

Integrated Community Supports (ICS) Program Abuse Prevention Plan (PAPP)

License Holder Name: Independent Living Services of Central Minnesota	245D License Number: 1106251 (if applicable)	
Program Address: 256 Waite Avenue N Waite Park, MN 56304	ICS License Number: 1106251 (if applicable)	
	Date Developed/Revised: 07/15/2024	
The Human Services Licensing Act (HSLA), Minnesota Statutes 245A.65, subdivision 2, governs what is required in the adult foster care (AFC) and community residential setting (CRS) program abuse prevention plan. License holders must develop and enforce a written program abuse prevention plan in accordance with the HSLA, and the Reporting of Maltreatment of Vulnerable Adults Act (VAA), Minnesota Statutes 626.557, subdivision 14.		
I. POPULATION ASSESSMENT Describe the persons the program is planning to serve. Assess the possible risk of harm and/or abuse in each identified area. Describe the program's plan to reduce the risk of harm and/or abuse to persons served in the assessed area.		
Describe the Persons the Program Plans to Serve	Describe Any Possible Risks - if there are no risks in this area please state that there is no risk	Describe the Plan to Reduce the Risk to Persons Served by the Program
1. Age: ILSCM programs serve individuals ages 18-80.	There is no risk assessed based on age.	All Independent Living Services of Central Minnesota staff receive training on the safety needs and requirements of the individuals residing at ILSCM-ICS Programs.
2. Gender: ILSCM-ICS Programs serve both male and female individuals.	This site currently serves both males and females and are served by mixed gendered staffing to assist and serve the individuals that reside at ILSCM-ICS Programs.	Staff are trained in Vulnerable Adult Abuse Prevention and Reporting during orientation and then on an ongoing basis annually. Staff are familiarized with the individuals' specific needs and risks in their programmatic documentation before serving the individuals or within 72 hours of having provided services under emergent needs or situations per 245D policy and procedure. All staff persons are trained to adhere to the needs as stated for what staff will do to minimize the risk of abuse while being served by ILSCM-ICS staff.

I. POPULATION ASSESSMENT continued

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<p>3. Mental Functioning:</p> <p>Individuals served has diagnoses that include Anxiety, Asthma, Bi-polar Disorder, Borderline Personality Disorder, Candida Infection, Chronic Abdominal Pain, Chronic Ulcer of Skin, Essential Hypertension, Extrapramidal Movement Disorder, Frequent Falls, Gastroesophageal Reflux Disease, Hyperlipidemia, Insomnia, Irritable Bowel Syndrome with Constipation, Stage 2 Chronic Kidney Disease, Misuse of Medication, Myofascial Pain, Nocturnal Enuresis, Obesity, Obstructive Sleep Apnea Syndrome, Bilateral Paresthesia, Schizoffective Disorder, Squamous Cell Carcinoma, TBI, and Social Anxiety.</p>	<p>Residents living at ILSCM-ICS program have risks and vulnerabilities such as: needing assistance to schedule and attend medical appointments and inability to manage symptoms of mental health diagnosis as well as symptoms of behaviors, requiring staff assistance. This is due primarily to their level of physical and cognitive functioning, as well as possible communication difficulties.</p>	<p>By providing in-service training, annual training topics, and proactive conversations with the individuals about how they prefer staff support, staff are trained to meet the specific needs of the individuals. The assessment is based on an analysis of the current population, including knowledge of previous or past abuse. Annual in-service training will include, but is not limited to, vulnerable adult training regarding ways to prevent or reduce documented instances of abuse. Staff also receive training in the 245D required areas of training. An Individual Abuse Prevention Plan and Self-Management Assessment will be created and reviewed regularly with care teams to ensure accuracy in those known risk areas.</p>

<p>4. Physical & Emotional Health:</p> <p>Residents living at ILSCM-ICS have physical health concerns and may experience emotional health symptoms.</p>	<p>Residents have risks due to difficulty with expressive communication regarding their own physical and emotional health and may self-isolate, exhibit self-injurious behaviors, yell, or damage property to express emotion. Residents residing at ILSCM-ICS have a history Anxiety, Asthma, Bi-polar Disorder, Borderline Personality Disorder, Candida Infection, Chronic Abdominal Pain, Chronic Ulcer of Skin, Essential Hypertension, Extrapyrimalidal Movement Disorder, Frequent Falls, Gastroesophageal Reflux Disease, Hyperlipidemia, Insomnia, Irritable Bowel Syndrome with Constipation, Stage 2 Chronic Kidney Disease, Misuse of Medication, Myofascial Pain, Nocturnal Enuresis, Obesity, Obstructive Sleep Apnea Syndrome, Bilateral Paresthesia, Schizoaffective Disorder, Squamous Cell Carcinoma, TBI, and Social Anxiety.</p>	<p>All individuals have a plan of care that meets their specific individual needs. ILSCM-ICS staff are trained in assisting individuals with communication and work to de-escalate in situations that require it to assist the resident with what need or desire they are communicating.</p> <p>Residents receive primary care and any needed specialty care for physical and emotional health issues they may have. While ILSCM-ICS staff are providing services, they will monitor and consult with the individual to advocate based on individual needs and symptoms to receive the best possible care.</p>
<p>5. Behaviors:</p> <p>Residents may have challenging symptoms or behaviors.</p>	<p>Behaviors can include repetitious speech, perseverating worry, picking of skin, self-injurious behavior, oversleeping or under sleeping, obsessive compulsive actions, verbal aggression, property destruction, legal and illegal substance abuse, verbal threats, false reporting, excessive eating, and isolation.</p>	<p>All staff receive training in Positive Behavioral Supports per 245D training standards and training specific to the individual resident's needs.</p>

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<p>6. Need for Specialized Programs:</p> <p>Residents will have access to specialized programs as needed and referred.</p>	<p>There are no risks.</p>	<p>There are no risks.</p>
<p>7. Specific Staff Training for Individual Needs:</p> <p>Resident specific individualized training may be identified in a SP/SP-Addendum. Each staff member is trained to the specific needs of the resident.</p>	<p>Staff are made aware of behavior patterns that may put a client at risk of abuse to self or others, as well as areas of vulnerability.</p> <p>Residents have increased risk of maltreatment if staff are not properly trained to implement the SP/SP-Addendum (IAPP and SMA). Staff may not respond to physical health risks if not properly trained.</p>	<p>Staff receive training on specific documentation for each resident, including Positive Support Strategies individual to the resident needs. Documentation of specific orientation and training is stored in the employee record.</p>
<p>8. Knowledge of Previous Abuse:</p> <p>Each staff reviews the IAPP of the specific person to be made aware of the abuse of each client. Individual(s) living at the site may have a history of physical, sexual, financial, and self-abuse.</p>	<p>Each staff reviews the IAPP of the specific person to be made aware of the past abuse for each client. Individuals may have an increased risk of maltreatment if staff are not properly trained on the IAPP and the Vulnerable Adult mandated reporting policy.</p>	<p>Staff are made aware of any pattern of behavior that puts an individual at risk of abuse to self or others, as well as areas of vulnerability. These patterns are addressed in a service plan, individually specific to everyone that resides in the program and receives services from Independent Living Services called an Individual Abuse Prevention Plan. This plan informs staff of what has been used previously to avoid situations with a negative outcome. All staff are mandated reporters and information about how to report will be posted at the site, including phone numbers and websites. All staff will be trained in any known risk areas related to the resident as well as additional support needed to aid in the reporting process. The established staffing pattern will meet the needs outlined in the individuals SP-A and IAPP.</p>

II. PHYSICAL PLANT

Describe the physical plant in which the program is located. Assess the possible risk of harm and/or abuse to persons served based on the physical plant.
Describe the program's plan to reduce the risk of harm and/or abuse to persons served in the assessed area.

Describe the Physical Plant	Describe Any Possible Risks - if there are no risks in this area please state that there is no risk	Describe the Plan to Reduce the Risk to Persons Served by the Program
<p>1. Condition and Design of the Physical Plant:</p> <p>Building 256 features 3 single family units with one of the units located in the lower level of the home. The units are a mixed variety of 1 bedroom and 2-bedroom apartment layouts. This property has off-street parking via a parking area that all residents of Building 256 share the use of. There are no outbuildings that are accessible to individuals living at Building 256. The property also features grassy areas surrounding the building itself and has sidewalks and the street in front of the building features a 35 MPH Speed Zone. This property is on a corner lot and the side street ends in a dead end.</p>	<p>Everyone that resides in building 256 does not have a 24-hour line of care. Weekly hours that have been assigned to the individuals will be completed in the privacy of their own apartment, in the common areas of the building, as well as in the community. There are no risks associated to the individuals based on the physical plant of Building 256.</p>	<p>All snow removal, lawn care, as well as building maintenance is taken care of by ILSCM. While providing services, staff can provide verbal reminders regarding personal safety as well as aid when advocating for themselves should the need arise during service periods with the individuals. While services are not being provided, individuals have access to the 24-Hour on-Call Phone Number and local and community emergency numbers.</p>
<p>2. Areas Difficult to Supervise:</p> <p>ILSCM does not provide a 24-Hour physical presence of staff but do have a 24 Hour Day on-call phone number available to all residents of ILSCM's ICS Properties. While not receiving In-person services, individuals have the right to privacy in their own apartment units. Staff will be present during service times that benefit the individual.</p>	<p>ILSCM does not provide 24-Hour Lines of care. While providing services, staff are present with individuals outside of the use of remote service lines. While providing services staff will be supervising in person. When not providing services individuals have access to the 24-Hour a Day On-call number.</p>	<p>ILSCM does not provide 24-Hour Lines of Care. Individuals residing in Building 256 have access to a 24-Hour On-Call line to reach ILSCM staff should a need arise. ILSCM does post and provide a list of community resources available during different types of emergencies to the residents of Building 256.</p>

III. ENVIRONMENT and COMMUNITY

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Describe the Environment and Community	Describe Any Possible Risks - if there are no risks in this area please state that there is no risk	Describe the Plan to Reduce Risk to Persons Served by the Program
<p>1. Neighborhood and Community:</p> <p>Building 256 is close to the Bus Line Stops, Pet Shops, Clothing Stores, Parks, Gas Stations. Building 256 is in a residential neighborhood with a moderate business mix in the area.</p>	<p>The road in the front of the building features a 35 MPH which can pose potential risks to individuals. Railroad tracks are located approximately 1 block from Building 256.</p>	<p>While in the presence of staff during assigned service hours, ILSCM staff can provide verbal reminders to remain safe while near the roads and the dangers of railroads through town. ILSCM-ICS does not offer a 24-Hour Line of In Person Care. Residents of ILSCM-ICS buildings have access to a 24-Hour On-Call Telephone number to access the assistance of On-Call Staff.</p>
<p>2. Grounds and Terrain:</p> <p>Building 256 does not have a common entrance as each unit has its own access from the outside. Sidewalks paved to navigate the building to each apartment entrance. Roughly 40 feet from the building to the road. Between 3-4 steps to each unit with handrails on or in all stairwells.</p>	<p>Ordinary hazards that exist for all Minnesotans during winter such as cold, snow, ice, etc. During the summer the walkways leading up to the home might be hot to touch in the sun and high temps.</p>	<p>Residents will be assisted by staff according to their SP-Addendum. The sidewalks and parking lot are maintained for maximum safety during winter.</p>

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<p>3. Type of Internal Programming:</p> <p>Individuals are active in their own apartments. Individuals can choose to participate in daily living skills: laundry, cleaning, cooking, leisure activities to the level they are each interested and able to contribute to while ILSCM-ICS staff are providing service. Individuals set their own schedule and staffing is designed on the individual's preferences.</p> <p>On site visitation</p> <p>Offsite program activities.</p>	<p>Individuals living at the site may have a history of initiating physical and verbal abuse, elopement, threats of harm, property destruction, and medication abuse.</p>	<p>Individuals living at the ILSCM-ICS may have a history of initiating physical and verbal abuse, threats of harm, property destruction, and medication abuse.</p>
<p>1. Staffing Pattern:</p> <p>The staffing ratio is driven by the individual's needs and assessed by the Designated Coordinator and Designated Manager in accordance with the individual's care plans to ensure the appropriate level of service is being offered.</p>	<p>Staffing shortages may make it difficult to fill necessary shifts. The Designated Coordinator and Designated Manager will inquire with available staff to see if coverage can be found. In the event another member of staff is unable to fill the needed hours, the hours will be re-scheduled at the individual's earliest convenience.</p>	<p>ILSCM-ICS will utilize a staffing pattern in accordance with the needs assessed and determined in the individual's SP-A and IAPP.</p>

This plan will be reviewed, signed, and dated annually by the governing body representative according to 245A.65, subdivision 2.
Breanna Ruchti, Designated Manager

7-15-2024

Print name of Governing Body Representative

Signature

Date

Print name of Governing Body Representative

Signature

Date

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Signature

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The review of the plan used the assessment factors in the plan and any substantiated maltreatment findings that occurred since the last review. If necessary, the plan was revised to reflect the review results.

Print name of Reviewer

Signature

Date

Print name of Reviewer

Signature

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