Program Abuse Prevention Plan

Program:	Heartland Industries of Dawson Inc.
Addresses:	2510 16th Ave S Moorhead, MN 2600 16th Ave S Suite A Moorhead, MN
Date plan developed:	Reviewed: 1-1-2014, 1-28-2015, 2-2-2016, 1-25-2017, 2-2-2018, 01-22-2019 2-3-2020 1.18.2021

POPULATION ASSESSMENT:

1. *Age range of persons receiving services:* 18-100
2. *How will the program reduce the potential of abuse and/or harm to people related to the age of people receiving services?* Agency staff provides in-depth training regarding policies such as reporting of maltreatment of vulnerable adults. We also have trained staff to intervene when necessary to protect and or reduce the potential chance of abuse and or harm to people related (18 years of age or older) in our program. Staff ratios are set up according to needs of each recipient (CSSP Addendum, Self-Management Assessment, and Individual Abuse Prevention Plan). When written, staff will be within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. Each recipient has an individual abuse prevention plan in place to reduce the potential of abuse and or harm. In order to reduce potential abuse between younger and older adults we will keep staffing levels consistent and present. Staff are trained in Maltreatment of Minors and Maltreatment of Vulnerable Adults and know the steps to take to prevent abuse and take corrective action and report immediately if witnessed.
3. *Gender of persons receiving services:* Male and female
4. *How will the program reduce the potential of abuse and/or harm to people related to the gender of people receiving services?* Agency staff will train to perform personal cares on individuals who genders relate (example of this females, will complete female cares) when possible or requested. Staff ratios are set up according to needs of each recipient. When written staff will be within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm. Each staff is individually trained to care for each person they serve. Training on appropriate boundaries is provided. Staff are trained in Maltreatment of Minors and Maltreatment of Vulnerable Adults and know the steps to take to prevent abuse and take corrective action and report immediately if witnessed.
5. *Describe the range of mental functioning of persons receiving services:* Staff are equipped and trained to assist and provide Job Coaching to a wide variety of mental functioning individuals such as but not limited to: Traumatic Brain Injury, Mild to Severe Mental Retardation, Epilepsy, Autism, Bi-Polar, ADHD, Type 2 Diabetes, Major Depressive Disorder-recurrent, Avoidant features, Scoliosis, Club Feet, Cerebral Palsy, Sleep Disorder, OCD, Schizophrenia Paranoid Type, Anxiety Disorder, Arthritis, Expressive aphasia, Disruptive Behavior Disorder, Antisocial Personality Disorder, Cerebral Palsy w/ right Hemiparesis, Visual impairment, Schizoaffective Disorder, and Antisocial personality disorder.
6. *How will the program reduce the potential of abuse and/or harm to people related to the mental functioning of people receiving services?* Our agencies program is organized into two to one or one on one support systems/ratios for those that pose an imminent risk to others to reduce the likelihood of harm to others and to increase community placement. We may also ask for an intensity change if imminent harm is likely. Recipients with higher staffing ratios may have a similar mental functioning in our program too. Our agencies schedules people according to their likes and dislikes which sometimes means that similar mental functioning groups are paired together if they would make a good team to get the job completed to standard or for recreational purposes. This could be for example in a one to four ratio or a one to two ratio or higher or lower depending on their needs. Staff to recipient ratio is the average daily ratio according to the standards of the RMS (unless otherwise noted in the CSSP Addendum, Self-Management Assessment, or Individual Abuse Prevention Plan). When written staff will be within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm.
7. *Describe the range of physical and emotional health of people receiving services*: We provide service to recipients that have a wide range of physical needs such as uncontrolled Epilepsy, Paranoid Schizophrenia, Depression, Autism, Cerebral Palsy, Blind, Chronic Residual Schizophrenia, Schizoaffective Disorder, ADHD, Impulse control, Reactive Attachment Disorder. We have people in our agencies that have a wide range of physical needs such as being wheelchair bound, people with walkers or canes to people that have no concerns with ambulating. This range of emotional differences seems to change distinctly from one person to another. This is why all staff are trained on client specifics prior to working with a particular population to ensure they are competent.
8. *How will the program reduce the potential of abuse and/or harm to people related to the physical and emotional health of people receiving services served?* Our agency has developed in-depth training tools for staff to better understand how they can help reduce the potential of abuse and or harm to people in our agency by applying the steps and processes that have been identified by expanded support teams to care those who way act out emotionally and physically. We have also employed a Positive Support Transition Plan to help those with physical outburst or previously had Rule 40's. Staff ratios are set up according to needs of each recipient (unless otherwise noted in the CSSP Addendum,

Self-Management Assessment, and Individual Abuse Prevention Plans). When written staff will be within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm. Additionally, staff are trained annually in how to respond to seizures, and recipient specific training on all recipients in the program.

9. *Describe the range of adaptive/maladaptive behavior(s) of people receiving services:* We have a wide range of maladaptive behaviors such as but not limited to: Verbal abuse, Physical aggression, Object aggression and Self-abuse. Adaptive Behavior includes the age-appropriate behaviors necessary for people to live independently and to function safely and appropriately in daily life. Adaptive behaviors could include real life skills such as grooming, dressing, safely safe food handling, school rules, ability to work, money management, cleaning, making friends, social skills and personal responsibility etc. Maladaptive behavior is a type of behavior that is often used to reduce one's anxiety, but the result is dysfunctional and non-productive. These behaviors can include but are not limited to: Verbal aggressions include swearing, threats toward others, yelling, swearing, and screaming in a high-pitched tone. Physical aggressions include hitting, pinching, kicking, scratching, hair pulling, use of insulin needles as weapons, slapping, tapping others when upset, biting or any other attempt to cause harm to another person or self. Property Destruction: Any attempt or actual misuse of property by either throwing, picking up or trying threatening another with this object. This could include: Clearing tables, pushing things, chairs, and trash cans, books, ripping items, and slamming doors. Wandering/AWOL: Exiting the building without staff supervision or wandering away from staff while outside the community, leaving the building without checking in with staff, leaving in an angry state. It could be going to other areas of buildings, agitating others. Noncompliance: Refusing to work on set goals after being asked to complete them, or refusing to complete his/her shower every day after being asked to complete the task. Rudeness to staff/peers swearing, yelling at staff when upset about rules, or a decision that has been made, talking badly about people when they are not present, Crying: visibly upset for reasons of sadness, not out of anger or because the recipient didn't get something they wanted when it was not possible, Withdrawal : Withdrawing or isolating to room in excess for reasons other than for resting, having quiet time, reports of sadness.
10. *How will the program reduce the potential of abuse and/or harm to people related to the adaptive/maladaptive behavior(s) of the people receiving services served?* Client specific training is required for all new staff and as program plans change additional client specific training takes place. In addition, staff ratios are set up according to needs of each recipient (unless otherwise noted in the CSSP Addendum, Self-Management Assessment, and Individual Abuse Prevention Plans). When written, staff will be within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. All staff are trained in protocol of what to do if challenging behavior were to occur annually (Crisis Prevention Intervention Model). We offer different staffing ratios that relate to the needs and services that we provide upon admission and as needed after that if an individual has a higher frequency of maladaptive behaviors that are outlined and not easily redirected, we may need to staff at a one to one ratio or two to one to minimize and reduce the potential risk of abuse and or harm to people in our program. Staff persons are on the premises when individuals are present. Staff and this individual work together to try to keep a calm environment, to request one item at a time. Staff will respect their service recipients to seek out a quiet area. If an individual does elope, staff persons will follow them, if possible. If not possible, then staff will call 911 first and then a call supervisor to provide further assistance. Each recipient has specific interactions that are agreed by their expanded support team. Staff will be trained in the programming and specific interventions needed per recipient. Staff will also have training that is consistent with behavior programming and the policy of emergency use of manual restraint. Some may be redirected to a task, redirection to a preferred activity, non-verbal redirection, etc. Staff has been trained on the maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent it abuse, take corrective action, and immediately report maltreatment if witnessed.
11. *Describe the need for specialized programs of care for people receiving services:* This will be different and customized to seek out what each person really needs and wants to keep and maintain meaningful employment or increase socialization and community integration. All recipients we serve will go through Person Centered Programming by being interviewed and asked what is IMPORTANT TO them and what is IMPORTANT FOR them to succeed in our program. Any specialized program for the individuals we serve will be trained by competent individuals in the area of the service needed. This program may need special programs in staff blending/chopping food as needed, proper portion when serving food, insulin competency conducted and trained by our agency Registered Nurse, behavior programming, ignore and redirect programming1g, PT and OT, and sensory programs.
12. *How will the program reduce the potential of abuse and/or harm to people related to the need for specialized programs of care for people receiving services?* The Person-Centered Programming will ensure that each recipient is receiving services that they desire according to what is important to them as well as what is necessary to keep them healthy and safe. Staff to recipient ratio is the average daily ratio according to the standards of the RMS. In addition, staff ratios are set up according to needs of each recipient. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm. Staff persons are on the premises when individuals are present. Staff persons have been trained on their responsibilities to address each individual's physical and emotional health; seizure disorders, medication, administration, mental illness, allergies, first aid, CPR, diet per consumer, PT and OT

programming. Staff have been trained on the Maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent abuse, take corrective action and immediately report maltreatment.

13. *Describe the need for specific staff training to meet individual service needs:* Staff will be trained in normal individual service needs and anything that should come up that is not within the CSSP Addendum, Self-Management Assessment, and Individual Abuse Prevention Plan immediately as needed. Staff will also be trained in behavior programming (Functional Behavioral Assessment) specific to the high needs of the individuals. This program will ensure that all staff are trained and will be competent in all service needs individually. Based upon the assessed areas already mentioned and training staff in the items required by MN Statures, Chapter 245D or 245A, there is not an additional staff training need.
14. *How will the program reduce the potential of abuse and/or harm to people related to the need for specific staff training designed to meet individual service needs?* Staff persons are trained in the items required by MN Statutes, Chapter 245D or 245A, including their staff responsibilities and duties. Staff persons have been trained on their responsibilities to address each individual's physical and emotional health; seizure disorder, medication administration, insulin dependent, mental illness, allergies, first aid, CPR, and Individual Abuse Prevention Plans. Staff has been trained on the Maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent abuse, take corrective action, and immediately report maltreatment.
15. *Describe any knowledge of previous abuse that is relevant to minimizing the risk of abuse to people receiving services:* There is no knowledge of previous abuse.
16. *How will the program reduce the potential of abuse and/or harm to people related to the knowledge of previous abuse?* There is no knowledge of previous abuse.

PHYSICAL FACILITY ASSESSMENT:

1. *Describe the condition and design of the facility as it relates to safety for the people receiving services:* Moorhead Heartland is in a commercial setting of Moorhead called the Industrial Park and is handicapped accessible. The design of the building is long and narrow with 6 entrances or ways to get in or out of the building. The building is divided into three main rooms where staff have direct supervision over participants. We have two rooms by the South bathrooms. One room is designated for charting and maintenance for staff and the other is for participants needs. We have a kitchen that is also located on the South side of the building and a staff break room that is located on the North side of the building that is locked at all times for safety reasons by a key combination. We also have door alarms that can be activated by an on and off switch on our exterior front doors (2) if needed. All doorways are widened to accommodate wheelchairs. They meet fire and state building codes. All supplies are kept in locked areas. No toxic substances or dangerous items are accessible to persons we serve. If recipient should use cleaning supplies for room and housekeeping skills staff will monitor them. Employees and recipient are informed of their right to know concerning safety in use of cleaning agents as part of orientation. Any areas needing maintenance will be reported and addressed by all staff. When necessary a maintenance concern will be written in the maintenance book and the maintenance personnel or contractor will repair. All staff completes daily cleaning too. The sites should always be kept clean and staff work together to do this. Medications are also always locked up for the protection of the recipient. Written plans for emergencies caused by fire or tornadoes are posted by the exit signs are within visual range of participants and staff for safety reasons. We hold at least four practice fire/tornado drills a year to prepare participants and staff for severe weather or fire at both facilities. Documentation of time, date and success of the drills are maintained. Staff continue to scan and keep the work area free from debris, loose plaster, peeling paint, and or litter. Rugs are replaced weekly by an outside agency to keep the work environment clean. We also have video surveillance to help supervise at all times.
2. *How will the program reduce the potential of abuse and/or harm to people related to the condition and design of the facility in terms of safety for people receiving services?* Staff ratios are set up according to needs of each recipient. When written, staff are always within visual and or auditory range of recipients in order to reduce the risk of abuse and or harm. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm.
3. *Describe any areas of the facility that are difficult to supervise:* We have two rooms by the South bathrooms that could be difficult to supervise when occupied (kick stands have been secured to the doors to keep them open if staff need to intervene for safety and health reasons). One room is designated for charting and maintenance for staff and the other is for participants needs. Staff are aware of these rooms and will keep the doors open so they can keep their participants in visual contact periodically to ensure their safety when they want to use these rooms at their leisure. The restroom will be an area that staff will not be able to supervise if the recipient is independent in the restroom. The recipient has alone time in the restroom.
4. *Describe the type of grounds and terrain that surround the facility:* Heartland Industries is located in a commercial setting called the Industrial Park. Our facility is right next door to a car repair shop and across the parking lot is a cement/storage company. The front of the buildings has a side walk that runs from the garage to the middle of the building, please note that the side walk does slope downward by the middle door. The East side of the buildings is a paved parking lot. The West side of the building has a paved garage exit with storage sheds (2) nearby. We are also located near train tracks.

5. *How will the program reduce the potential of abuse and/or harm to people related to the areas of the facility that are difficult to supervise?* Staff to recipient ratio is the average daily ratio according to the standards of the RMS. In addition, staff ratios are set up according to needs of each recipient. Each recipient has an individual abuse prevention plan in place to individualize the plan to reduce the potential of abuse and or harm. All staff will be aware of the consumer's whereabouts. Staffs persons are on the premises when individuals are present. Staff has been trained and can implement their responsibilities and duties to check on each individual periodically and will know the whereabouts of each individual. Staff will follow supervision recommendations per each individual in the home. Staff has been trained on the Maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent abuse, take corrective action, and immediately report maltreatment.

ENVIRONMENTAL ASSESSMENT:

1. *Describe the location of the facility including information about the neighborhood and community that the facility is located:* The facility is located in a commercial setting in Moorhead called the Industrial Park with surrounding businesses. The facility address is 2510 16th Ave South, Moorhead, MN 56560. Moorhead is a growing town with slow to steady traffic around our site. All recipients are dropped off at community sites or in the main parking lot in the front of the warehouse or facilities. The other businesses around the facility may not be aware that we provide services to people that have disabilities. Staff provide supervision to the client that receive services. Staff are trained on Maltreatment of Adults and take steps to prevent abuse, take corrective actions and immediately report maltreatment.
2. *How will the program reduce the potential of abuse and/or harm to people related to the location of the facility, including factors about the neighborhood and community?* All our sites are located in cities. They are located in business districts of these cities. There are residents of the city aware of our stores and facilities. We are open during the day only. Police and medical care would take at least five minutes before they would arrive. Staff persons have been trained on keeping people safe, first aid, and CPR. Staff has been trained on the Maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent abuse, take corrective action, and immediately report maltreatment.
3. *Describe the type of grounds and terrain that surround the facility:* Business districts sidewalks and pavement.
4. *How will the program reduce the potential of abuse and/or harm to people related to the type of grounds and terrain that surround the facility?* Staff will ensure that if and when individuals are outside that staff are with them at all times or within visual range. Staff will make sure all the cement and the area where recipient may go is safe and not dangerous whereas someone may trip and fall. Sidewalks will be clear of debris, snow/ice. There is no anticipated area of concern regarding the grounds and terrain.
5. *Describe the type of internal programming provided at the program:* The programming that is done is based on the CSSP and the CSSP Addendum or Individual Care Plans. We support people for whatever is necessary to meet their individual needs and preferences. In general, our internal programming is to provide Day Support Services skills training and activities of daily living, such as, job skills, communication, customer service, appropriate work behavior, hygiene, toileting, etc.
6. *How will the program reduce the potential of abuse and/or harm to people through the type of internal programming provided at the program?* Programming will be necessary to ensure all staff is working with the individuals on a consistent basis. This also ensures that the individual also knows what is expected of them. Not only throughout all adaptive behaviors but also when or if maladaptive behaviors should happen, staff will remain consistent throughout this programming which will reduce the potential of abuse and harm to the individuals served. Staff persons are trained in meeting each individual's needs, preferences and to ensure their health and safety. Staff persons will assist individuals in being as independent as possible in their activities of daily living. Staff persons have been trained on keeping people safe, first aid and CPR. Staff has been trained on the Maltreatment of Minors Act and the Maltreatment of Vulnerable Adults Act and can take steps to prevent abuse, take corrective action and immediately report maltreatment.
7. *Describe the program's staffing pattern:* Staff to recipient ratio is the average daily ratio according to the standards of the RMS. We have the following ratios daily at Heartland Industries 5 days a week: 1:1 (supported employment), 1:2, 1:3 (enclave settings in-house and in the community), 1:4 (enclave settings in the community) and we always have administration onsite for behavioral concerns or questions.
8. *How will the program reduce the potential of abuse and/or harm to people through the program's staffing pattern?* It is important to have adequate staffing at all times to ensure that the individuals are being taken care of per their IAPP per this PAPP. If there is not adequate staffing things can happen that are not necessary and would become a Vulnerable Adult or Maltreatment of Minor issue. The license holder will provide oversight to each resident as specified in the individual's IAPP. Daily awareness of the individual's needs and will be given at all times unless noted in their IAPP. Located by the telephone there is an emergency list. This list also includes all of the telephone numbers/cell phones of all staff and supervisors.

EACH PROGRAM MUST ENSURE THAT:

1. People receiving services are provided with an orientation to the program abuse prevention plan. This orientation must be within 24 hours of admission or within 72 hours for individuals who would benefit from a later orientation.
2. The license holder's governing body must review the program abuse prevention plan at least annually.
3. A copy of the program abuse prevention plan must be posted in a prominent place in the facility and be available, upon request, to mandated reporters, people receiving services, and legal representatives.
4. The plan must include a statement of measures to be taken to minimize the risk of abuse to the vulnerable adult(s) or when the need for additional measures is identified. This includes identifying referrals that are made when the vulnerable adult is susceptible to abuse outside the scope or control of the licensed services.
5. If 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 must document this determination.
6. In addition to the program abuse prevention plan, an individual abuse prevention plan must be developed for each new person receiving services. A review of the individual abuse prevention plan must be done as part of the review of the program plan. The persons receiving services must participate in the development of the individual abuse prevention plan to the best of their abilities. All abuse (individual or program) prevention plans must be reviewed at least annually by the interdisciplinary team.

Barbara Hillenbrand
Date(s) of last plan review: 1-1-2015; 2-8-2016; 1-25-2017; 2-2-2018; __02-05-2019___2-3-2020____1.18.2021_____

Legal Authority: Minn. Stat. § 245A.65, subd. 2