences of the individual.

PROHIBITED PROCEDURES

ALL PROCEDURES LISTED BELOW ARE PROHIBITED AND MAY NOT BE USED

- ▶ “Deprivation procedure” :
 - ▶ the removal of goods, services, or activities to which the consumer is normally entitled. **("You can't go to Special Olympics this week because you punched the wall earlier.")*
- ▶ “Emergency use of manual restraint” means using manual restraint when a person poses imminent risk of physical harm to self or others and is the least restrictive intervention that would achieve safety.
 - ▶ **Property damage, verbal aggression, or a person's refusal to receive or participate in treatment or programming on their own do not constitute an emergency.**

PROHIBITED PROCEDURES

ALL PROCEDURES LISTED BELOW ARE PROHIBITED AND MAY NOT BE USED

- ▶ "Manual restraint" means physical intervention intended to hold a person immobile or limit a person's voluntary movement by using body contact as the only source of physical restraint.
 - ▶ 245D says that manual restraints can be in an emergency, but they may never be used at Connections.
- ▶ "Mechanical restraint" means the use of devices, materials, or equipment attached to the person's body, or the use of practices that are intended to restrict freedom of movement.

PROHIBITED PROCEDURES

ALL PROCEDURES LISTED BELOW ARE PROHIBITED AND MAY NOT BE USED

- ▶ "Seclusion" : removing a person involuntarily to a room where they cannot leave; or removing or separating a person from an area, activity, situation, or social contact with others and blocking or preventing the person's return.
- ▶ "Time out" means the involuntary removal of a person to a designated area, where the person CAN leave if they want. This is referring to INVOLUNTARY, not if the person removes themselves for a time to calm down.