



Staff Orientation Record: Person-Specific

Employee name: Jake Sanderson

Supervisor name: Hunter Guerue

Date: 3/14/25

Program name: BrightPath LLC. Home & Community-Based Services

Before having unsupervised direct contact with persons served or for whom the staff has not previously provided direct support or any time these plans or procedures are revised, staff must review and receive instruction in the following areas as they relate to the staff's job functions for that person. **Complete this form for all persons served to whom the staff person will be providing direct contact services.**

Staff will review the Support Plan, Support Plan Addendum, Self-Management Assessment, and Individual Abuse Prevention Plan at orientation and ongoing as plans are updated. Staff will review to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans. Include outcomes, behavior plans, and any document specific to the person. Other topics, as determined necessary according to the person's Service and Support Plan or identified by the company, will be outlined as needed.

Person Served: Keith Johnson

Support Plan-Addendum (SPA)

*Please review all service outcomes for the individual and state the purpose of the outcome and **one** thing you, as staff, need to do to assist them with the outcome effectively.*

<u>Outcome 1:</u> Household Management: Support in doing some light household cleaning, reorganizing his apartment, and going through his mail / assistance with any important paperwork.
<u>Outcome 2:</u> Health, Safety & Wellness: Support in staying healthy by going for walks and getting out in nice weather to enjoy fresh air. Keith enjoys bird watching and walking near the rivers in St Paul.
<u>Outcome 3:</u> Community Participation: Support in accessing the community for personal errands, grocery shopping, and attending fun community events. Keith enjoys getting coffee with staff and talking over card games or listening to music in the community

Does this person have a rights restriction in place to provide for their health/safety?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain briefly:
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Can this person use dangerous items or equipment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain briefly:
Does this individual require you to use permitted actions/procedures to assist them with daily routines/activities or restraint to position them due to a physical disability?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain briefly:

Self-Management Assessment (SMA)

The information presented within a Self-Management Assessment must describe the person’s overall strengths, functional skills and abilities, and behaviors or symptoms. The assessment information provides the basis for identifying and developing supports and methods to be implemented to support the accomplishment of outcomes related to acquiring, retaining, or improving skills.

Assessment Area	Does the person need/want support?	If yes, how should you provide support?
Allergies:	No	
Seizures:	No	
Chronic Medical Conditions	Yes	Diabetes: Keith is independent in monitoring and administering his diabetes medication
Risk of falling (state-specific need):	Yes	Staff will monitor Keith during in-person meetings to assure he is stable on his feet, Keith will use walker when needed
Mobility issues (include specific issues):	No	
Community survival skill:	No	
Water safety skills:	No	
Self-injurious behavior (state behavior):	No	
Property destruction (state behavior):	Yes	Painting walls, kicking/punching walls, breaking glass
Suicidal ideation, thoughts, or	No	



attempts:		
Mental or emotional health symptoms and crises (state diagnosis):	Yes	TBI, schizoeffective psychosis, bipolar disorder, major depressive disorder, alcohol dependence

Individual Abuse Prevention Plan (IAPP)

The plan shall include a statement of measures that will be taken to minimize the risk of abuse to the vulnerable adult when the individual assessment required in section 626.557, subdivision 14, paragraph (b), indicates the need for measures in addition to the specific measures identified in the program abuse prevention plan. The measures shall include the specific actions the program will take to minimize the risk of abuse within the scope of the licensed services and will identify referrals made when the vulnerable adult is susceptible to abuse outside the scope or control of the licensed services. When the assessment indicates that the vulnerable adult does not need specific risk reduction measures in addition to those identified in the program abuse prevention plan, the individual abuse prevention plan shall document this determination.

Sexual Abuse		
Is the individual susceptible to abuse in this area?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, how will you minimize the risk of abuse?		
Physical Abuse		
Is the individual susceptible to abuse in this area?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, how will you minimize the risk of abuse?		
Reminding Keith not to let people into his home without knowing who they are first, being careful to not allow drug use in his home, staying off the streets.		
Self-Abuse		
Is the individual susceptible to abuse in this area?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, how will you minimize the risk of abuse?		
ARFID diagnosis: Staff will assist in giving meal reminders and checking in about her food consumption throughout their meetings. Anja has scheduled meal times for her ARFID and staff should help her stay		



adherent to these.

Financial Exploitation

Is the individual susceptible to abuse in this area?

X Yes

X No

If yes, how will you minimize the risk of financial exploitation?

Making sure to remind Keith of the location of his bank card and Snap card, reminding him to not lend out his card to anyone.

Positive Support Strategies

When this individual is frustrated, they can express it in these ways: Rapid speech and body movements, raised voice, swearing.

Supporting this individual in these ways will help them feel **less** frustrated: Give space, talk calmly, do not argue and validate feelings

Supporting this individual in these ways will make them feel **more** frustrated: Talking down, redirecting with concrete direction, telling Keith what to do