

ABC Inc., Inc.



Community Participation SERVICE MANUAL

My Day – My Way

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Dear Staff Member:

Welcome to ABC Inc.'s Community Participation Program.

COMMUNITY PARTICIPATION services are provided to a diverse group of people with disabilities in the communities of their choice. The focus of COMMUNITY PARTICIPATION is to provide these people with individualized supports that are based on their hopes, dreams, aspirations and needs. Staff who support these individuals in their efforts to gain full membership in their communities must make several important commitments in their work.

- The first commitment is to respect these individuals as unique and valued.
- The second is to listen to them, with our ears and our eyes, and respond to what they say about their lives and their satisfaction with the services we are providing.
- A third commitment is to always remember that our purpose is not to have those we serve to conform to our expectations, but rather to seek to meet their expectations.

YOU are a very important factor in accomplishing these goals. We hope that you will recognize the value you have to the agency and to the individuals you will be serving and that you will be challenged by and proud of your new role.

The purpose of this manual is to provide guidance to ABC Inc.'s staff in their efforts to support and provide services to the individuals served by the agency. The job of providing this support is an important one and involves many complex tasks and responsibilities. This manual seeks to provide the information which staff need to do the job to the satisfaction of the various customers served by ACME. The foremost of these are the men and women we support to live and participate in their communities. Other customers include families, funding and regulatory agencies as well as the community at large.

This manual attempts to provide a philosophical base and general overview of services that you will need to do your job well. You will find all forms referenced in the text in **bold** letters. Each referenced form is in the appendix of the manual in both blank and sample formats. The inclusion of sample forms is designed to provide additional guidance in filling out required forms.

Each staff person will have access to this manual. Personnel and agency wide policies and procedures to which you may refer when procedural questions arise are also located in the business office. It is vital that these manuals be kept accessible to staff always to provide them with support to do their jobs and to ensure that the job is well done.

We look forward to working with you and hope that your employment with ABC Inc. will be rewarding for you. Always feel free to express your ideas and concerns to your supervisor in a constructive way. We believe the creativity of the staff and entire ABC Inc. family will help the agency grow and evolve into the future.

AGAIN, WELCOME TO THE ABC Inc. FAMILY!

ABC Inc. Mission Statement

Add mission statement here

ABC Inc. Vision Statement

Add Vision Statement here

SERVICE DESCRIPTION

ACME's COMMUNITY PARTICIPATION Program is a community-based service for people ranging in age from young adulthood through senior citizenship who have developmental and other disabilities. The training that ABC Inc. staff members provide in community-based settings is designed to assist the people served to truly become integral parts of their communities while addressing the individual habilitation and community integration needs of the people served. The ABC Inc. model of service focuses on the provision of training in natural environments and whole communities as an alternative to training in traditional facility-based services. It is the belief of ABC Inc. that the acquisition of skills is best achieved when those skills are taught in environments that are in the community, not segregated from it, and environments in which the individuals who are learning the skills are engaged in activities that are both functional and meaningful, both to them and to other community members.

The training that ABC Inc. staff members provide to these individuals is designed to encourage the development and maintenance of the following skills: employment exploration and work skill development; community survival; independent living; functional communication; social awareness; personal responsibility; self-determination; development of relationships with peers, both with and without disabilities; ability to exercise individual choice; enjoyment of recreation and leisure; and management of one's own behavior. In some jurisdictions, depending on the locality's specific regulations, the medical services staff manages and assesses medical needs for participants at each community habilitation site.

Everyone participates in the development of a person-centered support plan related to that individual's specific needs. Activities in which individuals may participate to accomplish the training goals stipulated in their individual support plan might include participating as a volunteer at nonprofit organizations; using public transportation; purchasing items at a store; banking; or using resources in the community such as libraries, parks, museums, bowling alleys, or miniature golf courses. Participants learn and practice all skills at specific sites in the community, where there is an opportunity for them to interact with non-disabled peers, or in the community at large where they can interact with the public.

Senior citizens and participants with limited stamina may choose to participate in activities at senior centers located throughout the community. For these individuals, the focus is on health and recreational activities that are of interest to them and that they have the stamina to undertake. These participants engage in activities that are typical for seniors, such as ceramics, needlepoint, or dominoes with their non-disabled peers at the centers.

Where possible, participants use public transportation to get to activities in their communities. Agency or private vehicles may be used when public transportation is not available or to transport medically fragile participants who want to participate in specific activities that are not nearby.

PHILOSOPHY

Add philosophy statement here

SERVICE GOALS
Add service goals here

Referral, Intake, Admissions, And Discharge

I. ADMISSION CRITERIA

Individuals may be accepted into ACME's COMMUNITY PARTICIPATION services based on the assessment and recommendation of the admissions committee (which is appointed by the program director) and on the choice of the individual and his or her family, if the following admission requirements are met:

- The individual is diagnosed as having a disability.
- The individual is age twenty-two or older or has been deemed eligible by the source that will be financing his or her participation.
- The individual presents no immediate life-threatening medical or behavioral concerns, except that a person who does present those concerns might be admitted if special emergency treatment and support can be arranged and if it is funded by the funding agency.
- The individual is functioning at a level that will permit him or her to benefit from community-based training and integration activities.
- The individual has adequate funding to support his or her individual needs.
- CP has or can secure the staff and resources necessary for the participant to receive appropriate services.

There are no restrictions related to race, color, gender, religion, national origin, sexual preference, marital status, disability, or veteran's status in accepting an individual into COMMUNITY PARTICIPATION.

II. REFERRALS TO COMMUNITY PARTICIPATION

A. Referral Process

The referral process assumes that the individual is being referred from a community residence, either his or her own home, a group home, or a supported living arrangement, for day services only. Often this will not be the case. Individuals may be referred from institutional or community settings for both day and community living services simultaneously. In those cases, circumstances may dictate that the process deviate from what is outlined below. Additionally, in some localities ABC Inc. Provides both day and community living services. Efforts must be made to incorporate the following elements into any referral procedure used, irrespective of the source, the prescribed process, or the model of service:

- Multiple ABC Inc. Staff should review written referral information to make an initial determination of whether the agency can serve the needs of the individual.
- Face-to-face meetings with the referred individual should be conducted.
- Direct observations of the referred individual should be made.
- Interviews with people involved and invested in the individual (circle of support) are conducted with the individual's permission.
- Decisions about the acceptance or denial of referrals should be made by a team.
- Preliminary activity schedules for an individual participant must be developed before service to that individual begins.
- Data must be collected on the individual's performance during the first thirty-day period of service to establish baselines of his or her performance in community settings.
- Adjustments must be made to preliminary support plans and activity schedules for the individual as the data collected indicates that changes are needed.
- All documentation necessary to ensure safe programming for an individual must be on file with ABC Inc. before service to that individual begins.

Outlined below is the referral process used to determine the appropriateness of COMMUNITY PARTICIPATION to meet the day support needs of referred individuals.

External Referrals

1. ABC Inc. believes each person should live and participate in the community of his or her choice and have dreams for the future. The referral process is the first step in making this dream a reality. The referral process allows the agency staff and the potential participant to get acquainted. During the referral process the referred individual, involved family and members of the circle of support for the individual, and ABC Inc. Staff will ascertain the individual's interests, goals, and needs for support. This information will be used to determine if ABC Inc. Has appropriate resources and services to meet the needs of that individual. All relevant information pertaining to the individual (the referral packet) must be submitted to the program director, which should

attach and complete the **REFERRAL ROUTING SHEET** and **REFERRAL RECORD REVIEW FORM**, review the information, and begin the referral routing process. (For copies of these forms, see Appendix B.)

The referral packet should include as much of the following information as possible relating to the individual:

- Updated medical history;
- Vocational assessments;

Most recent individual educational plan, person centered and individual support plan, including documentation of need for this service; and

- Any plans that address individual support needs (behavior support plans, special dietary plans, positioning plans, etc.)
2. The admissions committee, which the program director designates, will review the information in the referral packet to determine the appropriateness of COMMUNITY PARTICIPATION services for the individual being referred. Each committee member should give a brief description of the individual's service desires and needs and document her or his recommendations for service to that individual, using the referral record review form. The referral packet should then be routed to the other admissions committee members.
 3. The program director will review all comments from the admissions committee members and continue the intake process, if warranted, by scheduling an introductory meeting. The referral process should be completed as quickly as possible after receipt of the referral.

Internal Referrals

Though internal candidates for this service are often already known to staff, a referral process still should occur. The agency should already have records for the individual on hand. It is prudent to ensure that the process is documented and there is evidence that the individual has chosen these services from ACME.

B. Introductory meeting

The introductory process to COMMUNITY PARTICIPATION is designed to allow the individual and his or her family members to learn about the agency and the service being offered. It also provides an opportunity for staff to begin to learn about the

person's hopes and aspirations, skills and capabilities, as well as support requirements. The meeting may take place at the agency's offices, the individual's residence or any locations convenient to or preferred by the individual.

If a tour of some of the service delivery sites is desired and can be arranged to coincide with the introductory meeting, it may help the individual and his or her family get a better idea of what the service may look like when implemented. They may also get an opportunity to speak with individuals currently receiving service and their staff.

If after the introductory meeting the individual and his or her family member want to pursue an in-take into the program, a Participant Handbook with pertinent information and consent forms will be provided to them. The contents of the Handbook are listed below. The forms listed and **bolded** must be completed and returned to ABC Inc. at least five working days before any services may commence. Note for people already being supported by the agency many of these forms may be on file. Take this opportunity to ensure that they are present and up to date.

- A letter of introduction
- The service description, mission statement, and philosophy contained in this manual.
- A schedule that outlines the days and hours during which COMMUNITY PARTICIPATION operates.
- A calendar that outlines a schedule of holidays when COMMUNITY PARTICIPATION closes.
- Notification procedures for unexpected closing due to disaster or inclement weather.
- Contact information for key program staff
- A sample participant activity schedule.
- The ABC Inc. grievance procedure.
- An **ADMISSIONS INFORMATION ASSESSMENT** form
- **PHYSICIAN'S ORDERS** (for medication administration, special diets, etc. as applicable for the participant)

- **AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT**
- **MEDICAL CONSENT FORM**
- **COMMUNITY PARTICIPATION ACKNOWLEDGEMENT FORM**

Participants will not be admitted to the program without proper completion of all admission packet forms/documentation, and written authorization for billing by the funding source. All completed forms will be filed in the individual's record in a secure area. All information collected on each participant will be accessible to the individual, guardian and/or conservator, in accordance with the agency's policy.

C. Intake Meeting

The determination of needs for service and support are based, first and foremost, on the desires of the prospective participant. His or her family, other involved members of his or her circle of support who know the individual well and members of the intake team may contribute information and recommendations as needed or requested.

1. **Scheduling the meeting** - ABC Inc. COMMUNITY PARTICIPATION Community staff contact the prospective participant to plan for an intake meeting and to determine who should attend. While the prospective participant should make the final determination of who should be present, COMMUNITY PARTICIPATION staff members, the parent or guardian of the prospective participant, the support coordinator, and other significant service providers involved with the prospective participant are often invited to the intake meeting. The program director is responsible for advance notifications to participants.
2. **Observations in the community** - As much as is possible, referred individuals are observed by ABC Inc. Staff in either their home environments or other settings before the intake meeting. People often act very differently in different settings. Observing how an individual interacts with various environments can be helpful in the in-take process. This may occur in the introductory meeting if it takes place outside of the agency offices.
3. **Conducting the meeting** - At the intake meeting the following should occur:
 - An ABC Inc. Staff person should give the prospective participant a thorough description of COMMUNITY PARTICIPATION.
 - The prospective participant, parent, circle of support members, or residential provider should be given an opportunity to meet as many of the staff as possible at this meeting.

- Using the **POSITIVE PERSONAL PROFILE FORM**, the outcomes desired by the individual and how they will be achieved should be discussed. Note that this form will be more completely developed later and added to as the person has more experiences and information.
- Any questions or concerns about the participant's support needs and the level of support that can be provided to the participant should be discussed.
- A fall prevention risk assessment using the **FALL RISK ASSESSMENT TOOL** should be conducted.
- Opportunities for the prospective participant and his or her family to tour one or more COMMUNITY PARTICIPATION and training sites that have been identified as possible sites of interest will be offered and scheduled.
- All required consent forms will be collected (see list above).
- Staff will document all information relating to the participant and maintain minutes of the meeting, using the **CIRCLE OF SUPPORT MEETING SIGNATURE SHEET**.

4. Transportation

Though it may seem early in the process, transportation must be discussed before proceeding with the in-take. Clear responsibility for transportation to and from COMMUNITY PARTICIPATION must be established before an in-take is complete and the person can be accepted into this service. Note that transportation during service hours are the responsibility of the COMMUNITY PARTICIPATION provider.

D. Acceptance and Notification Process

- 1.) **Acceptance** - An internal decision on acceptance into COMMUNITY PARTICIPATION will be made in a meeting of the ABC Inc. team. The decision will be based on the referral information, any home and community assessments that have been made, and the interviews conducted during the intake process.
- 2.) **Rejection** – If the decision is that the participant will not be accepted, the original referral source will receive notification and the source's referral packet will be returned. The ABC Inc. referral routing and review documents along with other documentation indicating why the person was not accepted will be maintained on file in the state office along with the

notification letter.

- 3.) **Confirmation** - Upon receipt of the confirmation of the individual's desire to be served by ACME, the program director will send written notification to the participant, parent, and residential provider within five (5) working days after the ABC Inc. team has decided on acceptance or denial of placement. The letter will include a proposed start date. A copy of the notification will be sent to the individual's support coordinator.
- 4.) **Dual enrollment** - Individuals may take advantage of dual enrollment in ABC Inc. Services (i.e., supported employment and individualized day). A decision on acceptance into individual services will be made by ABC Inc. teams separately, though materials and process should be shared as much as possible.

C. Admission

Once the participant is accepted, the following steps will be taken:

1. **Start Date** - The individual and the ABC Inc. team will confirm the proposed start date.
2. **Preliminary Schedule** - The team will develop a preliminary schedule for the prospective participant. The participant will be contacted and given an opportunity to provide feedback on the proposed schedule before the start date. The preliminary schedule will be followed for thirty (30) days, during which time the staff will collect data on the individual's participation. Based on this data and the input of the person, a regular schedule will be developed to meet the person's individual goals as indicated in their individual support plan.

Copies of preliminary schedules will be provided to families and residential service providers and others as necessary.

3. **Accounting** - The program director will give the home office accounting department written notice of the participant's start date and pertinent information such as his or her Medicaid number.
4. **Records** - A record will be established for each person admitted. All completed forms must be placed in the participant's record (described

later) and kept secure.

D. 30-day Introductory period

During the initial 30 days of service, the individual and the staff will have an opportunity to assess the appropriateness of the service to meet the individual's needs and interests as well as their satisfaction with individuals and staff with whom they are paired. Participants who are dissatisfied with any aspect of their services may raise their concerns at any time. They will also have an opportunity to discuss their circumstances with their team at their thirty-day review meeting. Their trial period may be extended if necessary or discharge procedures may be initiated if the individual determines that the service will not need their needs. Recommendations made at thirty-day review meetings must be documented on the **CIRCLE OF SUPPORT MEETING SIGNATURE SHEET**.

III. DISCHARGE POLICY AND PROCEDURES

Circumstances may arise which cause the individual, his or her team, or ABC Inc. to evaluate whether ABC Inc. continues to be the best provider of service. In these instances, the criteria and procedures listed below will be followed. If the individual receives services from more than one ABC Inc. Service, the exit criteria will be applied separately.

A. Criteria for Discharge/Change of Provider

Participants may choose to change providers or be discharged from COMMUNITY PARTICIPATION under one or more of the following conditions:

1. The participant, guardian or parent wishes to discontinue participation.
2. The participant demonstrates sufficient improvement and no longer requires the service(s) that COMMUNITY PARTICIPATION provides.
3. The participant, because of medical or safety concerns, requires a more supportive environment than can be offered by COMMUNITY PARTICIPATION.
4. The individual's funding source terminates funding and no alternative funding can be identified.

B. Procedures for Discharge

1. **Team Meeting** - If continued provision of services to an individual is in question, the program director will coordinate a meeting of the team within fifteen (15) days after notification of the concern is received. Any member on the team may make a written request to the ABC Inc. Staff to hold a team meeting to discuss the concern, and assessments relative to the concern may be requested.
2. **Transition and discharge summary** - If a decision to change providers is reached, the team will determine a discharge date and develop a transition plan to a new provider for the individual. The transition plan will include recommendations for service and documentation needed by the receiving provider to ensure a continuation of appropriate services. The transition plan will be recorded on the **DISCHARGE SUMMARY** form which should be completed for each discharged consumer.
3. **Documentation** - The proceedings, concerns, and recommendations for all team meetings pertaining to the discharge of the participant must be on the **CIRCLE OF SUPPORT TEAM MEETING FORM**, which must be signed by each person on the team. This documentation must be placed in the participant's record.
4. **Service modifications** - If the team determines that the participant can continue to benefit from services by COMMUNITY PARTICIPATION if the services are modified and if these modifications can be accommodated by COMMUNITY PARTICIPATION, the team must set time lines for the service modifications and set a date for to review progress.
5. **Due Process** - If a participant who is being discharged begins a due process proceeding to challenge the basis of the discharge determination, ABC Inc. will maintain the individual's placement based upon the requirements delineated in the contractual agreement between ABC Inc. and the individual's funding agency, unless that agency provides for an alternative placement during the due process proceedings and the parent or guardian or funding agency agrees to the alternative placement.
6. **Emergency discharges** - The exception is an emergency situation in which the individual poses a direct threat to his or her own or others' health and safety. The individual may be suspended until the situation can be resolved. Alternative services may be provided, based on the requirements delineated in the contractual agreement between ABC Inc. and the funding agency.

PERSON CENTERED INDIVIDUALIZED SUPPORT PLANS

I. PHILOSOPHY

Developing and implementing person-centered, individualized, support plans are two of the most important aspects of ensuring the delivery of quality services to the adults that ABC Inc. supports. The individual being supported must be the driving force behind the development of his or her support plan. The family or guardian and other members of the person's circle of support may have significant involvement in the life of the participant and therefore, if the person chooses, should assist him or her in making choices that will affect the future. Though they may not be responsible for developing the final plan since that is the responsibility of support coordinators, the ABC Inc. team must ensure that the hopes and dreams of the individual are reflected in the outcomes that the individual's plan is designed to achieve. Although many individuals served by ABC Inc. may not be able express themselves in traditional ways, it is the belief of the agency that these individuals have goals they would like to accomplish to enhance their functioning and to achieve a better quality of life.

II. PURPOSE

The purpose of developing and implementing a support plan is to provide a guide for staff, participants, families or guardians, and the circle of support to follow in striving to meet the outcomes a participant has chosen. The plan also spells out strategies for achieving the participant's desired outcomes, the frequency with which services and supports are to be provided, and criteria for measuring the success of the service with respect to the individual.

III. INDIVIDUAL PLAN DEVELOPMENT

A. Person Centered Assessment

The team should assist individuals receiving COMMUNITY PARTICIPATION supports in identifying desired outcomes for this service based on the person's desired outcomes. An assigned COMMUNITY PARTICIPATION Program Specialist will be responsible for developing written goals and objectives based on those outcomes. These outcomes, goals and objectives will be presented by the individual at his or her annual planning meeting or at any juncture within the plan year at which the individual desires a change of plan. If he or she cannot speak for him or herself, an assigned staff will present the information on the individual's behalf.

- The team, led by the newly enrolled individual or his or her invited representatives

should develop an initial set of goals for the first 30 days of service, the introductory period. Staff will collect data during that time from which longer term goals and objectives can be developed for inclusion in the person's comprehensive service plan.

- The team, led by the individual must review each individual's outcomes at least once a year and develop new outcomes for the following year. The team is responsible for ensuring that appropriate assessments of the individual have been completed as needed or as required by the jurisdiction. This information should be used in the development of the individual's initial outcomes for the introductory period as well as for subsequent plans. Note that the PPP is one tool that can and should be used for this purpose. The PPP, which relies on interviews with the individual, and where appropriate, parents, guardians, circle of support members and professional staff who previously worked with the individual, as well as observations of ABC Inc. Staff, must be kept up-to-date to maintain its relevance. (See section on PPP below)
- The team reviews the strengths as well as service and support needs of the individual relative to his or her preferences and desires. Based on this review, assessments conducted by professional staff, and the results of those assessments, must be recorded in a written report, which becomes a part of the individual's plan. Certain assessments are required annually or on a prescribed schedule in some jurisdictions.
- An assessment of an individual may involve a variety of methods including observation, interviewing, and formal or informal testing procedures. The methods chosen should enable the team to view the individual in a variety of settings and should give the individual ample opportunity to exhibit the abilities he or she possesses.
- The assessment report must accurately reflect the individual's past and present skill level, in the area being assessed, and make recommendations to help the individual increase independence or achieve the desired outcome in this area. All reports must be clear and easily understood by everyone involved with development of the individual's plan.
- The final assessment report, with recommendations for goals, objectives, and strategies to meet the goals, must be legibly written. This assessment report must be ready for presentation at the individual's team meeting.

B. POSITIVE PERSONAL PROFILE Development

Positive Personal Profile (PPP) development is used to assist individuals with disabilities in planning for their future. The process includes collecting information from the individual and his or her family or guardian and circle of

support about the individual's likes, dislikes, personal history, interests, and support requirements. It also includes observations of the individual in various settings. The PPP should lead to identification of either a specific type of job that the individual would like, and that ABC Inc. will pursue on behalf of the individual, or a series of community experiences the individual would like to have in order to make choices about the future. In either case, the process should lead to concrete steps that the staff and other meeting participants will pursue to help the individual attain his or her personal goals.

C. Individualized Support Plans

The COMMUNITY PARTICIPATION staff are responsible for development and writing various components of the support plan. However, the program director is directly responsible for ensuring that each plan contains the following information:

1. A listing of hopes, dreams, aspirations and prioritized, measurable outcomes and priorities expressed by the individual through a person centered process.
2. An overview of the individual's present level of skill development and current support requirements to meet the individuals desired outcomes.
3. Goals designed to meet the desired outcomes expressed by the individual.
4. Short-term objectives to achieve the goals, along with how they are to be met and the criteria for assessing completion.
5. A schedule for monitoring progress and satisfaction of the individual in meeting his or her goals and desired outcomes.
6. A statement of the environment(s) in which the plan should be implemented.
7. A description of the supportive services the individual needs to achieve the outcomes expressed in the plan

For each of the goals identified in the plan, there must be clear supporting documentation. With each goal, the plan must include a task analysis or method of teaching and directions for collecting data. The program director or designee must train staff to implement the support plan and monitor results monthly, adjusting steps or directions as the individual's progress indicates

E. Plan Submission and Distribution

It is the responsibility of the program director to ensure the following:

- The plan is submitted in a proper and timely manner.
- The plan is distributed to all relevant parties.
- The plan is word processed, grammatically correct and jargon free.
- The plan reflects the interests and desires of the individual.
- The plan is consistent with the values, mission, and philosophy of ABC Inc.

Individual Support Plan Implementation

I. PURPOSE

It is the responsibility of COMMUNITY PARTICIPATION staff to provide a variety of supports to participants in community settings to ensure that the outcomes that he or she desires and have been incorporated in their person-centered plan are achieved.

The program director or designee will review these outcomes, goals and objectives developed and included in an individual's person centered support plan. Training on implementation of the new goal or objective will be provided to staff providing support to the individual.

Support from program directors, related services staff and other individuals designated by the program director will be given to direct support staff to ensure that services are being implemented per strategies recommended in the individual plans.

II. SERVICE ACTIVITIES

COMMUNITY PARTICIPATION and Training

COMMUNITY PARTICIPATION is intended to offer opportunities for participants to achieve their desired outcomes by learning new skills in integrated environments where they can also contribute to their communities. For some, skills learned in these environments may lead to the identification of work interests and acquisition of work skills. For others, individuals of retirement age for example, integration may be the desired outcome. In any event COMMUNITY PARTICIPATION, should be based on the results of the **POSITIVE PERSONAL PROFILE**, structured and meaningful to the individual.

III. Staff Recruitment, Training and Support

Staff roles and responsibilities - staff assist the people they support to build relationships with people in their communities and to help those communities become more welcoming places for everyone. Thus, they often have more direct contact with the public, a greater need to make independent decisions, and much greater role as advocates for individuals they support. They have increased responsibility as role models for appropriate community social interactions and serve as ambassadors for the

mission and vision of their agency. They are negotiators and educators who are highly trained and possess specialized skills associated with assisting the people they support. Most important, they must have the ability to provide support without being intrusive or unnecessarily intervening in the individual's activities and interactions with the public. They must do everything possible to avoid actions that single out or stigmatize the individuals are supporting.

Desirable Staff Qualities and characteristics

Self-directed and organized

Innovative

Strong personal work ethic

Good communication skills, including listening

Ability to engage and "draw out" others

Decision-making ability

Crisis management skills

Professional personal presentation

Ability to negotiate/compromise

Committed advocate

Able teaching and training in functional settings

Understanding of how to provide support from "behind the scenes"

Connected in his/her community

IV. Recruitment Strategies

The internet, networking, universities, identification from among current staff, referral from existing staff, job fairs, newspaper ads and other creative outlets should be used to recruit staff. NOTE: the wording of advertisements should be carefully considered and designed to attract staff that would be interested in community integration for people with disabilities.

Look for staff that has the correct attitude and understanding of the purpose of COMMUNITY PARTICIPATION and:

- Has knowledge and involvement in particular geographic areas
- Are involved in their community in their personal life, and have connections through family, friends, neighbors, others
- Has comfort with introducing people, facilitating conversation between people who don't know each other
- Expresses confidence with joining clubs, groups, associations, etc.

A note about former facility based staff

Many, many staff who have worked only in facility based programs previously have made the change to community based services and are some of the strongest advocates for community now. Some staff may not choose to make the change. That is fine as this job is

not for everyone. It is critical however, to make sure that staff does buy-in to the model to achieve the best possible outcomes for the individuals served.

Individuals involved in process

To the greatest degree possible, individuals will be involved in the recruitment process. They will attend interview sessions and participate in the selection of their staff.

Orientation and Training

Required training - all staff will complete the state and local required training to obtain and retain their positions.

Additional ABC Inc. training – all staff will complete ABC Inc. Required training to assist them to do their jobs at highest level of performance. Staff must complete required ABC Inc. training to obtain and maintain their positions.

Mission and values – in community based programs management will not always be immediately available to staff and may not see them every day as they would in a facility. It is essential to train staff to understand the agency’s mission and values and to instruct them to rely on them as they make independent decisions in the community.

Purpose of COMMUNITY PARTICIPATION and Staff’s Role in Provision – It is essential that staff gain a firm grasp on the purpose of COMMUNITY PARTICIPATION and the distinction between this service and others.

Community Ambassadorship, Negotiation and Compromise - the public may not be familiar with people with disabilities or may not see them as contributors to society. The way that changes is first through exposure and second through how the staff are interacting with and treating the people they support. Training provides emphasis on the importance of treating individuals with disabilities as competent, productive and valued people to show the way for others. The training also teaches the skills necessary to negotiate and compromise with others to ensure that the individual supported is afforded as much opportunity as possible in their respective communities.

Supporting from Behind the Scene – many staff need additional training to understand how to provide the appropriate level of support to individuals without over supporting and overshadowing them. Staff must be trained in strategies to put more control in the hands of the individuals and to step back and provide only the support necessary.

Cultural Competence – Individuals may come from many different backgrounds and have interests that correspond to their cultural background. Staff needs training on how to understand and respect these cultural differences as they pertain both to the individual supported but also to the activities in which the individual may choose to participate.

Employment First – All ABC Inc. Staff will receive training on Employment First. It will be particularly important for staff to understand the how COMMUNITY PARTICIPATION can be used to provide support to people who are currently working, those who would like to work in the future and those who are retiring from work life.

Specific interests, preferences and support needs of individuals – Staff need extensive training on the individual’s desired outcomes and support requirements. Some of this training may be through participation in the individual’s planning meetings and through record reviews but most this training should be through face to face “getting to know you” encounters between the staff and the person being supported.

V. AREAS OF IMPLEMENTATION

The two primary areas of service within COMMUNITY PARTICIPATION are community participation and training, and senior services. Methods will be developed to facilitate social interaction and interdependence between the individual and peers at community sites. Natural supports, that is, enlisting non-paid peer models to provide continued support to the individual as needed, will be incorporated wherever possible. These supports will be based on the needs of the individual and the motivation of peer models at the site. Written approval to participate in a natural support environment must be documented in the individual’s plan and approved by a parent or guardian and the individual’s funding source.

Scheduling

Creating Schedules – Schedules will be developed by the individuals and managers initially. Once individuals become comfortable with their staff and the staff gain competence in schedule development, they may be to this task, but always under the supervision of management in consideration of the following:

Matching Individuals - before schedules can be created, matches of individuals must be made. These matches should be made in consideration of the following:

- Matching interests and preferences using discussion with individuals, PPP and other information
- Relationship already established with another person
- Reside in close proximity and have similar interests
- Similarity in age, where pertinent
- Gender, where pertinent
- Support requirements

Matching to Staff – individuals must be matched with staff they prefer. All matches will

be made based on the expressed preferences of the persons served. If possible the match will be made with staff already known to and preferred by the individuals. If not, they will engage in a process of interviewing and selecting their staff whenever possible. Note that these selections must be reviewed frequently to ensure that are good matches. Individuals may request a change in staff at any time.

Staffing Plans – staffing plans must be developed before the commencement of services. Staffing plans indicate the staff that will be working routinely with the individual as well as those that may serve as substitute staff as needed. Note that a *contingency plan* that describes how day supports will be provided will also be developed to indicate how the services will be provided when back-up staff are unavailable.

Logistics – individuals may be picked up from their homes to commence the schedule. Alternatively, individuals may meet up with staff in a pre-determined location in the community prior to starting their day. Often the same location is used for ending the day and traveling home, but not always. These locations must be carefully selected as there can be some wait time as both individuals travel to the start location. The location should be safe, temperature controlled and have bathroom facilities and drinking water available.

Transportation - Most transportation both to and from home and during service hours will be by agency vehicle. When possible travel via public transportation is encouraged.

Individual Schedules – to include information as indicated above using a **WEEKLY SCHEDULE FORM**. Note that the schedules must include the location (name, address) at which the activity will take place; staff that will be supporting the individual, times that the activities will take place, transportation information (mode of travel with details, i.e. bus, subway, walk) and alternative activities in case a planned activity cannot be completed due to unforeseen circumstances.

Group schedules – once the individual schedules are developed they should be merged into a group schedule for ease of management by regular or substitute staff.

Distribution – individual schedules should be made available to the person, families or guardians, support coordinators and residential staff. Group schedules should not be shared if they contain identifying information for the people on the schedule.

Routineness – an important thing to keep in mind when creating schedules is that they should not be viewed as a long series of different things to do. Rather the schedules should include routine participation at some of the community volunteer and other activity sites. Without some routine attendance at locations it is difficult for people to develop relationships with others. Common interests and frequent contact is often the basis for friendship development

Temporary Schedule Changes – when an activity venue cannot be accessed for whatever reason, the staff is required to notify management immediately and indicate alternative plans.

Flexibility – Schedules will change daily and management and staff must adapt quickly. Everyone must be in good contact and remain flexible to maintain sound scheduling and re-scheduling as needed.

Changes - Activity schedules will be reviewed on an ongoing basis and revised accordingly to incorporate changes in an individual's schedule and/or activities. Monthly staff meetings will be one mechanism for this review and revision process, but daily contact between an individual and staff will also serve as an ongoing review procedure. As individuals request a change in activities, venues and/or staff, or as activities are identified that would be of interest to an individual, those requests will be conveyed to either the support staff working with the individual who will arrange for changes in the individual's schedule, or to management staff if the request is for a change of staff.

Volunteerism

Some individuals may choose to become involved with volunteer activities to become more involved in their communities. The individual must indicate that he or she is interested in volunteering and their agreement should be documented. Participation in volunteerism is a good way to provide the following opportunities:

- Observing and exploring by doing many kinds of work tasks and job options about which they may have been unaware
- Developing relationships with non-disabled peers
- Resume development
- Learning work and social skills in a functional environment
- Changing the public's perception of people with disabilities from "needing support" to being contributors to the community

It is imperative that volunteerism be undertaken in clear compliance with the Department of Labor's Fair Labor Standards Act as outlined below:

- The activities and training at the community site are based on the interests and desired outcomes for everyone as outlined in his or her plan and are for his or her benefit.
- The community volunteer sites utilized for training are at not-for-profit

agencies that are willing to accept and include individuals served by ACME.

- Although the activities and training are conducted at the community sites, they will be documented as they typically are in adult day programs, though preferably not in a stigmatizing manner.
- Participants do not displace regular employees at the sites. Participants will receive instruction from ABC Inc. Staff and will shadow the regular employees.
- The agencies providing sites derive no immediate advantage from the activities of the participants.
- Participants are not necessarily entitled to a job after the training period.
- The site and participants understand that the participants are not entitled to wages for the time spent in training.
- Transportation to and from the training site(s) can be arranged for the participants.

C. Senior Services

Some individuals who are past working age, normally 62 years of age and older, may choose to retire and/or prefer activities enjoyed by non-disabled senior citizens. Activities or locations are selected using the following criteria:

- If using a senior center, the senior citizen site is a traditional service that enrolls non-developmentally disabled seniors and is designed to meet the needs of the older adult.
- The site's personnel and clientele are willing to accept and include ABC Inc. seniors in the activities at the site.
- The ABC Inc. senior is interested in participating at the site.
- The transportation needs of the ABC Inc. senior can be met.

Examples of senior citizen sites are: classes for seniors sponsored by departments of recreation, services for seniors at local YMCAs or YWCAs, local nursing homes,

and senior day activity centers.

C. Other Community Activities

As indicated by their plans, individuals may participate in community activities that provide a variety of opportunities and allow them to enjoy community resources commonly used by non-disabled peers. Community support specialists ensure that community outings are appropriate by:

- selecting outings that are based on the individual's interest and support plan outcomes,
- training the individual in or near home so that he or she can build relationships with local community members, and
- maintaining a ratio of staff to individuals that ensures the safety and community acceptance of the individual (in some cases this ratio may be prescribed by the individual's funding agency).

Examples of community activities are visiting a museum or the zoo, getting a haircut, eating at a restaurant, purchasing clothing or food from a store, depositing or withdrawing money from a bank, swimming at the YMCA or YWCA, or attending an aerobics class. The program director will make available a community resource guide to assist staff in the selection of appropriate community outings.

VI. SITE DEVELOPMENT AND MAINTENANCE

The program director or designee is responsible for developing the COMMUNITY PARTICIPATION training and senior citizen sites. Community Mapping is an important first step in identifying community volunteer and activity sites in the local community.

Agencies selected must enter an agreement with COMMUNITY PARTICIPATION to allow participants to receive training and participate in activities in the same manner as non-disabled volunteers or seniors. The **ACTIVITY SITE AGREEMENT** sets the conditions under which the services are to operate. These forms are signed by both agencies participating in the project, and a copy of the agreement is to be kept by the program director or designee.

At least quarterly, the program director or designee will complete and document an **COMMUNITY PARTICIPATION SITE REVIEW FORM** (see Appendix B) with the

appropriate personnel at the site.

Daily Procedures

Staff meet individuals at predetermined drop-off location

Staff and individuals proceed to first site for the day

Staff and individuals break for lunch either at morning site, afternoon site or other identified location in the community with accessible bathrooms and drinking water

Staff and individuals proceed to afternoon activities

Staff and individuals return to morning drop-off location for pick-up

Staff complete daily notes as required.

Note:

Staff must report ANY change in the daily schedule to a supervisor immediately.

Supervisors or other staff designated to provide support to community operations MUST be

immediately available to travel to community locations as needed.

Supervisors or other designated staff must routinely visit community sites to ensure quality.

Supervisors must consult with volunteer or activity site contacts to gain feedback and ensure satisfaction for all.

Individual Support Plan Documentation and Monitoring

I. PHILOSOPHY

Careful documentation of the individual support plan will assist in measuring progress towards the desired outcomes and making appropriate revisions. The documentation is also essential in substantiating that the services promised in the plan were actually delivered. Staff have primary responsibility in the documentation.

II. PURPOSE

This section outlines procedures for documenting the implementation of each individual's support plan. The documentation relates to the outcomes, goals and strategies included in the individual's support plan. Each direct service professional is responsible for the documentation and implementation of objectives for individuals he or she supports. This responsibility includes:

- Documenting the results of plan implementation for each individual on data collection sheets,
- Communicating any changes in the individual's service needs or desires (i.e. skill attainment requiring activity or site change),
- Monitoring data collection to ensure that the data has been collected according to the schedule in the individual's support plan,
- Completing monthly progress notes,
- Submitting a monthly record of expenditures for the individuals served, whether agency funds are being used or the agency's funds,
- Completing daily logs and attendance sheets, and
- Ensuring that the individual has the materials, equipment and access to appropriate settings needed to achieve the outcomes and implement the objectives in the plan successfully.

V. DATA COLLECTION

Data is collected to determine, in an objective manner, whether an individual is making

progress toward reaching a desired outcome. In order for data to be useful it must be collected in a timely manner, with information about how, when, and by whom it was collected.

- A. **ATTENDANCE SHEET** – the individual’s daily participation in program activities is documented on either an individualized or congregate attendance sheet
- B. Some data is documented on **DATA COLLECTION SHEETS** (see Appendix B), which correspond to the individual's plan objectives. The type or frequency of required data collection is stipulated by the plan. In addition to recording the data on the data collection sheets, staff may be asked to summarize the data collected in any given period.
- C. Daily Log – a running narrative log that provides objective information about the individual’s activities, level of participation, incidental learning experiences and satisfaction with support provided.
- D. Another type of data collected is behavioral data that might be documented on an **ABC DATA SHEET** (see Appendix B). This data assists staff in identifying potential causes and patterns in behavior and will be the basis for developing strategies to address those behaviors.

IV. **QUARTERLY/ MONTHLY PROGRESS NOTES**

The overall progress of the individual will also be monitored and documented in a **QUARTERLY AND MONTHLY PROGRESS REPORT** (see Appendix B), as approved and required by each funding source. These reports are completed on a monthly and quarterly basis as required by the funding source and best practices. In general, the quarterly and monthly progress reports must include the outcomes, goals, objectives, criteria for achievement, progress made by the individual, supports and services provided by ABC Inc. and satisfaction during the period they cover. Criteria for writing both kinds of progress reports are determined by state, locale and ABC Inc. Administration. All participants must be afforded the respect and dignity commonly given to individuals in legal reports. Reports in all jurisdictions must be written in a positive manner that focuses on the strengths of the individual rather than the negatives. However, problems or concerns that do exist must be stated in a non-judgmental manner. Staff should review the report with the individual and get input from him or her regarding satisfaction with supports prior to submitting the report.

Updating the Positive Personal Profile – **Once the monthly or quarterly reports are written, the assigned staff should update the PPP with appropriate information. Note that as individuals engage in community experiences inevitably new information about their likes and dislikes and desired outcomes may surface.**

Once a progress report is written, the program director should review the report, discuss any concerns with the team and ensure that appropriate steps are taken (e.g. plan modification, team meeting, site change, **update of PPP**, etc.) to address the

concern.

The progress report must be filed in the individual's record in the appropriate location. Designated staff members ensure that a copy of the report goes to the individual's supports coordinator. The reports will guide the individual and their team in future planning.

When site changes are made, team members will provide continued support and technical assistance to ensure a smooth transition by the individual to the new site. Observations made by staff will be documented on the **CONSUMER OBSERVATION FORM** (see Appendix B). Observations should be made routinely.

V. **DAILY PROGRESS NOTES**

Daily documentation is maintained in the COMMUNITY PARTICIPATION program to verify both attendance and service provision for each day services are provided. The funding agencies have specific requirements with the agency must comply for both attendance and the daily logs.

- **DAILY PROGRESS NOTES** (see Appendix B) are used to document an individual's participation in scheduled activities, note issues of significance such as unexpected or unusual opportunities for inclusion in the community, holidays, late arrivals or delays, medical concerns, behavioral incidents, or personal accomplishments. It is the responsibility of the direct service professional assigned to each individual to complete the daily progress note at the close of each service day. The program director or designee will review this information during the monthly progress note review. The progress note will then be placed in the individual's record.
- Payment for some COMMUNITY PARTICIPATION services is contingent on specific and accurate recording of attendance, which makes an accurate account very critical. The assigned direct service professional is responsible for the individual participant's daily attendance information. This information is then submitted to the program director or designee for review.

Individuals' Records

I. GENERAL RECORDS

The individual's record is a confidential document containing essential information on each participant. Records must be maintained in accordance with the agency's policy and procedure on confidentiality. The contents of an individual's hardcopy record can be found by consulting the table of contents in the front of the record book, then looking at the corresponding tabbed section. If records are kept electronically, a guide will be developed for how to access information. Everyone's record will contain much of the following:

A. General Information - All the demographic and general information one might need in case of an emergency. This information is recorded on the Consumer Admission and Emergency Information form and this form is updated every time the information for the individual changes. Attached to this form is a photograph of the individual.

B. Medical Information -

- **Medication Administration Records** - All medications administered to the individual must be documented as given, whether administered by a nurse or by the staff (where permissible). This information is recorded on the **MEDICATION ADMINISTRATION RECORD** (see Appendix B).
- **Other Documents** – As required by local jurisdiction other forms such as the **SEIZURE RECORD, MEDICATION HISTORY, MONTHLY VITALS CHART** (weight, blood pressure, temperature, etc.)
- **Consent Forms** - Forms included in the Participant Handbook (see Appendix B for these forms) including:
 - Admission Information Assessment Form
 - Authorization for Emergency Medical Treatment
 - Medical Consent Form
 - COMMUNITY PARTICIPATION Acknowledgement Form

D. Current Support Plan - The original of the individual's plan and related documents. The plan clearly identifies desired outcomes, training goals and objectives, service areas, and other recommendations for the individual for the current year. Other components may include a behavior management plan or a nursing care plan if the team deems

them necessary. The related documents should include a sign-in sheet and any assessments done in preparation for the plan. The plan is also a good place to find additional demographic and historical information about the individual.

E. Progress Notes/Data Collection

- 1. Data Sheets** - As described in section I of the section entitled Individual Plan Documentation and Monitoring.
- 2. Progress Notes** - Information from the data sheets is summarized in a progress note on a daily, monthly or quarterly basis as described in section II of the section entitled Individual Plan Documentation and Monitoring. Some jurisdictions may require a semi-annual review as well. These progress notes should be completed by staff knowledgeable about the individual.

F. Attendance Sheets - As described in section III of the section entitled Individual Plan Documentation and Monitoring.

G. Correspondence - All correspondence relating to the individual.

H. Incident Reports - All incident reports for the preceding and current year (see Appendix A for information on incident reporting).

I. Referral/Intake/Admissions Package - All information received during the individual's referral, intake, and admissions process as described in the Referral, Intake, Admissions and Discharge section.

J. Discharge - All reports generated when the individual is discharged from COMMUNITY PARTICIPATION as described in the Referral, Intake, Admissions and Discharge section as well as ACME's policies and procedures governing human rights.

II. FILING

One individual should be designated by the program director to ensure that the records, whether hard copy or electronic, are properly maintained. For hard copy, the sections of each record will be clearly marked and will correspond to the table of contents so that filing and retrieving information is easy. Filing of electronic records will be done using a guide indicating where each document should be filed. The designated staff person shall review the record books for each individual at least semiannually. Random audits of the books shall occur at least annually by the program director or designee.

III. ARCHIVES

Information in the individual hardcopy record books is maintained to the current support plan year. While some historical documents are always maintained in the current hardcopy file, most of them (plans, data sheets, progress notes, etc.) are purged to a historical file. The historical files should be maintained in a separate binder, they should contain at least two years of records, and they should be maintained in the Program Specialist / Director's offices at all times. Those records older than three years should be stored in offsite locations for the required record maintenance period.

Electronic records should be maintained similarly, with older records stored electronically on discs or off site electronic storage.

QUALITY SYSTEMS

In an effort to improve the quality of services that it provides to individuals, ABC Inc. has developed an agency-wide series of tools and processes. They are listed below.

I. STAFF MEETINGS

ABC Inc. is committed to maintaining consistent and effective services to the individuals it serves. Therefore, the entire COMMUNITY PARTICIPATION staff are required to meet at least once a month as a general body during non-service hours. One month the meeting will focus on staff training and the alternate one will focus on issues pertaining to the service. Emergency meetings also may be convened at the discretion of the program director or senior manager. Staff should be provided an agenda at the beginning of each meeting. Minutes of the meeting should be recorded and distributed to all attendees within one (1) week.

In addition to the monthly meetings of the full staff, supervisors at every level must meet at least once a month with the teams they supervise. Minutes of these meetings should be taken and should be distributed to all attendees within one week.

II. IN-SERVICE TRAINING

ABC Inc. ensures that its staff members attend training required by the local funding agency as well as training that may be required by federal or local government agencies, such as the federal Occupational Safety and Health Administration (OSHA). Additionally, ABC Inc. requires that each staff person attend ABC Inc. sponsored training throughout each fiscal year. Each year, ABC Inc. conducts an assessment throughout the agency to determine training needs, develops a schedule of required training, and distributes it to all services throughout the agency. It is the responsibility of each program director to ensure that each employee meets the training requirements.

III. STAFF OBSERVATIONS

ABC Inc. is committed to ensuring that all employees are trained and supported to perform their duties in a manner that is reflective of the agency's philosophy, mission, core values, guiding principles, and business practices. As a result of ACME's commitment, each COMMUNITY PARTICIPATION supervisor conducts at least semi-annual observations of staff in the performance of their duties. These observations are conducted to ensure that staff who provide direct support to individuals have acquired the skills and competencies necessary to ensure that quality services are being provided.

All of the skills being observed are ones that have been taught in mandatory in-service training sessions before the observation takes place.

Following the observation session, supervisory staff will identify direct staff needs for support and address those needs in a proactive and positive manner. Staff observations are recorded by supervisory staff on the **STAFF OBSERVATION FORM** (see Appendix B). This form and a feedback session should be completed within forty-eight hours of the observation, or as soon as possible. The observation form is to be signed by both individuals at the feedback session. The original is maintained in the staff member's personnel file, and annual performance evaluations should incorporate information from these forms.

IV. Personnel Files Checklist

The **PERSONNEL FILES CHECKLIST** (see Appendix B) is used by the Human Resources Director or designee to ensure that all required documents are in the personnel files and are current. Program directors must audit personnel files at least quarterly on the basis of the checklist. ABC Inc. Staff is responsible for keeping required documentation current.

V. Individual Record Review

The **CONSUMER RECORD REVIEW** (see Appendix B) is a checklist for ensuring that all the items required in an individual participant's records are present and current. Any staff member may be asked to conduct an audit of individuals' files at any time as part of the overall quality assurance efforts of a service.

VI. Quality Team Review Process

ABC Inc. believes that quality assurance is the responsibility of all staff, not just management. To that end, the agency has developed a quality team review process. The process involves staff from all positions within the agency. Two types of reviews will be completed. The internal reviews will be completed once a year by a team of persons from COMMUNITY PARTICIPATION. External reviews will be completed by a team of persons from other service areas in the agency once per year. This serves several purposes including sharing responsibility, getting good ideas communicated across services, and getting the perspective of individuals who are "outside" the service being reviewed. The specific tools used in the review are listed below (see Appendix B for samples of these tools).

- **STAFF AND INDIVIDUAL INTERACTION OBSERVATION FORM** - A tool designed to

record observations of staff in their interactions with individuals to determine whether the interactions are reflective of the agency's values and philosophy.

- **INDIVIDUAL RECORD CONTENTS CHECKLIST** - A tool designed to review an individual's record to determine the record's consistency with the values and philosophy of the agency.
- **STAFF INTERVIEW GUIDE** - A tool to record information from interviews with staff to gain their perspective on the quality of the services being provided to the individual.
- **CONSUMER INTERVIEW GUIDE** - A tool to record information from interviews with individuals to gain their perspective on the quality of the services being provided to them by ACME.

The information from the quality team review will be compiled by the team members and shared with the staff of the service being reviewed. The reviewed staff will take the information as guidance to improve the quality of the services they are providing.

APPENDIX A

OPERATIONAL PROCEDURES

EMERGENCY PROCEDURES FOR COMMUNITY-BASED TRAINING

The COMMUNITY PARTICIPATION office will have on file information about the scheduling of each individual in the community, including the telephone number of the site, such as a volunteer site or community class, where the individual's instruction takes place, and bus schedules with route maps. The COMMUNITY PARTICIPATION office also will have emergency information pertaining to the individual, including phone numbers, medical information, family doctor's name, home address and phone number, and the individual's picture, physical description, and mode of communication. Some services may have additional emergency procedures for community-based training.

All community support specialists traveling in the community will carry an hard copy emergency information sheet on each individual they are accompanying. This sheet includes telephone numbers, medical problems, allergies, and medications relevant to the individual. The direct service professional will also be required to have a charged, working cell phone, first aid supplies such as band-aids and antiseptic, and key phone numbers.

Each individual participant traveling in the community will have on their person an official ID card with emergency telephone numbers (home, office, etc.), a medical alert identifying allergies or seizures, and a bus pass, if appropriate.

Before going into the community with an individual, the program director of designee will ensure the direct service professional have schedules that includes specific time frames for activities to occur, locations where activities will take place to include address and contact information, travel plans (modes, approximate amount of time), and alternative activities in case the schedule cannot be carried out as planned.

Procedures for Medical Emergencies in the Community

Community support specialists will determine the nature and severity of an injury before they request medical assistance. Minor cuts and scratches do not require immediate medical attention. If medical assistance is required, the following procedures should be followed:

1. If two staff members are present, one will remain with the individuals while the other calls 911.
2. If only one staff member is present, he or she will enlist the assistance of the store clerk or a passerby to call 911.
3. When the 911 call is answered, the person calling should give the consumer's location along with the nature and severity of the injury.
4. Staff will then notify the program director, or any administrative staff. Staff will then notify any other identified personnel as applicable.
5. If two staff members are present, one will remain with the rest of the individuals while the other accompanies the injured or ill individual in the ambulance. If only one staff person is present, he or she should remain with the other individuals and send the injured individual alone in the ambulance.
6. The program director or designee will report to the scene or to the hospital.
7. The parent, guardian, or other appropriate contact of the injured or ill person will be contacted by the program director.
8. The staff persons involved will complete a detailed **INCIDENT REPORT** (see Appendix B) and other relevant forms and submit the same to the program director or designee before the end of the shift.

Procedures for Locating Individuals Lost In the Community

1. If two staff members are present, one will remain with the group while the other staff member searches the immediate areas.
2. If only one staff member is present, the individuals and staff member should search the immediate area. The staff member should never leave the other individuals alone while searching for the lost individual.
3. If the business or site has a security team, they should be requested to assist in the search. It is vital for the staff member to provide an accurate description of the individual and to describe the location in which the individual was last seen.
4. If a search does not locate the individual within fifteen minutes, the staff member should contact the program director or designee and give specifics including the time it was noticed that the person was lost, the location where the person was last seen, and an accurate description of the individual, and a phone number where the staff member may be reached.
5. The program director will call 911 if the individual still has not returned to the service. The program director will give an accurate description of the individual (sex, age, height, weight, etc.), inform authorities that the individual has a disabling condition, share the location where the person was last seen and give the appropriate phone number and address for follow-up contact.
6. The program director should immediately contact the missing individual's parent or guardian and assure that person that all steps are being followed to locate the individual.
7. If an individual is lost after hours, the program director or designee should provide the home phone number and address of the individual to authorities. If an individual is lost on public transportation, the program director or designee should call the transit office and request assistance in contacting the bus or subway operator to inquire if the individual is still on the bus or subway or where he or she was last seen.

INCIDENT REPORTING

ABC Inc. has a written policy and procedures for the documentation of any unusual incidents that affect the individual participant, the staff, or the property of the agency. These incident reports will serve to notify and inform the administration and provide documentation for subsequent review and investigation of the incident. All incidents must be reported using the standardized ABC Inc. Incident Report Form.

An incident is defined as any occurrence that has a significant impact on individuals, staff, or property and is significantly different from the normal routine. The incident may occur at either a ABC Inc. facility or a community site. Incidents include injury to an individual participant; unusual or severe aggression, highly disruptive or threatening behavior, unauthorized absence on the part of an individual participant, injury or accident involving an employee, visitor, or community member; medication errors; theft; fire; bomb threat; destruction of personal, agency, or community site property; or suspension, banishment, or dismissal of individual participants or staff from any public setting such as work sites or volunteer sites.

Incident Report Forms are to be completed and submitted to the staff person's supervisor by the end of the shift of the reporting staff person on which the incident occurred. Incident reports are to be filled out by *all* staff present at the incident and by any other relevant witnesses. Incidents reports should be completed and forwarded to all parties as mandated by each funding and state regulatory agent.

If the incident constitutes an emergency, it should be reported immediately. An emergency is defined as a situation posing a threat to an individual's health, safety, life or well-being. All other reportable incidents should be reported the next working day. The original incident report should be submitted to the program director within twenty-four hours of the incident.

PROCEDURES FOR INCLEMENT WEATHER

The program director and the executive director are the only individuals who can close or delay the opening of COMMUNITY PARTICIPATION Services. The program director should monitor local weather reports for any snow closing information, and if the service will be closed, all staff should be notified by phone, using a designated method (phone, text, email) designed to alert them.

If the service will be closed for snow, the program director or designee should notify all impacted services such as residential and transportation companies that the individuals will not need to be transported that day.

In the event that the program director decides to close any day service community training site, he or she will designate a staff person to inform the community training site contact person that ABC Inc.' individuals will not be in attendance for that day. In no event, should ABC Inc. Staff fail to contact a training site when the individuals will not be present for the day.

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This manual is one of several resources that will be used to assure that we are providing services in accordance with ABC Inc. and other agency standards. Copies of these standards should be available for your reference. The program director or their designee will provide an overview of these standards and will ensure that all staff are aware of how to access them. The following is a brief description of some of the standards to which we are held accountable:

ABC Inc. Agency Wide Policy and Procedures - Standards adopted by the agency, which are applicable to all services, consumers and staff.

ABC Inc. Personnel Policy and Procedures - Standards adopted by the agency which are applicable to all agency employees and contracted personnel.

Service Regulations - Funding sources and referring agencies often have regulations to which providers like ABC Inc. must adhere to maintain good standing with those agencies. Examples of these regulations include Medicaid Waiver Regulations and state and county procedures manuals.

Should you not be able to locate these reference materials in your work environment please notify your program director so that they can be made available.

APPENDIX B

BLANK AND COMPLETED SAMPLES OF FORMS

LIST OF FORMS

REFERRAL ROUTING SHEET
REFERRAL RECORD REVIEW FORM
TEAM MEETING SIGNATURE SHEET
CONSUMER ADMISSION AND EMERGENCY INFORMATION FORM
AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT
MEDICAL CONSENT FORM
PRODUCTION RELEASE
COMMUNITY PARTICIPATION ACKNOWLEDGEMENT FORM
VENDOR CHOICE FORM
CONSUMER HEALTH CERTIFICATE
DISCHARGE SUMMARY
VOCATIONAL PROFILE
ISP DEVELOPMENT CHECKLIST
INDIVIDUAL SERVICE PLAN
WEEKLY SCHEDULE FORM
ACTIVITY SITE AGREEMENT
SITE REVIEW FORM
ATTENDANCE SHEET
DATA COLLECTION SHEET
ABC DATA COLLECTION SHEET
MONTHLY/QUARTERLY PROGRESS NOTE
CONSUMER OBSERVATION FORM
DAILY PROGRESS NOTE
MEDICATION ADMINISTRATION RECORD
SEIZURE RECORD
MEDICATION HISTORY
MONTHLY VITALS RECORD
STAFF OBSERVATION FORM
PERSONNEL FILE CHECKLIST
CONSUMER RECORD REVIEW
STAFF/INDIVIDUAL INTERACTION OBSERVATION FORM
INDIVIDUAL RECORDS CONTENT CHECKLIST
STAFF INTERVIEW GUIDE
CONSUMER INTERVIEW GUIDE
INCIDENT REPORT
LOST CONSUMER CHECKLIST - ADMINISTRATION
LOST CONSUMER CHECKLIST - STAFF

APPENDIX C

ADDITIONAL RESOURCES

Philosophical Concepts

Normalization: The principle of *normalization* holds that persons with intellectual or developmental disabilities should be supported in leading lives that by daily routine, opportunities, expectations and treatment are as *culturally* and *age appropriate* as possible. People with intellectual or developmental disabilities are an extremely heterogeneous group whose diverse needs, interests and abilities are *more like* their non-disabled peers than different. Adults with intellectual or developmental disabilities who are supported in participating in age appropriate activities, which are *routine and valued* in the community in which they reside, are perceived in a positive manner.

Dignity of Risk: Dignity of risk describes the opportunities to experience the risks associated with ordinary life, which are necessary for personal growth and development. It is a concept that must be applied with care and support, based on each personal needs and interests. Staff will have the responsibility to facilitate the development of informed decision-making skills and provide supports that allow individuals to take reasonable risks and make decisions.

Community Presence and Participation: All people with developmental disabilities belong in the community - in the same schools, neighborhoods, stores and jobs where other people are usually found. Without focused effort people with severe disabilities will be separated from everyday settings by segregated facilities, activities and schedules. Partial participation is preferred to a lack of genuine involvement. It is a concept that refers to structuring a task or an activity to allow an individual with disabilities to participate to the fullest extent that is *individually* possible. Both persons with disabilities and their peers without disabilities are more enriched by the challenges and opportunities of supportive coexistence and cultural/human diversity.

Nonrestrictive Alternatives: Individuals with intellectual or developmental disabilities increase their opportunities for expressing themselves, achieving goals, and making choices when they live and work in environments that promote respect for their rights as human beings. Nonrestrictive programming is based upon supporting people in natural settings or with families by identifying and providing flexible, individualized supports. Individualized training is most effective when provided in natural community settings, e.g. grocery store, Laundromat city bus, etc. Any service that an individual requires should be through the generic services non-disabled persons use, e.g., family doctor, dentist, and barber.

Natural Supports: This concept, which is closely tied to non-restrictive programming, is the use of natural supports available within community settings. It is the responsibility of staff to identify and devise flexible and individualized ways of providing services to people in community settings that makes use of the supports which are naturally available -- family, friends, coworkers, neighbors. Rather than replacing these people with paid staff, strategies should be developed to support and maintain these relationships.

Personal Individual Choice: The design and development of individual plans of service, program operation, staffing patterns, and especially, *daily actions taken by direct care staff* must always be guided by the goal of providing people with opportunities to make choices, both immediate and long term. It is the responsibility of staff to provide the person with opportunities to experience choice and the tools to express it.

Respect: Adults with intellectual or developmental disabilities, as all people, are perceived in a positive light when they are in a position to contribute to the community. Lack of exposure to persons with disabilities and the accompanying misconceptions that abound often restrict people with disabilities opportunities to assume valued roles in the community. People with disabilities can achieve the respect of others by getting the chance to perform functional and meaningful activities, with individualized assistance as needed.

Individual Rights: People with intellectual or developmental disabilities have the same human rights as non-disabled people. Like all citizens, they are entitled to enjoy the right to privacy, to marry, to free speech, to live in a neighborhood of their choice, to vote. Staff have the obligation to read and uphold the provisions of all agency policies and procedures and local Human Rights standards addressing the protection of the individual rights of individuals.

Zero Reject: Zero reject is the concept that all people with developmental disabilities belong in the community. Regardless of the severity of an individual's disability or challenging behaviors, it is possible to develop flexible, individualized supports. It is the responsibility of the service and the staff to develop strategies to meet individual needs and to assist them in acquiring skills or modifying their behaviors.