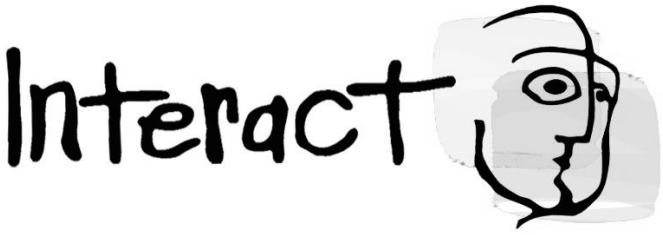

Interact Center for the Visual and Performing Arts-

Policies and Procedures Manual

2022

Disclaimer

It is your responsibility to understand and adhere to the following policies at Interact Center for the Visual and Performing Arts. The material in this manual is subject to change. We may amend, update, or add policies at any time. We will supply you with copies of any amendments or additions to this manual. Interact also reserves the right to interpret any of the policies set forth herein at any time or in any manner it deems appropriate.

This handbook voids any previous Interact Center Policy Manuals.

Vocabulary Disclaimer:

Throughout this manual, participants receiving services through Interact may be referred to as artists, clients, participants, or individuals receiving services interchangeably.

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Interact Center for the Visual and Performing Arts

Creating Art that Challenges Perceptions of Disability

Since 1996, Interact Center for the Visual and Performing Arts has reshaped ideas of who can create high quality artistic work. Interact Center is a place where adult artists with disabilities come to enhance their creativity and build their talents through the daily practice of theater and visual arts. Interact's vision of **radical inclusion** blurs ideas of who "can" and who "cannot" by blending the talents of artists with and without disabilities. We invite professional artists from the community into our work as fellow performers, workshop facilitators, teachers, and mentors.

As a staff member at Interact, you will be trained to provide services and supports to meet each participant's own individualized health and safety needs. Also, as a professional, working artist, you will bring your own unique talents and knowledge to help maximize each participant's artistic growth.

In the **performing arts department**, artists build their talents through a rigorous year-round schedule of daily professional theater workshops. In the **visual arts department**, artists strengthen their portfolios and learn new art techniques through participation in skill building workshops and daily practice with professional-level instructors. Here at Interact, we push boundaries of traditional art forms by including the unique perceptions of our artists. We expand the meaning of "accessibility" beyond physical structures and strive to create art that challenges the perception of what disability really means.

We require a minimum attendance commitment from participants of three days per week.

Telephone number of the department's licensing division:

Interact Center maintains licensure through the State of MN under 245D. Staff and clients with questions may contact the Interact Center Director of Licensing at 651-209-3575 x117. The Minnesota Department of Licensing's phone number is 651-431-6500.

Program Funding:

Artist should work with their case manager to set this up.

Typical funding options include:

- HCBS waivers
- Direct county contracts
- CDCS contracts

Scope of the program, services, and care offered by the center:

Interact Center is a non-profit, DHS-licensed 245D day program for artists with disabilities. Interact provides individualized, person-centered day support services to help artists develop and maintain essential and personally enriching life skills related to the arts, ensuring they can access and participate in preferred arts activities in their community. Interact maintains typical staffing ratios of 1:6 or 1:8, depending on the assessed need of the individual. With the added risk of COVID-19 infection, Interact is also providing alternative, remote day programming for certain individuals unable to partake in in-person programming.

Description of the population to be served by the center:

Interact Center serves adults 18+ that are eligible to receive day support services and have this service as an assessed need in their support plan.

Adults who are eligible to receive Interact services must also demonstrate the ability or clear potential for artistic creativity and are also subject to its capacity. Review the Admission Policy for additional information.

Artist's Rights

The following policy includes information regarding participant's rights while receiving services and supports from Interact Center for the Visual and Performing Arts, as well as information regarding rights restrictions and information on where participants can go if they have questions or need additional information related to these rights. Participants are free to exercise their rights and Interact Center is dedicated to helping participants exercise and protect their rights.

Please let us know if you require this policy in any other format or language to better assist your understanding of these rights.

Artist's Rights:

1. The right to participate in developing, planning, and evaluating my own plan of care regarding the services that will be provided to me.
2. The right to have services and supports provided to me in way that respects me and considers my preferences.
3. The right to refuse care/participation or stop services and be informed about what will happen if I refuse or stop services.
4. Know before I start to receive services from this program, if the program has the skills and ability to meet my need for services and supports.
5. Know the conditions and terms governing the provision of services, including the program's admission criteria and policies and procedures related to temporary service suspension and service termination.
6. Have the program help coordinate my care if I transfer to another provider to ensure continuity of care.
7. Know what services this program provides and how much they cost, regardless of who will be paying for the services, and to be notified if those charges changes.
8. Know, before I start to receive services, if the cost of my care will be paid for by insurance, government funding, or other sources, and be told of any charges I may have to pay.
9. The right to have staff that are trained and qualified to meet my needs and supports.
10. The right to confidentiality of participant records, including my personal, financial, service, health, and medical information, and to be notified if these records have been shared.
11. Have access to my records and recorded information that the program has about me as allowed by state and federal law, regulation, or rule.
12. Be free from abuse, neglect or financial exploitation by the program or its staff.
13. Be free from staff trying to control my behavior by physically holding me or using a restraint to keep me from moving, giving me medication I don't want to take or that isn't prescribed for me, or putting me in time out, seclusion, restrictive intervention; except if and when manual restraint is needed in an emergency to protect me or others from physical harm.
14. The right to receive services in a clean and safe location.
15. The right to physical privacy during care or treatment.
16. The right to have personal privacy.

17. Be treated with courtesy and respect, have access to and respectful treatment of my personal possessions at any time, including financial resources.
18. Be allowed to reasonably follow my cultural and ethnic practices and religion.
19. Be free from prejudice and harassment regarding my race, gender, age, disability, spirituality, and sexual orientation.
20. The right to present grievances regarding treatment or care, including knowing how to contact persons responsible for helping me to get my problems with the program fixed and how to file a social services appeal under the law.
21. Know the names, addresses and phone numbers of people who can help me, including the ombudsman, and to be given information about how to file a complaint with these offices.
22. Exercise my rights on my own or have a family member or another person help me exercise my rights, without retaliation from the program.
23. Give or not give written informed consent to take part in any research or experimental treatment.
24. Choose my own friends and spend time with them.
25. Take part in activities that I choose.

Rights Restrictions:

Can my rights be restricted?

Restriction of your rights is allowed only if determined necessary to ensure your health, safety, and well-being. Any restriction of your rights must be documented in your service and support plan. The restriction must be implemented in the least restrictive alternative manner necessary to protect you and provide you support to reduce or eliminate the need for the restriction in the most integrated setting and inclusive manner.

What is Interact required to do if my rights will be restricted?

Before Interact may restrict your rights in any way, Interact must document the following information:

1. The justification for the restriction based on an assessment of what makes you vulnerable to harm or maltreatment if you were allowed to exercise the right without a restriction.
2. The objective measures set as conditions for ending the restriction (meaning Interact must clearly identify when everyone will know the restriction is no longer needed and it must end).
3. A schedule for reviewing the need for the restriction based on the conditions for ending the restriction to occur semiannually from the date of initial approval, at a minimum, or more frequently if requested by the person, the person's legal representative, if any, and case manager (meaning that at least every six months, more often if you want, the program must review with you and your authorized representative or legal representative and case manager, why the restriction is still needed and how the restriction should change to allow you as much freedom as possible to exercise the right being restricted).
4. Signed and dated approval for the restriction from you or your legal representative, if any.

Can Interact restrict all of my rights?

Interact cannot restrict any right we chose. The only rights we may restrict, after documenting the need, include:

1. Your right to associate with other persons of your choice;
2. Your right to have personal privacy;
3. Your right to engage in activities that you choose; and
4. Your right to access your personal possessions at any time.

What if I want to end my approval for a rights restriction?

You (or your legal representative) may withdraw your approval of the restriction of your right at any time. If you do withdraw your approval, the right must be immediately and fully restored.

Virtual Interact

I understand that it is my right to make an informed choice about whether or not to receive day services remotely.

Program Abuse Prevention Plan

Interact Center for the Visual and Performing Arts is a non-profit, DHS-licensed 245D Day Support Service program located in the Creative Enterprise Zone in Saint Paul, Minnesota. Interact Center has been operational since 1996 and continues to push boundaries through the creation of art that challenges perceptions of disability. Through an environment of radical inclusion, artists at Interact Center are given the opportunity to fully develop their creative lives.

The following Program Abuse Prevention Plan is reviewed at least annually by the Interact Center Board of Directors, and any proposed changes are approved by the Executive Director. All Interact Center staff are refamiliarized with this Program Abuse Prevention Plan as part of annual training. Interact Center clients are also provided this Program Abuse Prevention Plan during their intake session as well as annually during annual review meetings. The Program Abuse Prevention Plan is also posted throughout the building in prominent locations.

The Population:

Interact Center serves over 100 female, male, transgender, and non-binary clients age 18+, with a variety of disabilities including intellectual and developmental disabilities, mental illnesses, and health conditions such as diabetes and cardiovascular disease. Monthly nursing visits allow for condition monitoring as well open discussion regarding health topics Interact Center's clients are interested in learning more about. All Interact Center staff with direct client contact are trained on client specific programing including Individual Plans of Care, Self-Management Assessments, and Individual Abuse Prevention Plans. Detailed client history is provided at intake which may include records of past abuse. Interact Center staff are trained annually on the Vulnerable Adult Act and Mandatory Reporting of suspected abuse.

As artists, clients at Interact Center are encouraged to explore the entire range of human experience and the human condition. Visual art may depict graphic imagery. Performing art may include physical contact, role-playing, and/or dialogue that would not be typical in other settings between a professional and a vulnerable client. Interact Center therefore emphasizes professional boundaries and requires annual training on Maintaining Professional Boundaries. This training helps to ensure that Interact Center is maintaining the highest degree of professionalism and mutual respect, while allowing staff to identify and respond to client needs at all times.

Interact Center maintains appropriate staffing ratios during daytime programming ranging from 1:4 – 1:8. Certain clients may also have a PCA present in-center to assist with ADLs. Interact Center has a daily client occupancy limit of 100. Service animals are welcome at Interact Center in accordance with the Americans with Disabilities Act. At least one staff trained on CPR/First Aid will be onsite with clients at all times. Only staff members trained on medication administration will be allowed to handle medications.

Because Interact Center pays its artists, financial controls and record keeping take place. Industry standards apply when setting prices for tours, performances, and sale of artwork. All artists and actors are independent contractors; no taxes or benefits apply, and 1099 forms are issued in accordance to federal guidelines. Interact Center staff are permitted to commission work. All clients sign consent forms, located in their individual file, allowing for the use of their likenesses, written words, or images.

The Physical Plant:

Interact Center is a large single-story building. The physical plant is not a threat to the health or safety of staff or clients. All entrances are at ground level and accessible to people who are non-ambulatory. There are no windows with screens, and windows are always to be kept shut. Interact Center has a sprinkler system and automatic alarms. “Doorbells” are located in each of the bathroom stalls so that staff can be called upon for assistance if needed. Furniture at Interact Center is in good condition. There is one cot per eight clients available for use if required. Interact Center also has two dedicated “sick rooms” where clients that become ill during the day can rest until a ride home is secured. Clients in these rooms can be supervised through video monitors and windows that have been installed in the room doors.

Being an art studio, toxic and potentially dangerous materials can be found throughout the center. General use art supplies are kept in cabinets and shelves. Toxic materials, such as special paints or bleach, are kept locked in cabinets. Sharp objects used for artistic purposes, such as sculpting tools, are used only under supervision. The ceramics kiln is not to be operated during programming hours when clients are present in the Ceramic Studio. Medications are also kept locked in medication boxes.

Interact Center is divided into two programs: Visual Arts and Performing Arts.

The Visual Arts department includes one large open visual art studio space which includes a separate staff office, and an isolated Ceramics Studio located off the lunchroom. Both rooms have a polished concrete floor. The staff office is carpeted and has a large window that allows staff to view and supervise the studio space. A staff member is always present in the Ceramics Studio when clients are present, due to it being more of an isolated space. Visual Arts clients may also be found working in the open Fiber Arts Gallery located in the middle of the building under supervision of the fiber arts instructor.

The Performing Arts department is comprised of one large theater space for training and performances which includes two staff offices, a back rehearsal room, and common area which may house prop storage. Both staff offices have large windows which allow staff to view the department space. The back office is carpeted. The other spaces have tile.

Certain areas at Interact Center have been found to be difficult to supervise including conference rooms, the Performing Arts back rehearsal room and common area, all bathrooms, and electrical closets. These areas are checked and documented daily as part of closing procedures. Staff will also check that the door to the basement, which is located within the Performing Arts theater space, is locked and inaccessible to participants.

The Environment:

Interact Center is located at 1860 Minnehaha Ave West in the Creative Enterprise Zone in Saint Paul, Minnesota. Interact Center’s address and entrance are clearly visible. The opposite side of Minnehaha Avenue consists of residential homes. While the neighborhood poses potential risks typical of any urban environment, Minnehaha Avenue is not a particularly busy thoroughfare.

Clients who are vulnerable without supervision are not allowed to leave Interact Center unless supervised by staff. Field trips and outside work are continuously supervised by staff.

All participants sign in and out when they arrive or leave Interact Center at any time. This includes signing in and out for smoke breaks. All visitors are also required to sign in and out. Visitors are escorted once inside the center.

Clients are picked up and dropped off at the main front door. Interact Center staff are always present for assistance if needed. Metro Mobility, buses, and vans are all instructed to follow the same traffic pattern and line up near the front entrance to wait for their client. This helps to ensure the process is orderly, efficient, and safe. There is also a marked crosswalk from Interact Center to the sidewalk that clients taking public transportation utilize for safety.

Zoom Programming:

Due to the COVID-19 pandemic and mandatory program closures, Interact Center launched alternative, virtual programming in May 2020. Interact Center requires that all staff, artists, and volunteers who attend in-person be fully vaccinated and capable of wearing a properly fitting face mask that covers both nose and mouth. Artists that are unable to receive the COVID-19 vaccine or wear a face mask, are welcome to participate in virtual programming to continue to receive services from Interact.

Virtual Interact is provided 100% online via the Zoom platform. Individual Zoom Breakout Rooms are also available for use at any time during the day. Staff are always to be present during Virtual Interact programming, maintaining the same staffing ratios as would be required for in-person programming. Virtual Interact offers a variety of skill building workshops and classes in both performing and visual arts. Sample classes have included creative writing, Zumba, meditation, social lunch hours, foundation drawing, art history, and improvisation.

It may be difficult for Interact staff to supervise clients that choose to keep their webcams off or utilize the phone call-in option. Staff will periodically call out these individuals during sessions either vocally or in the Zoom chat to ensure safety and participation.

Interact Center's Program Abuse Prevention Plan was:

Last modified on: 11/12/2021

By: Colleen Krick, Director of Licensing & Recruitment

Last reviewed by the Interact Board on: December 13 2021

Signature of Board Chair: Mary Kay Kinney

(245A.65) Maltreatment of Vulnerable Adults

Interact Center's clients are vulnerable adults under the state Vulnerable Adult Act.

State law prohibits maltreatment of vulnerable adults. Maltreatment is more specifically defined in the Act **(626.5572 Definitions)** and includes abuse, neglect, and financial exploitation. All Interact Center staff are mandated reporters and thus required by law to report any suspected acts of maltreatment. Interact strictly adheres to the Vulnerable Adults Act and requires that all employees, volunteers, and consultants review and comply with it.

In brief, the Act prohibits maltreatment against vulnerable adults, including:

- Assault in the first through fifth degrees; use of drugs to injure or facilitate crime; solicitation, inducement, and promotion of prostitution; criminal sexual conduct in the first through fifth degrees; and criminal abuse.
- Conduct that is not accidental and is non-therapeutic which produces or could produce physical pain, injury, or emotional distress in the vulnerable adult.
- Neglect, which includes failure to supply a vulnerable adult with care or services reasonable and necessary to obtain or maintain the vulnerable adult's physical or mental health or safety.
- Financial exploitation of a vulnerable adult.

Interact Center staff will be responsible to know and understand all definitions put forth under '626.5572 Definitions' and will review this information annually.

626.557 Reporting of Maltreatment of Vulnerable Adults

All regular employees of Interact Center are Mandated Reporters. Mandated reporters must report suspected acts of maltreatment immediately, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received. A mandated reporter who negligently or intentionally fails to report suspected maltreatment of a vulnerable adult is liable for damages caused by the failure to report. Other people that are not mandated reporters, such as Interact Center clients, can also report suspected acts of maltreatment.

A report should contain enough information to identify the vulnerable adult, the caregiver, the nature and extent of the suspected maltreatment, any evidence of previous maltreatment, the name and address of the reporter, the time, date, and location of the incident, and any other information that the reporter believes might be helpful in investigating the suspected maltreatment.

There are two ways to report alleged or suspected maltreatment.

1. **External Report:** You can report directly to the Common Entry Point (MAARC) at 1-844-880-1574. This phone number is posted on all telephones at Interact Center.

2. **Internal Report:** Or, you can report internally to the Director of Licensing and Recruitment. If that person is involved in the alleged or suspected maltreatment, report

to the Executive Director. **You are encouraged to use Interact Center's internal reporting procedures so that we are aware immediately of any concerns.**

When an internal report is received, the Director of Licensing and Recruitment or the Executive Director will be responsible for deciding if the report must be forwarded to the Common Entry Point (MAARC). If both Directors are involved in the suspected maltreatment, the Board Chair will assume responsibility for deciding if the report must be forwarded to the Common Entry Point. The report must be forwarded within 24 hours.

If you have reported internally, you will receive within 2 business days a written notice that tells you whether or not your report has been forwarded to the Common Entry Point. The notice will be given to you in a manner that protects your confidentiality as a reporter. It will inform you that if you are not satisfied with the Interact's decision on whether or not to report to the Common Entry Point, you may still make the external report to the Common Entry Point yourself. It will also inform you that you are protected against retaliation if you decide to make a good faith report to the Common Entry Point.

Internal Review:

When Interact Center has reason to believe that an internal or external report of alleged or suspected maltreatment has been made, Interact Center will complete an internal review and take corrective action, if necessary, to protect the health and safety of vulnerable adults being served. The internal review will include an evaluation on whether:

1. Related policies and procedures were followed,
2. The policies and procedures were adequate,
3. There is a need to additional staff training,
4. The reported event is similar to past events with vulnerable adults or the services involved,
5. There is a need for corrective action by the license holder to protect the health and safety of vulnerable adults.

The internal review will be completed the Director of Licensing and Recruitment. If this individual is involved in the alleged or suspected maltreatment, the Executive Director will be responsible for completing the internal review. All internal reviews must be completed within 30 calendar days. Employees reporting suspected maltreatment internally will be notified within 2 business days whether the report was forwarded to the Common Entry Point.

Interact Center will provide written documentation upon the completion of the internal review. These reports will be available to the commissioner upon the commissioner's request.

Based on the results of the internal review, Interact Center will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

Training and Orientation:

Interact Center will ensure that each new mandated reporter receives an orientation to this policy within 72 hours of first providing direct contact services to a vulnerable adult and annually thereafter. The orientation and annual review shall inform the mandated reporters of the reporting requirements and definitions specified under Minnesota Statutes 245A.65, 626.557 and 626.5572, Interact Center's Program Abuse Prevention Plan, and all other internal policies and procedures related to the prevention and reporting of maltreatment of individuals receiving services.

Interact Center must document the provision of this training, monitor implementation by staff, and ensure that the policy is readily accessible to staff, as specified under Minnesota Statutes, section 245A.04, subdivision 14.

Interact Center will also provide an orientation to the internal and external reporting procedures to all persons receiving services. This is typically completed during the intake meeting, but no later than 24 hours after admission. The orientation will provide clients with the phone number for the Common Entry Point and where to find this number posted throughout the center.

This policy is posted in prominent locations throughout the building and additional copies are always made available upon request.

Date of last policy review: 11/12/2021

Date of last policy revision: 11/2/2020

Admission Criteria Policy

Interact Center will comply with all applicable laws governing equal employment opportunity. This policy extends to all applicants and employees, and to all aspects of the employment relationship including, but not limited to recruiting, hiring, promotions, transfer, and compensation.

More specifically, Interact does not discriminate against anyone because of race, color, creed, religion, national origin, sex, marital status, disability, status with regard to public assistance, sexual orientation, and age.

The Admission Process for Potential Clients:

Step 1: Inquiry & Application
An interested artist, family member, case manager, etc. inquires about services. After speaking with the Director of Licensing and Recruitment, an artist may be sent an application packet.

Step 2: Screening & Tours
After an interested artist returns a completed application packet, a tour and/or initial screening will be scheduled. Partially completed applications will not be accepted. During the initial tour/screening, Interact program specifics will be discussed, and the interested artist should be prepared to discuss their motivation in wanting to join the program.

Step 3: Experience Day
After the tour/screening, an artist may or may not be invited to participate in an experience day in the program. This experience day gives the artist an opportunity to participate fully in a day of programming before committing. Interact staff will also have the day to work with the artist to ensure the program has adequate supports and will be a good program fit.

Step 4: Intake Meeting
An intake meeting with the full support team will be scheduled and completed for those artists accepted into the program.

Step 5: START!
After the intake meeting, the artist can start attending!

<u>Individual conditions the center is not prepared to accept:</u>

Interact Center does not discriminate against anyone because of race, color, creed, religion, national origin, sex, marital status, disability, status regarding public assistance, sexual orientation, or age. However, due to the center's spacing and staffing ratios, Interact Center is not prepared to accept clients with a history of severe physical aggression toward others or clients that require a consistent in-person staffing ratio during the day of 1:1 – 1:4. Interact Center does not have lifts available, so clients admitted must maintain a degree of independence, including being able to self-transfer when toileting. Interact Center is also not

prepared to serve individuals who have communicable diseases requiring isolation. All individuals at Interact (in-person) are required to be vaccinated against COVID-19 and able to wear a properly fitting mask throughout the day. **Interact limits admissions to individuals that demonstrate clear artistic achievement, potential, or motivation to pursue art in a professional manner.**

Please be aware that Interact Center does not currently have interpreters available during daily programing.

Attendance Policy

To be a successful artist, one must actively and consistently work on their trade. Interact Center does not host drop-in workshops, nor operate as a drop-in day center. Interact expects the artists attending to maintain attendance at or above 80%. By keeping attendance at or above 80%, artists can receive a monthly payment of $65 (terms are specified in the Service Agreement and may slightly differ between artists depending on certain circumstances).

Artists agree to notify Interact Center prior to any absence or tardiness. You may use 1 sick day per month as an "excused absence" and it will not count against your average attendance percentage. **You must call Interact to inform us of your absence for it to be considered an excused sick day absence.**

If an artist will be absent for an extended period of time (i.e. hospital admission, family vacation, etc.), they must notify Interact ASAP to ensure continued placement at the program.

Artists may make up missed day! These make up days must be scheduled and approved by the Client Service Coordinator at least **48 hours in advance.** Due to staffing and space limitations, artists are not guaranteed make up days. Make up days must be made up during the month missed to qualify for payment.

Attendance Specifics:

- 80% attendance per month or higher = $65 per month payment
- Attendance falls below 80% = no payment
- 1st month below 70% = case manager, guardian, and residential staff will be notified
- 2nd month below 70% = case manager, guardian, and residential staff will be notified that suspension may occur
- 3 months below 70% = Suspended from program until team meeting can be scheduled. Interact Directors will be in attendance for this meeting.

Please review the Temporary Suspension and Termination policies for further details.

Fees, Billing Arrangements, & Plans for Payment

Artists participating in programs at Interact Center will pay directly for the services if they are a private pay participant. Details of the arrangement can be found in the signed, agreed upon Service Agreement in the client records.

If an artist participating in programs at Interact Center qualify for Medical Assistance or reimbursement through county services, Interact Center will bill the appropriate agency for reimbursement. Typically, arrangements will be made through a Case Manager and waiver. Details of this type of agreement can be found in the signed, agreed upon Service Agreement in the client records.

Billing to the MN Department of Human Services is done based on artist attendance. Artists are required to check in with the reception desk at arrival and check out before leaving for the day.

Lack of Payment:

If the artist and/or responsible party fails to make a payment when due, the responsible party will receive a reminder that payment is overdue.

If payment has not been received **within 30 days** a second reminder will be made and notice given that Interact reserves the right to suspend the artist if payment is not received by day 60.

If payment has still not been received **after 60 days**, the artist may be **suspended** until payment is made.

If **after 90 days**, payment has not been received, Interact reserves the right to suspend the artist from the program until payment is received and/or a team meeting is scheduled. Interact Center Directors will be in attendance.

Temporary Service Suspension Policy

In the event of service suspension, Interact Center will be dedicated to promoting continuity of care and service coordination for the artist receiving services.

Interact Center will limit temporary service suspension to the following situations:

1. The artist's conduct poses an imminent risk of physical harm to self or others and either:
    a. Positive support strategies have been implemented to resolve the issues leading to the temporary service suspension, but have not been effective and additional positive support strategies would not achieve and maintain safety
    b. Less restrictive measures would not resolve the issues leading to the suspension.
2. The artist has emergent medical issues that exceed this Interact's ability to meet the artist's needs.
3. Interact has not been paid for services.

Prior to giving notice of temporary service suspension, Interact Center must document the actions taken to minimize or eliminate the need for suspension. At minimum, Interact Center will take the following actions prior to giving notice of temporary service suspension.

1. Consult with the artist's support team to identify and resolve the issues leading up to the issuance of the service suspension notice. These issues will likely be documented in Corrective Action Notices.
2. A request will be made to the case manager for intervention services, including behavioral support services, in-home and/or out-of-home crisis respite services, specialist services, or other professional consultation or intervention services to further support the artist.
    a. This request for intervention services will not be made for service termination notices issued because Interact has not been paid for services.
3. If a situation arises where service suspension is warranted without first consulting the support team or requesting intervention services, Interact Center will clearly document the specific circumstances and reasons behind the decision. This decision must be made with the artist's best interests in mind.

The notice of temporary service suspension will meet the following requirements.

1. Interact Center will notify the artist or the legal representative/guardian AND the case manager of the intended service suspension **in writing.**
2. **This written notice for temporary service suspension must be given on the first day of the service suspension.**
3. The written notice will include:
    a. The reason for the action.
    b. A summary of actions taken by Interact to minimize or eliminate the need for service suspension, and why these measures failed.
        i. This summary is not needed if service termination is due to Interact ceasing to exist.

4. Please note, a written notice of service termination may be given in conjunction with a written notice of temporary service suspension.

During the temporary service suspension period, Interact Center will work with the artist and support team to develop reasonable alternatives to protect the artist and others, and to support continuity of care.

Interact Center will provide in a timely manner any requested information to the artist or case manager.

Interact Center will maintain all information about the service suspension, including a copy of the written notice of temporary service suspension, in the person's record.

The artist has the right to return to Interact Center during or following a temporary service suspension based on the following conditions:

1. Based on a review by the artist's support team, the artist no longer poses an imminent risk of physical harm to self or others.
    a. If, at the time of the service suspension or at any time during the suspension, the artist is receiving treatment related to the conduct that resulted in the service suspension, the support team must consider the recommendation of the licensed health professional, mental health professional, or other licensed professional involved in the artist's care or treatment when determining whether the person no longer poses an imminent risk of physical harm to self or others and can return to the program.
    b. If the support team makes a decision that is contrary to the recommendation of a licensed professional treating the artist, the program must document the specific reasons why a contrary decision was made.
2. The medial issues resulting in service suspension have been resolved and/or Interact Center is now able to meet their health and safety needs.
3. Interact Center starts being paid for services. Please note, lack of payment for services may result in service termination NOT suspension.

Date of last policy review: 11/12/2021

Date of last policy revision: 11/06/2019

Service Termination Policy

In the event of service termination, Interact Center will be dedicated to promoting continuity of care and service coordination for the artist receiving services.

Interact Center must permit each artist to remain in the program and must not terminate services unless:

1. Termination is necessary for the artist's welfare and their needs cannot be met by Interact Center.
2. The safety of the artist or others in the program is endangered. Positive support strategies were attempted and have not achieved and effectively maintained safety for the artist or others.
    a. Documentation of these attempted strategies will be recorded in the preceding Corrective Action Notices leading up to the termination decision.
3. The health of the artist or others in the program would otherwise be endangered.
4. Interact Center has not been paid for services.
5. Interact Center ceases to operate.
6. The artist has been terminated by the lead agency from waiver eligibility.

Prior to giving notice of service termination, Interact Center must document the actions taken to minimize or eliminate the need for termination. At minimum, Interact Center will take the following actions prior to giving notice of service termination.

1. Consult with the artist's support team to identify and resolve the issues leading up to the issuance of the service termination notice. These issues will likely be documented in Corrective Action Notices.
2. A request must be made to the case manager for intervention services, including behavioral support services, in-home and/or out-of-home crisis respite services, specialist services, or other professional consultation or intervention services to further support the artist.
    a. This request for intervention services will not be made for service termination notices issued because Interact has not been paid for services.
3. If a situation arises where service termination is warranted without first consulting the support team or requesting intervention services, Interact Center will clearly document the specific circumstances and reasons behind the decision. This decision must be made with the artist's best interests in mind.

The notice of service termination will meet the following requirements.

1. Interact Center will notify the artist or the legal representative/guardian AND the case manager of the intended service termination **in writing and at least 60 days prior** to the proposed effective date of service termination.
2. The written notice will include:
    a. The reason for the action.
    b. A summary of actions taken by Interact to minimize or eliminate the need for service termination, and why these measures failed to prevent the termination.

        i. This summary is not needed if service termination is due to Interact ceasing to exist.
    c. The artist's right to appeal the termination of services.
    d. The artist's right to seek a temporary order staying the termination of services.
3. This written notice of service termination may be given in conjunction with a notice of temporary service suspension.

When initiating service termination, Interact Center will work with the artist and support team to develop reasonable alternatives to protect the artist and others, and to support continuity of care.

Interact Center will provide in a timely manner any requested information to the artist or case manager.

Interact Center will maintain all information about the service termination, including a copy of the written notice of service termination, in the person's record.

Date of last policy review: 11/12/2021

Date of last policy revision: 11/06/2019

Transferring Clients and/or Records:

Should Interact Center close its doors, the following policy is to be followed regarding transferring clients and records upon closure. This plan is to be reviewed annually and signed by a controlling individual of the program.

Interact Center will notify clients, guardians, and team members about the closure at least 25 days in advance. Interact Center will provide information about the reason for closure and information about how to access their records.

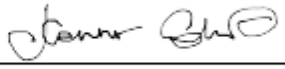
Interact Center employees will work with case managers in finding alternative programs for clients if available. When a new program is selected, Interact Center will transfer necessary records and paperwork to the new program. Interact Center will maintain copies of all client records for 5 years from the date the program closes. After 5 years the documents will be shredded and destroyed. Clients, guardians, and team members (such as case managers) will also be given the opportunity to have copies of said records.

Service recipient records, including verification of service delivery, are maintained by Interact Center for a minimum of five years following discharge or termination of service. Should Interact Center close and have these records stored, Interact Center staff will outreach the client, guardian, and/or other team members about obtaining copies of these records if desired. Interact Center will continue to maintain these records for 5 additional years after the closure of the center.

Before closing, Interact Center will notify the commissioner of the location where the licensing records will be stored and the name of the person responsible for maintaining the stored records.

This plan last updated on 07/18/2019.

This plan last reviewed on 11/12/2021.

Controlling Individual Signature: 

Policy for Reporting Death in the Program

The following procedures are to be followed when reporting death of a participant in the program:

Within 24 hours of receiving knowledge of the death of an individual served by the program, the license holder shall notify the commissioner of the death. If the license holder is unavailable, another Interact Center director may be this contact person.

If the license holder has reason to know that the death has been reported to the commissioner, a subsequent report is not required.

The license holder will take the following steps within 24 hours of knowledge of a death.

1. Complete the “Death Report” form and cover sheet below.

   Cover Sheet:
   https://mn.gov/dhs/assets/Death-report-fax-transmission-cover-sheet_tcm1053-354966.pdf

   Death Report Form:
   https://mn.gov/dhs/assets/Death-report-form_tcm1053-354965.pdf

   Fax #: 651-296-1021

2. Send the completed report and cover sheet to the Office of the Ombudsman for Mental Health and Developmental Disabilities. The director will also report incidents to the person’s legal representative or designated emergency contact and case manager. This must be done within 24 hours of receiving knowledge of the death. If the report is being mailed to the agency or party, then a phone call must also be made within 24 hours to meet the mandatory reporting requirements.

3. If the director suspects maltreatment, then a report to the Common Entry Point (MAARC) is also required.

4. An internal review will be conducted by the director.

5. The director will also complete the online Behavior Intervention Report Form if the death occurred as a result of a behavior intervention procedure.

   Behavior Intervention Report Form:
   https://edocs.dhs.state.mn.us/lfserver/Secure/DHS-5148-ENG

Emergency Response

Within 24 hours of an emergency, file an Emergency Incident Report to the Director of Licensing, or Managing Director if Director of Licensing is unavailable. The Director will complete a review of all emergencies within 5 days of the emergency. The review will ensure that the written report provides a written summary of the emergency, and will identify trends or patterns, if any, and determine if corrective action is needed. Emergency report logs will be maintained by the Director of Licensing.

Per MN statutes 245D.02 subdivision 8, "Emergency" means any event that affects the ordinary daily operation of the program including, but not limited to, fires, severe weather, natural disasters, power failures, or other events that threaten the immediate health and safety of a person receiving services and that require calling 911, emergency evacuation, moving to an emergency shelter, or temporary closure or relocation of the program to another facility or service site for more than 24 hours.

At least one staff trained in CPR and First Aid will always be present with Interact Center clients. Staff will be recertified in CPR and First Aid every 2 years. Interact Center holds a training file for each staff with CPR and First Aid certification dates. Select Interact Center staff are also certified in Mental Health First Aid. Lists of staff trained in CPR/First Aid/MHFA, along with certification expiration dates, are located throughout the building at each emergency exit.

In cases of life-threatening medical emergencies, staff will call 911 immediately.

First aid kits are readily available for use by all Interact staff. Interact first aid kits are located throughout the building including in the Visual Arts coordinator office, the Performing Arts coordinator office, and on the floating shelf unit in the Reception area. Interact also has travel kits located in the “offsite backpacks” which are located in the Performing Arts back hallway. All first aid kits include at minimum, bandages, sterile compresses, scissors, and ice bag or cold pack, an oral or surface thermometer, mild liquid soap, adhesive tape, and a first aid manual.

In addition to first aid kits, Interact has emergency equipment including flashlights found throughout the building and a portable radio at the reception desk that can be used in the event of a power failure.

The following list of emergency phone numbers is posted at each emergency exit and next to the non-coin operated telephone found in the lunchroom. The mental health crisis intervention team number for this program is 911.

Emergency Phone Numbers

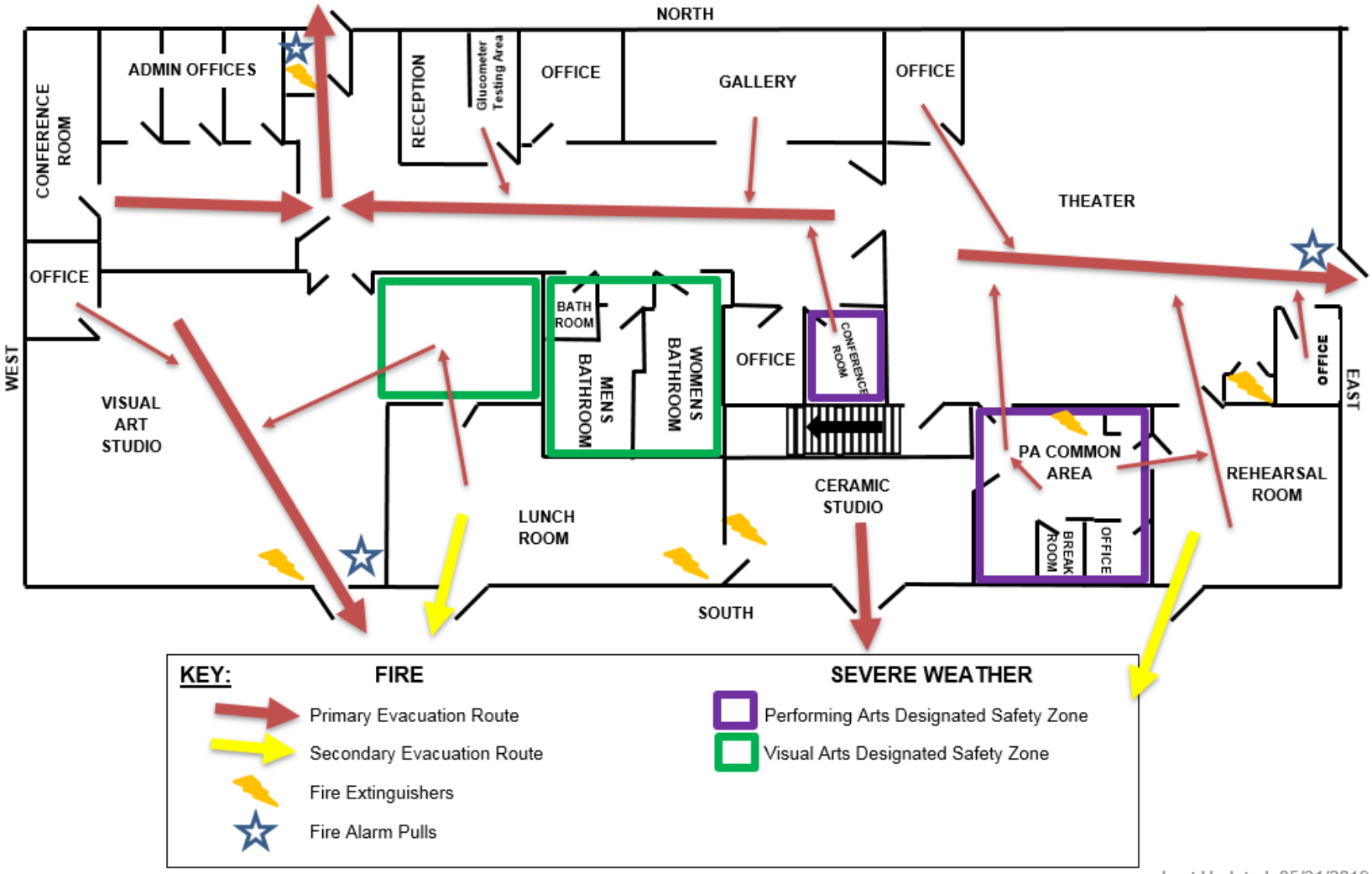
CALL 911 FOR POLICE, FIRE, MENTAL HEALTH EMERGENCY, OR SEVERE MEDICAL EMERGENCY!

Type of Emergency:	Phone:

• **Police**
• **Fire**
  ○ Report problems with fire extinguishers to Minnesota Conway Fire & Safety at 952-345-3473
  ○ Fire Alarm Company: FireNet at 763-762-3100
  ○ Fire Extinguishers: Nardini at 651-483-6631
• **Gas Leak**
• **Mental Health Emergency**
• **Severe Medical Emergency**
	911

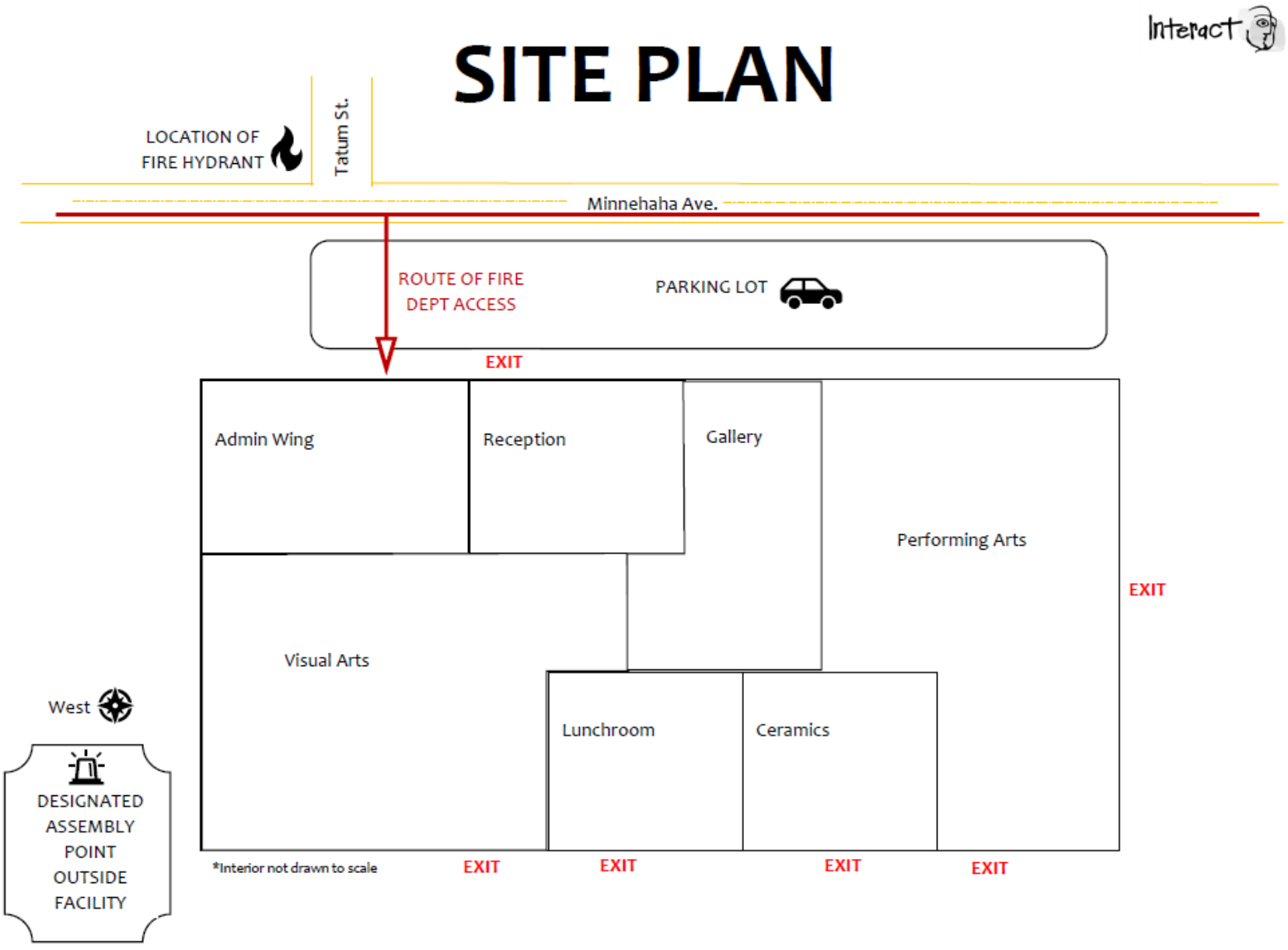
Non-Urgent Medical: • Hennepin County Medical Center • University of Minnesota Medical Center (East Bank) • Regions Hospital	• **612-873-3000** • **612-273-8383** • **651-254-3456**
Poison Control Center: Call before administering any remedy by mouth.	**612-347-3141**
Common Entry Point: **MAARC (MN Adult Abuse Reporting Center)** **All Interact Center staff are mandated reporters!	**844-880-1574**
Power Outage: **Xcel Energy**	**800-895-1999**
Transportation: • **Metro Mobility: West** • **Metro Mobility: East** • **Metro Mobility: South** • **Metro Mobility: Contracted Rides** • **Metro Mobility: Customer Service** • **Northland** • **Northland: After Hours** • **Rainbow Taxi: (account # R9100)** • **Emergency Cab: Call Andrea first!**	• **651-602-1100** • **651-602-1120** • **651-602-1180** • **651-602-1080** • **651-602-1111** • **952-922-6876** • **651-216-5117** • **612-788-1111** • **612-940-3872**
Building Emergencies: *Talk with Glenis before calling* • **Scott Moriarty (building engineer & caretaker)** • **Becca Krieger (property manager)**	• **612-743-4875** • **612-431-3006**
Front Door Paddle Maintenance: Roy C Inc.	**763-497-5455**

EMERGENCY FLOOR PLAN



Last Updated: 05/31/2019

SITE PLAN



Last Updated: 02/25/2021

Fire Evacuation

Maps showing all evacuation routes are posted throughout the building.

Policy:
All fire alarms are to be taken seriously. When the fire alarm sounds, center evacuation is mandatory, and no reentry is allowed until appropriate personnel gives the all clear. Remain calm and keep everyone together. Evacuate all people in the immediate area to safety, closing off fire areas as needed by shutting doors against smoke and heat. Test a closed door before opening by feeling near the top. If the door is hot, use an alternative exit. If a room is smoke-filled, keep close to the floor to breathe more easily.

Should staff need to use a fire extinguisher, first make sure the fire is contained and is not spreading around the area. It is also important to make sure the room has not filled with smoke before using an extinguisher. Staff should also make sure everyone is evacuated from the building in case the fire spreads and alert the fire department. While everyone wants to stay and help put out a small fire if they can, it is more important to stay safe and leave the building unharmed. To use a fire extinguisher, remember PASS. Pull. Aim. Squeeze. Sweep. More information can be found here: When Should You Use a Fire Extinguisher? - Fireline

In the event of a fire emergency, trained Interact Center employees will perform CPR and First Aid as needed. At least 4 fire drills will be performed each year. **The designated meeting location for all clients and staff is to the WEST of the building.** It is located at least 300 feet from the building and is clear of roadways/emergency routes for medical, fire, and other emergency personnel.

Interact Center will conduct at least 4 fire drills each year.

Procedure:
In the event of a fire emergency, staff will take the following actions:

Staff Location:	Assignment:
Reception	• Using intercom system, notify building of emergency. • Call 911. • Clear glucometer testing area and bathrooms. Call for assistance as needed to evacuate clients. • Assist further with client evacuation as needed. • After evacuation, coordinate client pick-up transportation and notify families as needed.
Fiber Arts Gallery	• Clear gallery, admin offices, and small conference room. Call for assistance as needed to evacuate clients. • Assist with client evacuation as needed.

Admin Hallway	• Clear large conference room and admin hallway. Call for assistance as needed to evacuate clients. • Assist with client evacuation as needed.
Performing Arts	• Clear theater, back rehearsal room, PA common room, and staff break room. Call for assistance as needed to evacuate clients. • Clear utility closets and staff offices. • Assist with client evacuation as needed.
Ceramics	• Clear ceramics studio. Call for assistance as needed to evacuate clients. • Assist with client evacuation as needed.
Visual Arts	• Clear VA studio, staff office, and lunchroom. Call for assistance as needed to evacuate clients. • Assist with client evacuation as needed.

Department Managers:
At each emergency exit is an "emergency folder." Department managers (or designated staff member) should grab this folder upon evacuation. Using the folder, Visual Arts should conduct a headcount of all VA staff, admin staff, and VA participants. Performing Arts should conduct a headcount of all PA staff and PA participants. Volunteers and guests should be included in the headcount for which department they are participating in.

Following a drill, the department managers (or designated staff member) should report the following information to the Director of Licensing & Recruitment:

1. Date and time,
2. Type of drill,
3. Number of clients,
4. Number of staff,
5. Total time it took to evacuate.

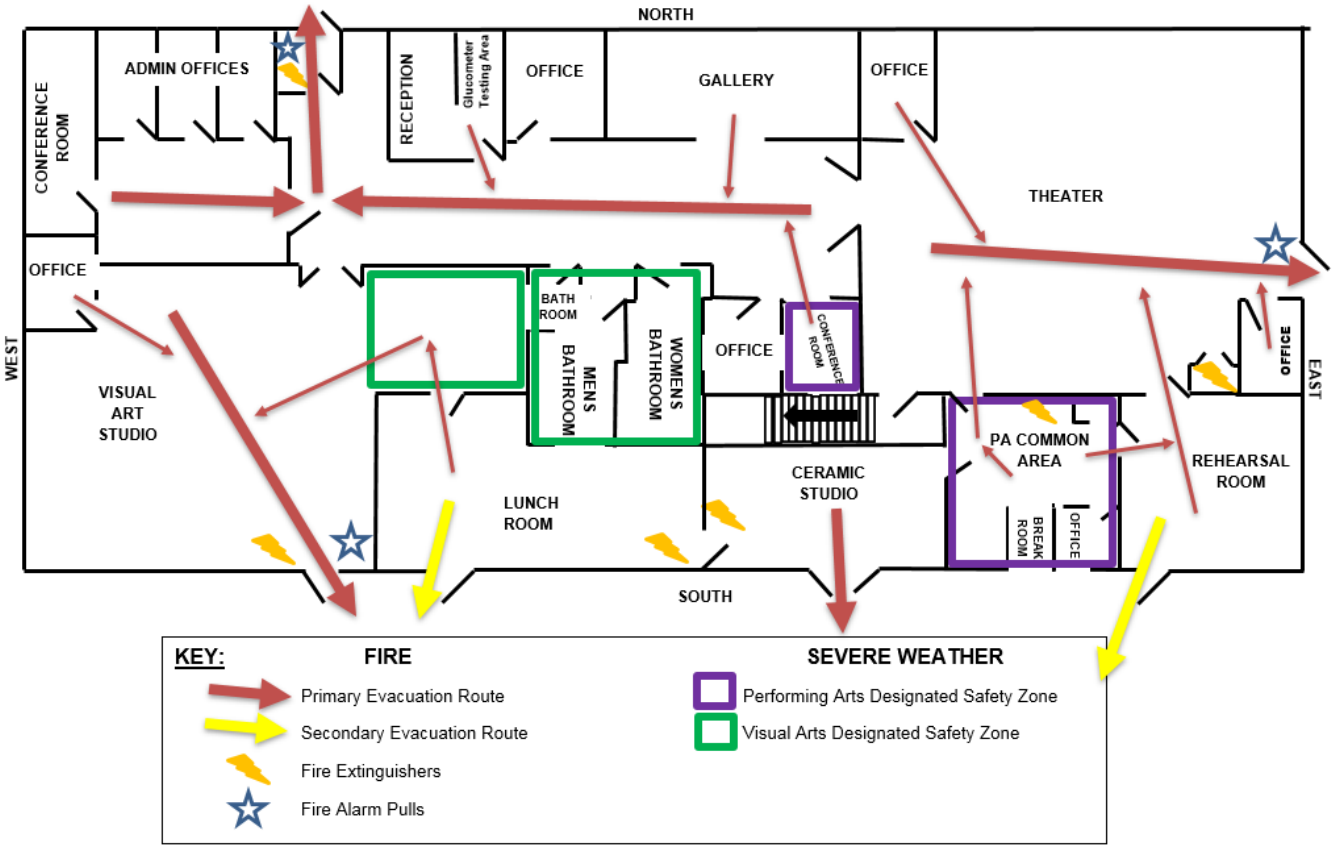
Following a real fire evacuation, department managers (or designated staff member) should complete an Emergency Incident Report to turn into the Director of Licensing & Recruitment.

The Evacuation Route:

Room:	Route:
Theater **Rehearsal Room** **PA Common Area** **Staff Break Room**	• Exit the building through the East Side emergency exit located in the Theater. • Travel along East and South Sides of building until meeting location is reached.

Fiber Arts Gallery Conference Rooms All Bathrooms Reception Glucose Testing Area Admin Offices	• Exit the building through the North Side main entrance. • Travel along the North and West Sides of building until meeting location is reached.
Ceramic Studio	• Exit the building through the South Side double door located inside the Ceramic Studio. • Travel along South Side of building until meeting location is reached.
Lunchroom Visual Art Studio	• Exit the building through the South Side emergency exit located in the Visual Art Studio. • Travel along South Side of building until meeting location is reached.

EMERGENCY FLOOR PLAN



Power Failure, Emergency Shelter, Emergency Evacuation, & Temporary Closure/Relocation

Maps showing all evacuation routes are posted throughout the building.

Department Managers:
Following any of the below situations, department managers (or designated staff member) should complete an Emergency Incident Report to turn into the Director of Licensing.

POWER FAILURE
In the event of a power failure, staff should take the following actions.
• Contact the electric company to report the outage. • Keep artists together and remain calm. • Bottled water is available for consumption as needed. • Open blinds to allow for natural lighting. • The Interact building is also equipped with emergency lighting. • Staff should gather flashlights to use as needed. **Artists are to be sent home if the power outage would severely impact artist safety.**

EMERGENCY SHELTER
Some emergencies will be best met by seeking safety in an emergency shelter. Depending on the emergency, you may need to shelter in place or shelter outside the disaster area. Use of an emergency shelter may include: severe weather, natural disasters, power failures, and other events that threaten the immediate health and safety of people receiving services.
• Follow directions of local emergency personnel to locate the closest emergency shelter. • If time allows, move to the emergency shelter with a 24-hour supply of medications and medical supplies, medical books/information, and emergency contact names and information. • At the emergency shelter, notify personnel of any special needs required to use the emergency shelter. • Remain calm and keep everyone together and informed of why events are occurring. • **Conduct hourly headcounts of all staff and artists while at the emergency shelter.**

EMERGENCY EVACUATION

Emergency evacuation may include: severe weather, natural disasters, power failures, and other events that threaten the immediate health and safety of people receiving services.

Often the emergency evacuation will be directed by police, fire, or other emergency personnel who will direct people where to seek safety.

Staff must evacuate the building for any of the following:

- Signs of fire or smoke
- Toxic smells
- Active threats (see lockdown procedure)

During an emergency evacuation staff will:

- Account for the well-being of all people receiving services.
- Inform people why they are leaving the program and what is being done to keep them safe.
- Follow directions received from administrative staff, policy, fire, and other emergency personnel.
- If time allows, evacuate with medication and medical supplies, medical and program books/information, clothing, grooming supplies, and other necessary personal items, and emergency contact names and information.

TEMPORARY CLOSURE/RELOCATION

Some emergencies will be best met by temporarily closing or relocating a program site for more than 24 hours. This decision will be directed by program administrative staff.

If a situation were to arise that would result in the need to close the building for longer than 24 hours or to relocate to a different physical location, Interact will simply close to in-person, center-based services until it can safely reopen.

Severe Weather & Natural Disaster

Maps showing all safety zones are posted throughout the building.

Policy:
All severe weather warnings and drills are to be taken seriously. The following policies are to be followed in cases of severe weather or natural disasters, including tornado or blizzard.

Interact Center staff will monitor weather conditions by listening to local television, radio, or weather apps. If a severe weather alert siren sounds, staff will determine the nature of the alert and take action as necessary. Working flashlights and a portable radio are available for use. Batteries are checked regularly. Trained Interact Center employees will perform CPR and First Aid as needed during an emergency. Incident reports will be filed as needed.

Advisory: Weather conditions are less serious but may cause significant inconvenience. In cases of a severe weather advisory, the Managing Director and Artistic/Executive Director will determine if Interact Center will remain open. Note, Interact Center will always close if Metro Mobility is not operating because of severe weather.

Watch: There is increased risk of a hazardous weather event, but its occurrence, location, or timing is still uncertain. In cases of a severe weather watch, all Interact Center staff will continue to monitor the weather forecast and prepare to take action if needed.

Warning: A hazardous weather event is occurring, imminent, or likely, and a threat to life or property exists. In cases of a severe weather warning, all Interact Center staff will take action immediately to protect themselves and artists by seeking immediate shelter. Location of building safety zones are found on maps posted throughout the building.

Procedure:
In the event of a severe weather warning, staff will take the following actions:

TORNADO WARNING	
Staff/Location:	**Assignment:**
Reception **Designated Safety Zone: BATHROOMS**	• Monitor weather notification resources. • If any mention of tornado, notify building of emergency using Intercom system. • If tornado sirens sound or tornado warning is issued, use Intercom system to announce that all staff and clients must proceed to designated safety zones. • Assist with client evacuation to safety zone as needed. • Coordinate client pick-up transportation and notify families as needed.

Director of Licensing & Recruitment **Managing Director** **Designated Safety Zone: SMALL CONFERENCE ROOM OR BATHROOMS**	• Monitor weather notification resources. • If any mention of tornado, notify building of emergency using Intercom system. • Supervises overall disaster operations. • Conduct facility check, ensuring complete evacuation to safety zones. • Close any storm doors as needed. • Maintain severe weather drill records & incident reports.
Artistic/Executive Director **Designated Safety Zone: SMALL CONFERENCE ROOM OR BATHROOMS**	• Monitor weather notification resources. • If any mention of tornado, notify building of emergency using Intercom system. • Assist with participant evacuation to safety zones as needed.
Performing Arts Manager **Designated Safety Zone: SMALL CONFERENCE ROOM OR PA COMMON AREA**	• Monitor weather notification resources. • Assist with participant evacuation to safety zones as needed. • Obtain flashlights and/or portable radio for use. • Perform headcount for all Performing Arts clients and PA/Admin Staff. • Utilize Walkie Talkies to communicate with VA safety zones.
Visual Arts Manager **Designated Safety Zone: VA STUDIO SAFETY ZONE OR BATHROOMS**	• Monitor weather notification resources. • Assist with participant evacuation to safety zones as needed. • Obtain flashlights and/or portable radio for use. • Perform headcount for Visual Arts Studio clients and VA/Admin Staff. • Utilize Walkie Talkies to communicate with PA and alternate VA safety zones.
Performing Arts/Theater **Designated Safety Zone: SMALL CONFERENCE ROOM OR PA COMMON AREA**	• Assist with participant evacuation to safety zones. • Call for assistance as needed.
Visual Arts Studio **Designated Safety Zone: VA STUDIO SAFETY ZONE OR BATHROOMS**	• Assist with participant evacuation to safety zones. • Call for assistance as needed.

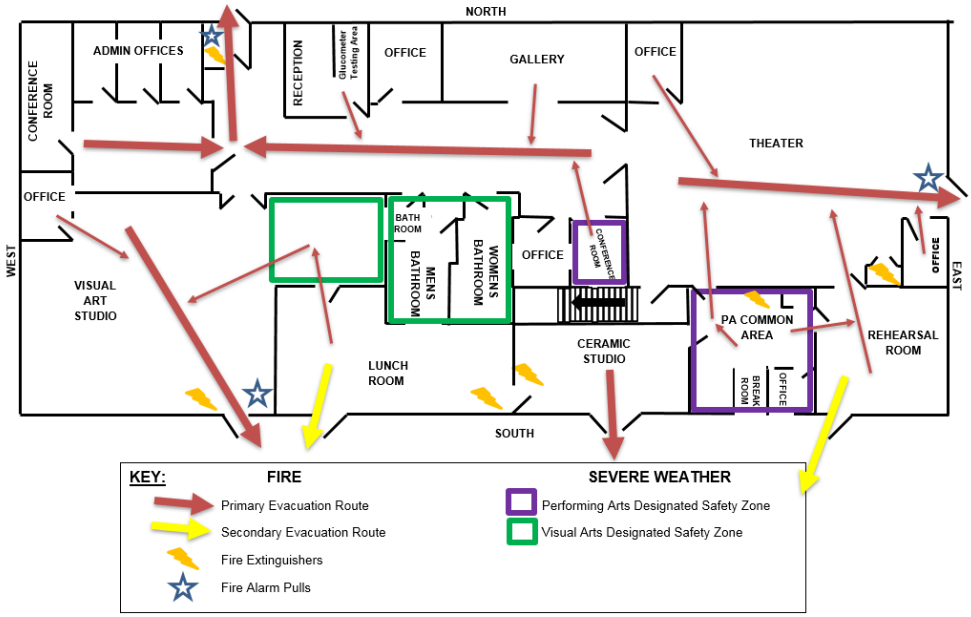
Ceramic Studio **Designated Safety Zone: PA COMMON AREA**	• Assist with participant evacuation to safety zones. • Call for assistance as needed. • Perform head count for Ceramic Studio clients. • Utilize Walkie Talkies to communicate with VA safety zones.
Fiber Arts Gallery **Designated Safety Zone: SMALL CONFERENCE ROOM OR BATHROOMS**	• Assist with participant evacuation to safety zones. • Call for assistance as needed. • Perform head count for Gallery clients and Admin Staff. • Utilize Walkie Talkies to communicate with PA and alternate VA safety zones.

Department Managers:
Following a drill, the department managers (or designated staff member) should report the following information to the Director of Licensing & Recruitment:

1. Date and time,
2. Type of drill,
3. Number of clients,
4. Number of staff,
5. Total time it took to evacuate.

Following a real severe weather event, department managers (or designated staff member) should complete an Emergency Incident Report to turn into the Director of Licensing & Recruitment.

EMERGENCY FLOOR PLAN



BLIZZARD & SEVERE STORMS	
Interact Center will <u>always</u> close if Metro Mobility is not operating because of severe weather.	
Staff Title:	**Assignment:**
Operations, Transportation, & Reception Coordinator	**After Hours:** • Change Interact's outgoing phone message to reflect closure as needed. • Cancel client rides/transportation as needed. **Business Hours:** • Monitor weather notification resources. • Change Interact's outgoing phone message to reflect closure as needed. • Coordinate client pick-up transportation and notify families as needed.
Managing Director	**After Hours:** • Monitor weather notification resources in early morning of expected severe weather day. • By 5:15 am coordinate with Artistic/Executive Director to determine if Interact will close for the day. • Notify Operations, Transportation, & Reception Coordinator if Interact will remain open or close. • Notify Director of Advancement and Advancement Coordinator to post closing online and on news stations. • Notify Admin Staff and Department Managers. **Business Hours:** • Actively monitor weather notification resources. • Coordinate with Artistic/Executive Director if early closure is needed. • Notify all Interact Staff if closure is chosen.
Artistic/Executive Director	**After Hours:** • Monitor weather notification resources in early morning of expected severe weather day. • By 5:15 am coordinate with Managing Director to determine if Interact will close for the day. **Business Hours:** • Actively monitor weather notification resources. • Coordinate with Managing Director if early closure is needed. **Artistic/Executive Director will have final decision regarding closure.**

Director of Advancement **Advancement Coordinator**	• Monitor weather notification resources. • Update Social Media Accounts and Interact Website of closing as needed. • List closing info on news platforms including WCCO, KSTP, and KARE 11.
Performing Arts Manager	• Monitor weather notification resources. • Call PA staff to implement calling trees and send out mass email to PA artists.
Visual Arts Manager	• Monitor weather notification resources. • Call VA staff to implement calling trees and send out mass email to VA artists.
Other Admin Staff	• Monitor weather notification resources. • Assist with calling tree as needed.
Other Instructors, Substitutes, Care Coordinators	• Monitor weather notification resources.

Weather Closing Procedures

Interact does NOT always follow what the Minneapolis or St. Paul public schools do.

Interact will <u>ALWAYS</u> close if:

- Metro Mobility is not operating because of severe weather.

Information about closing will be posted on:

- Interact's Facebook page
- Interact's website: www.interactcenter.org
- WCCO, KSTP, KARE11 online & on television
- Interact will make every effort to update our main telephone line with closure information
- Interact will also make every effort to email staff/parents/artists at the email address(es) where typical flier and correspondence occurs

Interact will cancel all Metro Mobility rides when Interact is closed!

Interact will always directly call artists who schedule their own rides, walk to Interact, drive themselves, or take public transportation.

Please note that due to the sheer number of artists at Interact, we cannot always make calls to everyone in a timely enough manner to announce a closing. Please check the above resources when bad weather is upon us!

Lockdown Policy:

Lockdown procedures should be activated in response to a variety of situations, including:

1. A reported incident or disturbance in the local community that may pose a threat to client or staff safety at Interact.
2. An intruder is onsite with clear intent to harm clients or staff at Interact.
3. A local environmental warning such as smoke plumes or chemical/gas clouds.
4. A dangerous animal is near Interact with potential to harm clients or staff.

During a lockdown, guardians, legal representatives, case managers, house staff, transit drivers, friends, and/or family **SHOULD NOT ATTEMPT TO CALL INTERACT** as this could block the phone line that may be needed to contact emergency services. They also **SHOULD NOT COME TO INTERACT** while on lockdown as they may place themselves or others in danger. Please wait until Interact contacts you directly.

Partial Lockdown:

During a partial lockdown, programming within the center can continue as normal, however no one should be allowed to enter or leave the building. A partial lockdown should be implemented as a precaution aimed to keep staff and clients safe while remaining indoors. A partial lockdown would typically be activated when there is a risky environmental situation, such as a toxic air pollutant, community disturbance, or dangerous animal loose in the community. During a partial lockdown, staff should conduct a head count to ensure all clients AND staff are accounted for, then proceed to secure all entry points to the building, including both doors and windows. Staff may close window blinds as needed. In the event of an air pollutant, staff should turn off or close all air vents and/or the heating/cooling system and attempt to seal any cracks around doors and windows.

The person of highest authority present at Interact will decide when to implement a partial lockdown. This person will also be responsible in giving the all-clear to end the partial lockdown.

Full Lockdown:

Should an incident occur where an imminent source of danger is present inside Interact, yell LOCKDOWN LOCKDOWN LOCKDOWN 3 times as loud as possible and immediately seek refuge. If near a phone, use the INTERCOM button in addition to yelling.

Reception Area: Press the emergency button on key chain alerting police. If able to safely exit the building, do so. Seek refuge in the Visual Arts Studio if possible, otherwise any office with a lock. Barricade the door if possible. Call 911 if in an office with a phone. TEXT IS BEST!

Admin Staff with Offices: If able to safely exit the building, do so. Lock office doors. Barricade the door if possible and cover any windows. Call 911. TEXT IS BEST!

VA Studio: If able to safely exit the building, do so. Close off entrances to the studio. Barricade if possible. Seek refuge near the care coordinator office and inside this office if possible. Shut and barricade this door if possible.

Lunch Room: If able to safely exit the building, do so. Close off entrances to the room. Barricade if possible.

Ceramic Studio: If able to safely exit the building, do so. Close off entrances to the room. Barricade if possible and cover windows.

Back Rehearsal Room: If able to safely exit the building, do so. Close off entrances to the room. Barricade if possible and cover windows.

Theater: If able to safely exit the building, do so. Close off entrances to the studio. Barricade if possible. Seek refuge near the care coordinator/department manager office and inside this office if possible. Shut and barricade this door if possible. Seek refuge in the basement only if accessible and could be done safely, quietly, and quickly.

Fiber Arts Gallery: Since this studio is open with no doors, attempt to exit the building first if safe to do so. If danger is imminent, hide. If able to cross the hall safely, hide in the small conference room and attempt to barricade the door.

If loud “pops” are heard and gunfire is suspected, take immediate action by alerting clients and staff to remain quiet and seek refuge under tables or in corners of the rooms if able to do so without assistance. Barricade the entrances to the room quickly, turn off lights, then assist clients as needed. Remain as quiet as possible. Keep cell phones on SILENT (make sure they won’t vibrate or ring!)

Remember:

Remain in lockdown until authorities provide the all-clear.

Illness Policy:

Interact Center is not equipped to care for ill clients or staff. Therefore, staff or clients experiencing illness should remain home until they are free of fever for 24 hours and well enough again to participate in routine activities.

Please reference the Health Counseling Services Medication and Health Care Policy and Procedure Manual for additional information regarding infection control and illness procedures.

COVID-19:

Due to the spread of COVID-19 infection, artists that become ill with COVID-19 symptoms will be asked to remain home until all the following criteria are met:

1. They feel better. Their cough, shortness of breath, or other symptoms are better.
2. They have had no fever for at least 24 hours, without using medicine that lowers fevers.
3. It has been 10 days since they first felt sick. **Alternatively, proof of a negative COVID test can eliminate the need to remain home for 10 days.**

Symptoms of COVID-19 infection may include any of the following:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

More serious signs of COVID-19 infection may include any of the following. If you are showing any of these signs, seek emergency medical care immediately.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone

Elopement/Missing Artist Policy:

Elopement:

If a staff member observes a confused artist attempting to leave the center suddenly, they will attempt to prevent the artist from exiting. If their efforts fail to prevent the artist from leaving the building, staff will immediately notify a second staff member to assist. One staff should stay with the artist at all times and attempt to redirect the artist safely back into the building. The second staff member should remain at the center and be prepared to call 911. Should the first staff member be unable to redirect the artist back into the building after 30minutes (or sooner if there is a safety risk) or lose sight of the artist, staff will immediately call 911. Be prepared to provide the following information:

- Name and/or nickname
- Sex
- Age
- Photograph (if available)
- Physical description (height, weight, race, color of hair and eyes)
- Where the artist was last seen
- Mental condition at time of incident (confusion, anger, etc.)
- Language spoken
- Description of clothing being worn
- Home address
- Address of any known family or friends

Following an incident of elopement, staff will document on an incident report. Staff should contact the case manager, legal representative, and house staff of the incident. The director reviewing the report will assess whether policies were followed and if there is a need for new policies or training to be implemented.

Missing Artist:

If at any point, staff believe that an artist has gone missing from the center, they will immediately notify a supervisor. The supervisor should first check with reception desk to ensure the artist has not already left for the day. The supervisor should then conduct a full interior search of the building. They may recruit assistance from other staff as needed. Check all rooms, bathrooms, closets, etc. If the artist has not been located inside the building, they will check the immediate exterior of the building including the picnic tables and smoking zone. If the artist has still not been located, call 911. Then notify the emergency contacts, legal representative, house staff, and case manager.

Following the incident, staff will document on an incident report. The director reviewing the report will assess whether policies were followed and if there is a need for new policies or training to be implemented.

Community Time Guidelines:

Community Time – The level of independence an Interact artist can have and still be safe.

Levels of Community Time are established by:

- Parents or guardians, case manager, Interact staff, and other responsible parties.
  - They all contribute information that is codified in the artist's **Risk Management Plan.**
- Interact is required to follow these agreed upon guidelines and cannot make other decisions.

Defining Levels of Community Time:

- ***None*** – Cannot leave the Theater or Studio without an escort.
  - Escorts can be:
    - Staff or Substitute Staff
    - NOT volunteers or interns
    - NOT other artists – unless that permission is SPECIFIED in the Risk Management Plan
- ***Restricted*** – Defines areas outside the Theater or Studio where the artist can go unescorted. Restricted allowances may be different for various artists. It is important to familiarize yourself with each artist's individual Risk Management Plan.
- ***Unlimited*** – Artist has complete independence.

Where Information is Posted:

- Risk Management Plans are posted in each client binder.
- Community Time Levels are also notated on attendance records and fire/severe weather attendance sheets.

Changing Levels of Community Time:

- Cannot be made *less* restrictive without written approval or parents/guardians, case manager, or other responsible party, and a corresponding change in the Risk Management Plan.
- Levels can be reviewed with responsible parties if we believe there are circumstances that warrant a change, either more or less limiting.
- If we observe continuing situations which we believe warrant increased restrictions:
  - Request that the artist comply immediately to avoid an emergency.
  - Follow up immediately with a formal recommendation to their team.

Reporting:

If an artist with restricted or no community time is outside specified boundaries unescorted:

- Log the occurrence via an Incident Report.
- Notify that artist's Client Care Coordinator.
- Have the Client Care Coordinator notify the case manager immediately if this seems to be intentional or repeated behavior.
- **Repeated violation of Community Time Guidelines by an artist may be cause for demission.**

Advising All Staff of Changes in Community Time Levels:

- Advise the entire center via email when a Community Time Level changes for any artist.
- Note changes immediately on the attendance sheets and in artist's files, noting any special circumstances.

Incident Response and Reporting

Policy:

As a licensed provider, Interact must respond to, report, and review all incidents that occur while providing services in a timely and effective manner.

An "incident" means any occurrence which involves an artist that requires the program to make a response that is not part of Interact's ordinary provision of services to that artist. An incident may include the following types of situations:

- Serious Injury
    - Fractures
    - Dislocations
    - Evidence of internal injuries
    - Head injuries with loss of consciousness or potential for a closed head injury or concussion without loss of consciousness requiring a medical assessment by a health care professional, whether or not further medical attention was sought
    - Lacerations involving injuries to tendons or organs and those for which complications are present
    - Extensive second degree or third degree burns and other burns for which complications are present
    - Irreversible mobility or avulsion of teeth
    - Injuries to the eyeball
    - Ingestion of foreign substances and objects that are harmful
    - Near drowning
    - Heat exhaustion or sunstroke
    - Attempted suicide
    - All other injuries and incidents considered serious after an assessment by a health care professional, including but not limited to self-injurious behavior, a medication error requiring medical treatment, a suspected delay of medical treatment, a complication of a previous injury, or a complication of medical treatment for an injury
- Death
- Any situation requiring Interact call 911, a mental health crisis intervention team, law enforcement, or the fire department.
- Unauthorized or unexplained absence or elopement of an artist.
- Conduct by a person receiving services against another person receiving services that:
    - Is so severe, pervasive, or objectively offensive that it substantially interferes with a person's opportunities to participate in or receive service or support;
    - Places the person in actual and reasonable fear of harm;
    - Places the person in actual and reasonable fear of damage to property of the person; or
    - Substantially disrupts the orderly operation of the program.
- Any sexual activity between persons receiving services involving force or coercion.
    - "Force" means the infliction, attempted infliction, or threatened infliction by the actor of bodily or commission or threat of any other crime by the actor against the complainant or another, harm which (a) causes the complainant to reasonably

believe that the actor has the present ability to execute the threat and (b) if the actor does not have a significant relationship to the complainant, also causes the complainant to submit.
    - "Coercion" means words or circumstances that cause the complainant reasonably to fear that the actor will inflict bodily harm upon, or hold in confinement, the complainant or another, or force the complainant to submit to sexual penetration or contact, but proof of coercion does not require proof of a specific act or threat).
- Any emergency use of manual restraint. REMEMBER, Interact does not permit the use of manual restraints.
- A report of alleged or suspected vulnerable adult maltreatment.

Response Procedures:

- **Serious injury**
    - In the event of a serious injury, staff will provide emergency first aid following instructions received during training.
    - Summon additional staff, if they are immediately available, to assist in providing emergency first aid or seeking emergency medical care.
    - Seek medical attention, including calling 911 for emergency medical care, as soon as possible.

- **Death**
    - If staff are alone, immediately call 911 and follow directives given to you by the emergency responder.
    - If there is another person(s) with you, ask them to call 911, and follow directives given to you by the emergency responder.

- **Medical emergency, unexpected serious illness, or significant unexpected change in an illness or medical condition**
    - Assess if the person requires the program to call 911, seek physician treatment, or hospitalization.
    - When staff believes that a person is experiencing a life threatening medical emergency they must immediately call 911.
    - Staff will provide emergency first aid as trained or directed until further emergency medical care arrives at the program or the person is taken to a physician or hospital for treatment.

- **Mental health crisis**
    - When staff believes that a person is experiencing a mental health crisis they should notify a staff member certified in Mental Health First Aid immediately. If this staff member is not readily available, call 911 or a mental health crisis intervention team.

- **Requiring 911, law enforcement, or fire department**
    - For incidents requiring law enforcement or the fire department, staff will call 911.

- For non-emergency incidents requiring law enforcement, staff will call 651-291-1111.
- For non-emergency incidents requiring the fire department, staff will call 651-266-8989.
- Staff will explain to the need for assistance to the emergency personnel.
- Staff will answer all questions asked and follow instruction given by the emergency personnel responding to the call.

- **Unauthorized or unexplained absence**
  - When a person is determined to be missing or has an unauthorized or unexplained absence, staff will take the following steps:
    - If the person has a specific plan outlined in his/her Coordinated Services and Support Plan Addendum to address strategies in the event of unauthorized or unexplained absences that procedure should be implemented immediately, unless special circumstances warrant otherwise.
    - An immediate and thorough search of the immediate area that the person was last seen will be completed by available staff. When two staff persons are available, the immediate area and surrounding neighborhood will be searched by one staff person. The second staff person will remain at the program location. Other persons receiving services will not be left unsupervised to conduct the search.
    - If after no more than 15 minutes, the search of the facility and neighborhood is unsuccessful, staff will contact law enforcement authorities.
    - After contacting law enforcement, staff will notify a Director level staff who will determine if additional staff are needed to assist in the search.
    - Attempt to keep a current photo in each person's file to be made available to law enforcement.
    - When the person is found, staff will return the person to the service site, or make necessary arrangements for the person to be returned to the service site.

- **Conduct of the person**
  - When a person is exhibiting conduct against another person receiving services that is so severe, pervasive, or objectively offensive that it substantially interferes with a person's opportunities to participate in or receive service or support; places the person in actual and reasonable fear of harm; places the person in actual and reasonable fear of damage to property of the person; or substantially disrupts the orderly operation of the program, staff will take the following steps:
    - Summon additional staff, if available. If injury to a person has occurred or there is eminent possibility of injury to a person, implement approved therapeutic intervention procedures following the policy on emergency use of manual restraints (see EUMR Policy).
    - As applicable, implement the Coordinated Service and Support Plan Addendum for the person.
    - After the situation is brought under control, question the person(s) as to any injuries and visually observe their condition for any signs of injury. If injuries

are noted, provide necessary treatment and contact medical personnel if indicated.

- **Sexual activity involving force or coercion**
  - If a person is involved in sexual activity with another person receiving services and that sexual activity involves force or coercion, staff will take the following steps:
    - Instruct the person in a calm, matter-of-fact, and non-judgmental manner to discontinue the activity. Do not react emotionally to the person's interaction. Verbally direct each person to separate areas.
    - If the person does not respond to a verbal redirection, intervene to protect the person from force or coercion, following the EUMR Policy as needed.
    - Summon additional staff if necessary and feasible.
    - If the persons are unclothed, provide them with appropriate clothing. Do not have them redress in the clothing that they were wearing.
    - Do not allow them to bathe or shower until law enforcement has responded and cleared this action.
    - Contact law enforcement as soon as possible and follow all instructions.
    - If the person(s) expresses physical discomfort and/or emotional distress, or for other reasons you feel it necessary, contact medical personnel as soon as possible. Follow all directions provided by medical personnel.

- **Emergency use of manual restraint (EUMR)**
  - Follow the EUMR Policy. REMEMBER, Interact does not permit the use of manual restraints.

- **Maltreatment**
  - Follow the Vulnerable Adult Reporting Policy.

Reporting Procedures:

- **Completing a report**
  - Incident reports will be completed as soon possible after the occurrence, but no later than 24 hours after the incident occurred or the program became aware of the occurrence. The written report will include:
    - The name of the person or persons involved in the incident.
    - The date, time, and location of the incident;
    - A description of the incident;
    - A description of the response to the incident and whether a person's coordinated service and support plan addendum or program policies and procedures were implemented as applicable;
    - The name of the staff person or persons who responded to the incident; and
    - The results of the review of the incident.
  - When the incident involves more than one person, this program will not disclose personally identifiable information about any other person when making the report to the legal representative or designated emergency contact and case

manager, unless this program has consent of the person. The written report will not contain the name or initials of the other person(s) involved in the incident.

- **Reporting incidents to team members**
  - All incidents must be reported to the person's legal representative or designated emergency contact and case manager:
    - within 24 hours of the incident occurring while services were provided;
    - within 24 hours of discovery or receipt of information that an incident occurred; or
    - as otherwise directed in a person's coordinated service and support plan or coordinated service and support plan addendum.
  - This program will not report an incident when it has a reason to know that the incident has already been reported.
  - Any emergency use of manual restraint of a person must be verbally reported to the person's legal representative or designated emergency contact and case manager within 24 hours of the occurrence. The written report must be completed according to the requirements in the program's emergency use of manual restraints policy. REMEMBER, Interact does not permit the use of manual restraints.

- **Additional reporting requirements for deaths and serious injuries**
  - A report of the death or serious injury of a person must be reported to both the Department of Human Services Licensing Division and the Office of Ombudsman for Mental Health and Developmental Disabilities.
  - The report must be made within 24 hours of the death or serious injury occurring while services were provided or within 24 hours of receipt of information that the death or serious injury occurred.
  - This program will not report a death or serious injury when it has a reason to know that the death or serious injury has already been reported to the required agencies.

- **Additional reporting requirements for maltreatment**
  - When reporting maltreatment, this program must inform the case manager of the report unless there is reason to believe that the case manager is involved in the suspected maltreatment.
  - The report to the case manager must disclose the nature of the activity or occurrence reported and the agency that received the maltreatment report.

- **Additional reporting requirements for emergency use of manual restraint (EUMR)**
  - Follow the EUMR Policy. REMEMBER, Interact does not permit the use of manual restraints.

Reviewing Procedures:

Completed incident reports are to be given to the Director of Licensing for final review and tracking. The Director of Licensing will conduct a review of all incidents to determine if policies and procedures were followed and adequate, if there is a need for additional staff training,

patterns of similar incidents, or the need for corrective action by Interact. If the Director of Licensing is involved in the incident, give completed reports to the Managing Director or Executive Director for final review.

- **Conducting a review of incidents and emergencies**
    - The review must be completed within 30 days of the incident.
    - The review will ensure that the written report provides a written summary of the incident.
    - The review will identify trends or patterns, if any, and determine if corrective action is needed.
    - When corrective action is needed, a staff person will be assigned to take the corrective action within a specified time period.

- **Conducting an internal review of deaths and serious injuries**
    - The review must be completed within 30 days of the death or serious injury.
    - The internal review must include an evaluation of whether:
        - Related polices and procedures were followed
        - The policies and procedures were adequate
        - There is need for additional staff training
        - The reported event is similar to past events with the persons or the services involved to identify incident patterns; and
        - There is need for corrective action by the program to protect the health and safety of the persons receiving services and to reduce future occurrences.
    - Based on the results of the internal review, the program must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the program, if any.
    - The internal review of all incidents of emergency use of manual restraints must be completed according to the requirements in the program's emergency use of manual restraints policy. REMEMBER, Interact does not permit the use of manual restraints.

Emergency Use of Manual Restraint Policy

Interact Center prohibits the use of manual restraints. Rather, alternative measures such as using de-escalation techniques and positive support strategies, should be taken to ensure the health and safety of our clients. For any reason if the use of a manual restraint occurs at Interact Center, staff will immediately report the incident to the Director of Licensing and Recruitment. If they are unavailable, staff must report immediately to either the Managing Director or the Executive Director.

De-Escalation Techniques:

Crisis Prevention Institute (CPI) recommends the following top 10 de-escalation tips:

1. Be empathic and nonjudgmental.
    a. Listen and acknowledge an individual's frustrations. Provide reassurances in that you can relate to and understand how they are feeling – This is empathy at its core.
2. Respect personal space.
    a. Encroaching on an individual's personal space can feel threatening or uncomfortable and may escalate a situation further.
3. Use nonthreatening nonverbals.
    a. Nonverbal language is as important, if not more important, than verbal language when it comes to de-escalation. Remain standing or sitting in an open posture (i.e. avoid crossing arms or legs). When attempting to de-escalate a situation remain calm with neutral facial expressions. Keeping your voice neutral or monotone can help avoid further escalation.
4. Avoid overreacting.
    a. Easier said than done! When behaviors escalate it can be easy to feel our blood pressure rising and want to speak our minds loudly. It is essential to not overreact to a given situation. Try to remain as calm as possible to not create more stressors in an already escalated environment.
5. Focus on feelings.
    a. In an escalated situation, chemical reactions in our brains and bodies can override our rational thinking. Anxiety, for example, expresses itself differently in everyone and can be triggered by a variety of factors. The easiest way to help de-escalate a person in distress is to simply acknowledge how they are feeling and offer support and compassion. Validate their feelings.
6. Ignore challenging questions.
    a. It can be hard to stay calm when someone is intent on getting a rise out of you. The best way to handle these types of escalating situations is to see past the challenging behaviors and focus on the true needs of the person. Don't lose your focus and always remember to downplay the challenge, never the person.
7. Set limits.
    a. Be clear, speak simply, and offer the positive choice first. Setting limits is all about offering choices with consequences. It is a teaching opportunity. Never make threats, offer ultimatums, or use limits as a form of punishment. This will only further escalate a situation.

8. Choose wisely what you insist upon.
    a. Keep your eyes on the big picture and remember to see the individual behind the challenging behavior. When setting limits or negotiations, be flexible and accommodating to the person's partialities so everyone ends in a win-win resolution.
9. Allow silence for reflection.
    a. Silence is a tool that can be used to facilitate reflection. It must be used however in a meaningful and safe manner. By using silence as a de-escalation tool, you need to monitor the person's response to the silence and ensure it is being used as a time for reflection, or ultimately a time to exhaust the outburst or behavior. If an individual feels that they are being ignored due to the silence, respond to the person calmly with short words or phrases to promote an atmosphere of affirmation and peace.
10. Allow time for decisions.
    a. Rather than ordering someone to change or stop doing a disruptive behavior, it is best to implement the above de-escalation techniques which should allow time for a person to reflect on their actions and come to a resolution on their own. By guiding an escalated person through these steps of de-escalation, that person will feel supported and not criticized. It is also important that you, the de-escalator, take time for yourself to reflect on the decisions you made along the de-escalation process.

Last of all, remember that we cannot control what happens in the world. We can only control how we respond to it.

Positive Support Strategies:

Positive Supports are approaches that do not include punishment or seclusion. By using Positive Supports, you are respecting the dignity and rights of every person while offering individualized, effective services. Interact Center prohibits the use of restraints (including chemical, mechanical, or use of isolation). Rather, Interact Center is a supportive place for individuals to come and be themselves. All Interact Center employees understand the working principles of person-centered planning and using positive supports. It is the backbone of what Interact Center is as a company!

According to Positive Supports Minnesota, Positive Supports focus around three central themes.

1. Positive Supports are about people, not programs.
    a. Interact Center works with each individual to develop unique, realistic, and individualized goals and plans of care.
2. Positive Supports are person-centered.
    a. Interact Center understands that every individual has a unique background and life story and incorporates this background into service planning and development.
3. Positive Supports are effective.

a. Since its inception, Interact Center has always put the person first! Interact Center has so many success stories stemming from this person-centered/person-first foundation!

How to avoid power struggles:

The best way to avoid a power struggle is to prevent one from happening in the first place. Building trusting relationships is a great starting point. To help prevent a power struggle, try to reframe the situation first, perhaps by adjusting the language you are using.

Pivoting is a great way to accomplish this. It is essentially the art of saying yes instead of no, and meaning the same thing. For example, an artist asks if you can help them with a new computer program for the rest of the afternoon. Say, “Yes I can help you with the computer, but only for 45 minutes.” Don’t Say, “No that’s not allowed. I am too busy, and the rule is that I can’t help you all afternoon.”

Be mindful not to fall into a transference trap. Transference occurs when an individual redirects their own emotions and feelings onto another person. Often, we are unaware that we may be doing this. Remember to check your personal problems and emotions at the door when coming to work at Interact. There obviously will be carry over between personal and work life, but it is essential to keep negativity out of the workspace to prevent power struggles or escalation of behaviors and situations.

What to do if conduct poses an imminent risk of harm:

If de-escalation techniques and positive supports fail to prevent or diminish the situation and there becomes an imminent risk of harm to self or others, Interact Center staff will take the following measures:

<u>If harm to self is imminent</u>

1. Ensure a safe scene. Remove any objects that may be used to harm self. Attempt to remove other clients from the immediate location as well.
2. Follow any client specific protocols that may already be in place (i.e. Does this client have a weighted blanket they use in times of high stress? Does this client prefer to sit in a quiet room when frustrated?)
3. If danger to self is imminent, call 911.
4. Keep the individual talking until other professionals can arrive to assist.
5. Complete an Incident Report after situation has been diffused.

<u>If harm to others is imminent</u>

1. Remove others immediately from the room and move to a safe location.
2. Keep talking with client to help diffuse escalation.
3. Call 911 if danger is imminent and unable to be diffused.
4. Complete an Incident Report after situation has been diffused.

Person-Centered Planning

Interact Center is dedicated to providing services in a manner that supports the principles of person-centered planning. By using person-centered service planning and delivery, clients at Interact Center are able to identify what is important to them, including their preferences for when, how, and by whom direct support services are provided. During an initial intake meeting, and at least annually thereafter, clients have an opportunity to discuss what is important for them to accomplish here at Interact Center. By using this creative approach to goal setting, Interact Center assures that clients are felt supported in their wishes and desires, and that they are leading meaningful lives and working toward artistic goals that are important to them. Though this person-centered approach, Interact Center staff are able to respect each person's history, dignity, cultural background, preferences, and desires.

How does Interact Center apply person-centered planning?

For new clients:

During the first 30 days at Interact Center, artists will be assigned a dedicated art instructor advocate to assist the artist in growing their craft and creating goals. Before the team gathers for a 30-day check in meeting, this instructor advocate will conduct an informal interview with the artist to talk about goal setting. During this interview, the instructor will ask the artist what they have been enjoying and what types of goals they would like to set for themselves. The instructors will also offer their own insights into what they have been observing over the past 30 days. Initial goals typically focus around skill building. An artist at Interact Center will have at least 2 goals that are measurable and observable. The goals that have been created will then be brought to the team 30-day check in meeting to be adjusted, finalized, and approved by everyone on the team.

Annual reviews and check ins:

After an artist completes their admission and 30-day check in meeting, progress on their goals, accomplishments, and interests will be recorded periodically. Monthly progress notes are written by staff discussing goal progression and any changes artists would like to see with their goals, if any. Quarterly reports detail attendance, medical updates, and reviews of client books. Annual reports are also created detailing an artist's accomplishments at Interact Center. These accomplishments include goal progression, sales reports, participation in workshops, performances, or fieldtrips/activities, etc.

When an artist's annual team meeting approaches, Interact Center advocates will once again meet with an artist to conduct an informal interview. This interview typically takes place the month before the team meeting. During the interview, artists will have the opportunity to discuss what they are enjoying most and what changes or additions to their goals they would like to make. Along with the input from other instructors and staff at Interact, artists can update their goals for the upcoming year. Interact's creative, collaborative process means that artists are fully engaged in all aspects of their support plans.

HIPAA / Confidentiality / Data Privacy

Client confidentiality is a major principle governing Interact's work environment. Interact recognizes the right of each artist to confidentiality and data privacy. This policy provides general guidelines and principles for safeguarding artist's rights to data privacy and accessing records.

Private data includes all information on persons that has been gathered by this program or from other sources for program purposes as contained in an individual data file, including their presence and status in this program.

Data is private if it is about individuals and is classified as private by state or federal law. Only the following persons are permitted access to private data:

- The individual who is the subject of the data or a legal representative.
- Anyone to whom the individual gives signed consent to view the data.
- Employees of the welfare system whose work assignments reasonably require access to the data. This includes staff persons at Interact.
- Anyone the law says can view the data.
- Data collected within the welfare system about individuals are considered welfare data. Welfare data is private data on individuals; including medical and/or health data. Agencies in the welfare system include, but are not limited to: Department of Human Services; local social services agencies, including a person's case manager; county welfare agencies; human services boards; the Office of Ombudsman for Mental Health and Developmental Disabilities; and persons and entities under contract with any of the above agencies; this includes Interact Center and other licensed caregivers jointly providing services to the same person.
- Once informed consent has been obtained from the person or legal representative there is no prohibition against sharing welfare data with other persons or entities within the welfare system for the purposes of planning, developing, coordinating and implementing needed services.

Data created prior to the death of a person retains the same legal classification (public, private, confidential) after the person's death that it had before the death.

At the time of service initiation, the artist and legal representative (if applicable) will be notified of this data privacy policy. During an artist's intake meeting and annually thereafter, Interact staff will provide each artist and legal representative with a Release of Information form to sign and approve. This release form grants Interact staff permission to discuss an artist's private data with the individuals authorized on the form. Having this permission will assist Interact with care planning and service delivery.

Staff Access to Private Data:

This policy applies to all program staff, volunteers, and persons or agencies under contract with Interact (paid or unpaid). Staff persons do not automatically have access to an artist's private data unless their specific work function require a need for the information, or if they are authorized by law to have access to the data.

Employees may not disseminate or use confidential information outside of their employment and may use it within their employment only when necessary in the rendering of services. Any written or verbal exchanges about an artist's private information by staff with other staff or any other persons must be done in such a way as to preserve confidentiality, protect data privacy, and respect the dignity of the person whose private data is being shared.

In the event of employee termination, whether voluntary or involuntary, employees continue to have a duty to refrain from using confidential information or disseminating it to any other individual or entity.

Confidential client records are always kept in a locked cabinet or supervised location and are not to be taken off the premise except with the permission of the Executive Director in connection with an Interact sponsored activity. Electronically stored client records are protected in a way in which they can only be accessed by individuals that have access to the Interact Center server and whom also have an interactcenter.com email address.

Annual HIPAA/confidentiality training is required at Interact Center for regular employees.

Access to Private Data:

Artists or their legal representatives have a right to access and review the artist record. If a review of the record is requested:

- A staff person will be present during the review and will make an entry in the artist's progress notes as to the person who accessed the record, date and time of review, and list any copies made from the record.
- An artist may challenge the accuracy or completeness of information contained in the record. Refer to Interact's grievance policy for lodging a complaint.
- Artists may request copies of pages in their record.
- No artist, legal representative, staff person, or anyone else may permanently remove or destroy any portion of the artist's record.

Under rule 245D.095 subd. 4, an artist's case manager and the foster care licensor may have access to the artist's records.

Grievance Policy

In any organization, dissatisfaction may arise. Such dissatisfactions are commonly referred to as grievances. At Interact, we believe that if an employee has a complaint, or grievance, regarding any aspect of Interact Center as a program, their position, wages, hours of work, or other terms or conditions of employment, the matter should receive consideration of all concerned. It is the policy of Interact to respond to any reasonable grievance or complaint and take the necessary actions to settle the issue.

Grievance Procedure:

1. If you have a grievance or complaint, notify your supervisor in writing. A simple email detailing your grievance will suffice. Your supervisor is required to investigate the situation and provide you with a response promptly within 5 business days.

2. If your grievance or compliant is not resolved or you feel you cannot notify your supervisor because they are the source of the compliant, notify the Managing Director in writing. The Managing Director is required to investigate the situation and provide you with a response promptly within 5 business days.

3. If the Managing Director does not resolve your grievance or complaint to your satisfaction, or you feel you cannot contact the Managing Director because they are the source of the compliant, notify the Executive Director in writing. If this does not resolve the situation, you may contact the Board Chair. The Board Chair will investigate the situation and may appoint a committee to conduct a grievance hearing if necessary, at which you are permitted to appear. The Board will provide you with a decision promptly within 14 calendar days. The grievance must be resolved within 30 calendar days.

4. There will be no adverse actions taken against an employee solely because of making a good faith grievance or complaint, regardless of the outcome of the investigation.

Managing Director: Glenis Zempel operations@interactcenter.com

Executive Director: Jeanne Calvit jeanne@interactcenter.com

Board Chair: Mary Kay Kennedy kennedy@selfadvocacy.org

612-381-6796

1415 Vince Trail. Eagan, MN 55121

If you have a problem that is more specifically addressed by the Vulnerable Adults Act, please follow the procedures outlined in the "Maltreatment of Vulnerable Adults" policy found in this manual.

Sexual Harassment:

It is the policy of Interact that any unwelcome sexual advance, request for sexual favor, and/or other verbal or physical conduct of sexual nature constitutes sexual harassment when:

- Submission to such conduct is made, either explicitly or implicitly, a term or condition of employment.
- Submission to or rejection of such conduct is used as a factor in any employment decision affecting and individual; or
- Such conduct has the purpose or effect of unreasonably interfering with any employee's work performance or creating an intimidating, hostile, or offensive working environment.

Sexual harassment is a serious offense and will not be tolerated. Likewise, retaliation against an employee who makes a charge of sexual harassment will not be tolerated.

Anyone found to have engaged in sexual harassment or retaliation will meet with appropriate sanctions, up to and including discharge.

Complaints:

If you believe that you have been the victim of sexual harassment in the workplace, follow the "Grievances" policy located in this manual. If you feel you cannot notify a supervisor, the Managing Director, or the Executive Director because they were a source of or party to the harassment, or if you believe your complaint has not been handled promptly, you may contact the Board Chair. They will investigate the matter further and respond to you promptly.

Professional Boundaries:

Artists at Interact are encouraged to give full expression to their creativity. Their art deals with the full range of human experience: birth, death, sexuality, religion, self-discovery, self-disclosure, illness, disability, love, all aspects of the human condition. Visual art may depict graphic imagery or involve personal and intimate subjects. Performing art may involve physical contact, role-playing, and/or dialogue that would not be typical in other settings between a professional and a vulnerable client. It is Interact's policy that all staff maintain professional boundaries and complete annual training on Maintaining Professional Boundaries.

Interact staff must exhibit and model the highest degree of artistic professionalism and mutual respect. Staff must exercise great care and discernment to avoid allowing the distinction between artistic expression and ordinary social interaction or caregiving to be blurred. Failure to maintain professional boundaries may cause clients discomfort and/or confusion over artistic expression in the forms of affectionate language, touch, or personal self-disclosures. While staff members, as artists themselves, participate in the art creation process, they must also always maintain enough distance and autonomy to identify and serve the client's needs first and foremost.

Professional boundaries must be maintained!

Apart from the obvious boundaries set by state and local law and regulations, such as those related to sexual harassment and maltreatment, determining appropriate ethical boundaries is often a question of context and judgment. The following are minimum ethical guidelines that all professionals providing services to clients at Interact are expected to observe:

1. The determination of appropriate boundaries is always the responsibility of the staff, never that of the client.
2. Individual, private socializing with clients is permitted with the consent of the client or a legal guardian, and so long as the Executive Director is aware of the activity. In the past, staff members have received permission from clients/guardians and the Executive Director to attend community art shows together outside of Interact Center's operations. Staff should be cautious in remembering to always maintain professional boundaries even in these private socialization activities.
3. Staff should not purchase any services or products from clients, expect in the context of a public sale or performance, or with the Executive Director's approval. While the practice of commissioning art and performances is common in the artist field, the approval of the Executive Director will help ensure that any individual agreement made between clients and professionals is above criticism. Artwork created at Interact Center must be purchased through the Interact Center gallery or e-commerce site.
4. Staff should refrain from giving personal gifts to any individual client, other than in the context of an Interact event or activity, or as approved by the Executive Director. Likewise, staff are encouraged to remind clients of personal boundaries when offered gifts. Small tokens may be accepted from clients, but gifts from clients to staff of significant value should be denied.
5. Lending money to or borrowing money from clients is not permitted except in the case of an emergency, and then must be documented appropriately.
6. If there were to be a change in the status of a client (for example, they discharge from the program and then become a volunteer or guest artist), the Executive Director will

meet with the staff to explain the change and point out any areas in which boundary issues will continue to require attention.

7. When in doubt, check it out! If you have any questions about a boundary issue, seek the advice of your department manager, the Director of Licensing and Recruitment, Managing Director, or the Executive Director.

Gift Acceptance Policy:

Acceptance of any contribution, gift, or grant is at the discretion of Interact Center. Interact will not accept any gift unless it can be used or expended consistently with the purpose and mission of Interact.

No irrevocable gift, whether outright or life-income in character, will be accepted if under any reasonable set of circumstances, the gift would jeopardize the donor's financial security.

Interact Center will refrain from providing advice about the tax or other treatment of gifts and will encourage donors to seek guidance from their own professional advisors to assist them.

Interact Center will accept donations of cash or publicly traded securities. Gifts of in-kind services, non-liquid securities, and contributions whose sources are not transparent or whose use is restricted in some manner, must be reviewed prior to acceptance due to the special obligations raised or liabilities they may post for Interact Center.

Interact Center will provide acknowledgments to donors meeting IRS substantiation requirements for property received by the charity as a gift. However, except for gifts of cash and publicly traded securities, no value shall be ascribed to any receipt or other form of substantiation of a gift received by Interact Center.

Interact Center will respect the intent of the donor relating to gifts for restricted purposes and those relating to the desire to remain anonymous. With respect to anonymous gifts, Interact Center will restrict information about the donor to only those staff members with need to know.

Interact Center will not compensate, whether through commissions, finders' fees, or other means, any third party for directing a gift or a donor to Interact Center.

Gifts Between Clients and Staff:

To ensure professional boundaries between clients and staff at Interact Center, staff should not purchase any services or products from clients, except in the context of a public sale or performance, or where staff has the approval of the Executive Director. Staff should refrain from giving personal gifts to any individual client, other than in the context of an Interact event or activity, or as approved by the Executive Director. Likewise, staff are encouraged to remind clients of personal boundaries when offered gifts. Small tokens may be accepted from clients, but gifts from clients to staff of significant value should be declined.

For further questions about gifts between clients and staff please refer to the "Professional Boundaries" policy located in this manual or speak with your manager.

Social Media:

With the permanent and viral nature of social media and technology, it is important to delineate appropriate and inappropriate use of social media for organization sponsored communications and use of social networking that may impact Interact. It is the responsibility of Interact to protect the privacy of our employees, artists, and other stakeholders, and to prevent unauthorized disclosure of information.

There is no expectation of privacy on Facebook, Instagram, Snapchat, Twitter, or other social medial platforms. Anyone who posts on social media should remember that they can be held liable for anything that is considered defamatory, obscene, or not true.

Postings on social media by Interact employees should be clear that they are personal postings and not representing Interact Center. If you choose to identify yourself as an Interact employee when posting personally, Interact asks that you please state your views expressed in the post are your own and not those of the company.

- Respect the privacy of your coworkers when posting.
- Do not make posts that are harassing, threatening, discriminatory, or disparaging against employees or anyone associated with or doing business with Interact.
- You may not use the Interact Center trademark/logo in your personal postings or blogs without permission of the Executive Director.
- You may not post company privileged information, including copyrighted materials or company issued documents.
- You may not personally sell company products or services.
- If you chose to engage in personal political or fundraising activities, please be clear that you are not speaking or acting on behalf of Interact.
- If contacted by the media or press about a post relating to Interact, please speak with your manager before responding.

Interact Center postings are typically authorized through the Executive Director, Director of Advancement, Advancement Coordinator, Gallery Director, or the Gallery Archivist. These posts are authorized specifically to ensure they maintain Interact's brand identity, integrity, and reputation, while minimizing the actual or potential legal risks.

Interact employees, including substitutes, guest artists, and volunteers, may post personal photos with Interact Center artists ONLY with the individual artist's permission (or that of a guardian), AND the clarification from the Department Manger that there is an active photo release on file. NO protected health information about an artist may be posted. All HIPAA regulations must be followed. When in doubt, check with your manager.

It is best practices of professional boundaries not to initiate "friend" requests on Facebook (or other social media platforms) with the artists who attend Interact. If an artist attending Interact initiates a "friend" request with an employee, the employee should use prudent judgement about whether to accept or decline.

Interact will investigate and respond to all reports of violations to this social media policy. Violation of Interact's social media policy may result in disciplinary action up to and including immediate termination. Interact reserves the right to take legal action where necessary against employees who engage in prohibited or unlawful conduct.

Computer Use:

Use of company provided computer resources must be appropriate and in accordance with this policy. Inappropriate use, which may be defined from time to time in the discretion of management, may subject you to discipline up to and including termination of employment or being asked to terminate your association with Interact altogether.

Inappropriate use of computer resources includes the following:

- Use of the system in violation of any company policy, including the Sexual Harassment Policy.
- Use of systems to create, send, or receive messages, pictures, or computer files which are fraudulent, illegal, pornographic, obscene, sexually suggestive, insulting, sexist, racist, discriminatory, or harassing. If you receive such material, you must notify your supervisor immediately.
- Use of resources to conduct illegal activities.
- Loading of software which is not approved in advance by management.
- Making illegal copies of licensed software.
- Using software that is designed to destroy data, provide unauthorized access to the company computer or communication equipment, or which would disrupt our computer or communication equipment in any way.
- Using the company e-mail and voicemail systems for personal business.

Any message or file created, stored, and/or sent using the company's computer or communications equipment is the property of the company. **Therefore, employees should have no expectation of privacy in any message that you store or send using the equipment.**

Virtual Interact provides unique challenges to our computer policy. Because Interact in unable to provide laptops to all employees, some staff will be asked to use their own personal computers while working remotely.

Please review the "Computer Use" policy in the Employee Handbook for further expectations.

Computer Use and 1:1 Staffing:

As a vibrant arts program, Interact Center encourages growth in one's artistic practice. Interact Center instructors are all working artists and/or professionals in the field, and are available to provide assistance, guidance, and training in new techniques an artist wishes to develop. Should these new skills require 1:1 staff attention at the computer, Interact Center artists will be limited to 45 minutes with the instructor. Should it be beneficial, a timer may be used.

Wi-Fi Use:

Interact Center employees and guests are free to use the center's Wi-Fi as needed. Please see your manager for the password. Do not give out the center's Wi-Fi information to clients.

Restroom Use:

Interact welcomes and respects all individuals regardless of sex, gender, gender identity, gender expression, or sexual orientation. Individuals are encouraged to use the restroom for which they identify. There is also a single stall, gender-neutral, accessible bathroom available for use.

Meals and Snacks

Interact Center does not supply meals or snacks but does have refrigerators available for artists to use. A vending machine with healthy options is also available for use. Coffee and water will be available for consumption at no cost. Artists are required to bring in lunches and snacks from home. If an artist forgets to bring a lunch for the day, artists can be provided with a meal replacement from the front desk which may include items like protein bars and fruit cups. The artist will be sent home with a reminder note about the importance of bringing a packed lunch every day.

Date: _____

Artist Name: _____

Today, I did not bring a lunch or snack to Interact Center. I was provided with a replacement meal. This note is to inform my house staff and/or to remind myself that I need to pack myself a lunch and snacks when attending Interact Center.

Smoking Policy

Smoking, vaping, and/or chewing tobacco is prohibited in the interior of the workplace. Smoking and vaping are permitted only where in compliance with the Minnesota Clean Indoor Air Act. There is a designated smoking zone located to the west of the main entrance. Clients and staff may smoke, vape, or chew tobacco at this location. All Interact clients are required to sign out and back in at the reception desk when taking smoke breaks.

Drug and Alcohol Prohibition Policy

Interact Center maintains a zero-tolerance drug and alcohol policy to ensure the health and safety of the clients served by the center. This policy applies to all employees, subcontractors, and volunteers. Failure to adhere to this policy will result in termination of employment.

Only trained staff will assist in administering prescription medications per physicians' orders as needed.

Drugs:

It is the policy of Interact Center that all employees, subcontractors, and volunteers, when directly responsible for persons served by the program, are prohibited from abusing prescription medication or being in any manner under the influence of a chemical or controlled substance that impairs the individual's ability to provide services or care.

The use, sale, manufacture, distribution, or possession of illegal drugs while providing care or to persons receiving services, or on Interact property (owned or leased), in our vehicles, machinery, or equipment (owned or leased), will result in corrective action up to and including termination.

Any employee convicted of criminal drug use or activity must notify the Managing Director no later than five days after the conviction. Failure to do so will result in corrective action up to and including termination.

Criminal conviction for the sale of narcotics, illegal drugs or controlled substances will result in corrective action up to and including termination.

Employees are to report immediately to the Managing Director if they have reasonable suspicion to believe that another employee may have illegal drugs in their possession while on duty during work hours. It is the responsibility of the Managing Director to notify appropriate law enforcement agency and/or licensing boards.

All program participants are also prohibited from abusing, possessing, distributing, manufacturing, or selling prescription medications, chemicals, drugs, or controlled substances while at Interact Center. Failure to adhere to this policy will result in corrective action up to and including termination from the program.

Alcohol:

It is the policy of Interact Center that all employees, subcontractors, and volunteers, when directly responsible for persons served by the program, are prohibited from consuming alcoholic beverages or being under the influence of alcohol on Interact property (owned or leased), in our vehicles, machinery, or equipment (owned or leased).

Alcohol and Events:

As a vibrant arts organization, Interact hosts may public events as part of its ongoing course of business. These include performances, gallery openings, open houses, and other events at which our artists, their families and friends, our supporters, and the general public can come and experience the exceptional work Interact does. Often at these types of events, alcoholic beverages may be served and/or available for purchase.

If an artist is representing Interact Center as a performer or visual artist, they will be encouraged to not consume alcoholic beverages as to maintain their professional integrity as an artist in the community. Should an artist consume alcoholic beverages, staff members may provide verbal prompts discouraging the drinking of alcohol.

Staff members representing Interact Center are strictly prohibited from consuming alcoholic beverages while having direct responsibility for an artist. When a staff is no longer “on the clock” and does not have direct client responsibility anymore they are free to consume alcoholic beverages if desired.

Date of last policy review: 11/12/2021

Date of last policy revision: 1/27/2020

Health Services Policy

At least once per month, a registered nurse will provide consultation and review of the health services offered at Interact. Health services include monitoring artist's health status and reporting changes to a caregiver, physician, and center director; educating and counseling artists on good health practices; and maintaining a listing of professional health resources available for referrals as needed by artists.

Nurse Notification & Health Monitoring

Interact maintains a consultant agreement with a registered nurse who assists in monitoring participants' health status for changes and supervises staff distribution of medication. There is not a registered nurse at the facility daily. The nurse provides on-call assistance during the regular program hours and completes, at a minimum, monthly in-person consultation and training visits on good health practices. Please review the Health Counseling Services Medication and Health Care Policy and Procedure Manual for additional policies and information.

Nurse for this site: Rachel Zingerman **Phone Number:** 651-329-5395 (Updated 6/2016)

IT IS EXPECTED THAT YOU NOTIFY YOUR NURSE WHEN:

- **A MEDICATION DISCREPANCY OCCURS.** Call if any of the following occur: wrong dose given, wrong medication given, medication given to the wrong person, medication is given at the wrong date, medication is given at the wrong time, medication given via the wrong route. If you discover a medication was not documented, call the person responsible to check if it was given; if it was not given, call the nurse.

- **THERE IS A PATTERN OF A PERSON REFUSING THEIR MEDICATION OR TREATMENT.**

- **MEDICATION OR TREATMENT CHANGE OCCURS.** Notify the nurse anytime a new medication/treatment is ordered, a dosage is changed, or a medication/treatment is discontinued.

- **MEDICATION SIDE EFFECTED ARE SUSPECTED.** Notify the nurse whenever you think a person may be experiencing side effects from medications.

- **OVER THE COUNTER MEDICATIONS ARE INDICATED.** See the ***Standing Orders for Over-the-Counter Medications*** list for specific instructions on when to call the nurse.

- **A PERSON BECOMES ILL OR INJURED.** See ***Care of Illness or Injury*** section for instructions on when to call the nurse.

- **A PERSON'S SEIZURE PATTERN CHANGES.** See the person's seizure plan for specific instructions.

- **YOU HAVE QUESTIONS ABOUT MEDICATION OR HEALTH CARE PROCEDURES OR DOCUMENTATION.**

- **YOU HAVE QUESTIONS ABOUT A PERSON'S HEALTH STATUS OR CARE.**

ANYTIME THERE IS AN EMERGENCY SITUATION CALL 911

IN THE EVENT YOU ARE UNABLE TO REACH YOUR NURSE AND YOU NEED IMMEDICATE DIRECTION, CALL THE HEALTH COUNSELING SERVICES ON-CALL NURSE.

Instructions to reach the on-call nurse:

1. Dial 612-990-9352
2. If your call is not answered, leave a brief message and include a ten-digit phone number where the call can be returned.
3. Please keep the line free so the nurse can return your call.
4. If your call is not returned within 30 minutes, call the nurse again.
5. If for some reason your call is not returned, call the person's physician.

The Health Counseling Services office can be reached on weekdays between the hours of 8:00 am and 5:00 pm at 612-436-0295.

email biggreenlake@yahoo.com

NURSE NOTIFICATION

Nurse for this site Rachel Zingerman Phone number: 6573295395 Cell ph #

IT IS EXPECTED THAT YOU NOTIFY YOUR NURSE WHEN:

- **A MEDICATION DISCREPANCY OCCURS**. Call if any of the following occur: wrong dose given, wrong medication given, medication given to the wrong client, medication is given on the wrong date, medication is given at the wrong time, medication given via the wrong route. If you discover a medication was not documented, call the person responsible to check if it was given; if it was not given, call the nurse.
- **MEDICATION OR TREATMENT CHANGE OCCURS**. Notify the nurse anytime a new medication/treatment is ordered, a dosage is changed, or a medication/treatment is discontinued.
- **MEDICATION SIDE EFFECTS ARE SUSPECTED**. Notify the nurse whenever you think a client may be experiencing side effects from medications.
- **OVER-THE-COUNTER MEDICATIONS ARE INDICATED**. See the ***Standing Orders for Over-the-Counter Medications*** list for specific instructions on when to call the nurse.
- **A CLIENT BECOMES ILL OR INJURED**. See ***Care of Illness and Injury*** section for instructions on when to call the nurse.
- **A CLIENT'S SEIZURE PATTERN CHANGES**. See the client's seizure plan for specific instructions.
- **A CLIENT'S MEDICAL, PSYCHIATRIC, OR HEALTH STATUS CHANGES**.
- **YOU HAVE QUESTIONS ABOUT MEDICATION OR HEALTH CARE PROCEDURES OR DOCUMENTATION.**
- **YOU HAVE QUESTIONS ABOUT A CLIENT'S HEALTH STATUS OR CARE.**

ANYTIME THERE IS AN EMERGENCY SITUATION, CALL 911.

IN THE EVENT YOU ARE UNABLE TO REACH YOUR NURSE AND YOU NEED IMMEDIATE DIRECTION, CALL THE HEALTH COUNSELING SERVICES ON-CALL NURSE.

Instructions to reach the on-call nurse:

1. Dial **612-990-9352**.
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3. Please keep the line free so the nurse can return your call.
4. If your call is not returned within 30 minutes, call the nurse again.
5. If for some reason your call is not returned, call the client's physician.

The Health Counseling Services office can be reached on weekdays between the hours of 8:00 am to 5:00 pm at 612-436-0295.

Anytime you talk to a nurse or physician, you must document the details in the Health Progress Notes.

W/Revised 9/07

Safe Medication Assistance and Administration Policy

Interact Center maintains a contract with Health Counseling Services. Only staff that receive medication administration training through Health Counseling Services will be allowed to assist with medication administration at Interact Center. These staff will also complete annual refreshers on medication administration. If questions or concerns arise, Interact Center staff may contact the center's contracted nurse or on-call nurse from Health Counseling Services. There is also a Health Counseling Services Medication and Health Care Policy and Procedure Manual onsite.

Approval for Interact Center staff to assist with medication administration will be indicated on the signed preliminary service agreement and service agreement.

> ***"Medication administration:***
>
> *☐ I do not require medications while at Interact during normal program hours.*
> *☐ I will be responsible to self-administer my medications while at Interact. Interact Center will not be responsible for any medications during normal program hours.*
> *☐ Interact Center will provide proper medication administration and documentation for any of my medications needed during normal program hours.*
> *Medications will be sent to Interact Center:*
> *☐ Daily by myself or my home staff.*
> *☐ In prescription bottles to be properly stored at Interact Center.*
> *☐ Other: _____*
>
> *Pending approval/permission from my physician, I ☐**permit** / ☐**do not permit** Interact to administer basic Standing Order Medications as needed."*

If Interact is responsible for medication administration, an ***Information About Medications*** form must be filled out. If Interact Center is responsible for administering any psychotropic medications, the ***Psychotropic Information*** form must be filled out.

The following information can also be located in the Health Counseling Services Medication and Health Care Policy and Procedure Manual.

POLICIES FOR MEDICATION ADMINISTRATION

REQUIREMENTS FOR MEDICATION ADMINISTRATION PROCEDURES

To insure safe, consistent, and accurate provision of healthcare, it is necessary that the Adult Day Services have standardized policies and procedures for medication and treatment assistance / administration.

1. Medication administration procedures must be established in consultation with a registered nurse. These procedures are found in this manual.
2. Medication administration procedures must include those procedures necessary to implement medication and treatment orders. They include:

- Medication administration and treatment procedures,
- Staff training requirements for medication administration / treatment,
- Documentation procedures,
- Notification procedures, and
- Review of systems to insure safe medication handling and administration with a correction plan, if indicated.

3. When an individual's healthcare needs change, procedures for medication administration or treatments will be adapted as needed.
4. It is recommended that the Adult Day Services provider and nurse review these policies and procedures annually to evaluate continued adequacy and appropriateness to meet the specific needs of the individuals.
5. The nurse's signature on the front page of this manual indicates review and approval of the written procedures to assure safe medication handling and administration.

REQUIREMENTS TO ADMINISTER MEDICATIONS

1. Persons who may administer medication in the facility include the following:
    - Physicians, licensed nurses, or health care professionals certified to administer medications.
    - Staff must be at least 18 years of age.
    - Staff who have completed the state-approved medication administration course.
    - Staff who have received training on medication administration by a Registered Nurse.
    - Individuals may self-administer medications as appropriate if a program for self-administration has been developed.
2. Staff may be denied the responsibility of medication administration if they demonstrate repeated inability to correctly administer medications (See "Medication and Treatment Discrepancies").

MEDICATION ADMINISTRATION TRAINING

Medication training will:

- Include medication administration procedures, information on medications, monitoring side effects of medication, use of a drug reference manual, and other relevant topics.
- Be taught by a registered nurse.
- Include an observed skill assessment by a nurse to ensure that staff demonstrate ability to administer medications consistent with policies and procedures.

Documentation of medication training and observed skill assessment will be located in the employee's file. Documentation will include:

- The determination of competency for each route the staff will use to administer medications;
- The date of the training and demonstrated skill;
- The signature of the nurse observing the skill.

ROUTES OF MEDICATION ADMINISTRATION

Formalized staff medication administration training generally includes these routes:

- Oral
- Eye
- Ear
- Topical

These routes of administration will require specialized training:

- Nebulizer
- Inhaler
- Nasal spray
- Vaginal
- Rectal
- Gastrostomy
- Transdermal
- Buccal
- Sublingual

ADMINISTRATION REQUIREMENTS AND RESTRICTIONS

1. Medication must be administered in compliance with instructions received and established procedures contained in this manual.
2. Medications administered to a person must be administered from a properly labeled container.
3. Vaginal or rectal medications will not be routinely administered at the Adult Day Center. The registered nurse may evaluate to determine if staff can safely administer medications using these routes if a need arises.
4. Medications administered by injection may be self-administered or a licensed nurse may administer the injection.

AUTHORIZATION FOR MEDICATION ADMINISTRATION

1. Authorized from the guardian will be secured for the staff of the Adult Day Center to administer medication.
    - Authorization will be obtained on admission and annually (at the time of the Annual meeting).
    - Authorization may be documented on the *Authorization to Administer Medications* form. (An example of this form can be found in this section.)
2. Non-medicated, preventative, topical solutions such as hand lotion, sunscreen, and insect repellant may be administered without guardian consent and at the discretion of staff.
3. Authorization for the facility to administer stock supply of over-the-counter medication will be included on the authorization form.

SELF MEDICATION PROGRAMS

A formalized program for self-administration could be developed if the person has the necessary skills and abilities.

1. It will be the responsibility of the person's place of residence to determine criteria for self-administration of medication and to obtain the prescriber's orders for self-administration if required. The Adult Day Services will comply with the program established by the person's place of residence.
2. In the event the person is in a training program for self-administration and the person's place of residence requests the Adult Day Services staff to supervise the administration

of medications, staff will observe the person take his/her medication and will document the supervision on the medication administration record.
3. If there are concerns noted about a person's abilities in self-administration of medications, the staff will notify the person's place of residence.

MEDICATION ORDERS

Written prescriber's orders will be obtained for all medications to be administered. Medications may be ordered by a physician, dentist, or other health professional licensed to prescribe.

1. A copy of the written prescriber's orders will be requested from the person's place of residence and placed in the individuals' record at the Adult Day Services.
2. A current prescription label can serve as the written order.
3. Non-medicated, preventative, topical solutions such as hand lotion, sunscreen, and insect repellant may be administered without physician order based on the recommendations of the nurse and/or at the discretion of staff.

NOTIFICATION REQUIREMENTS FOR REPORTING CONCERNS ABOUT MEDICATIONS

1. The nurse will be notified of any concerns about the medication, including:
    - Side effects,
    - Effectiveness,
    - A pattern of the person refusing to take medication as prescribed,
    - All medication errors, and
    - Suspected adverse reactions.
2. Identified adverse reactions will be immediately reported to the prescriber.

COMMUNICATION CONCERNING MEDICATIONS

1. Concerns regarding medications (including effectiveness, side effects, adverse reactions, and issues about medications) may be communicated to the person's place of residence via phone. It is recommended the occurrence of this phone conversation be documented in the person's record.
2. An alternative method for communicating concerns to the person's place of residence is to submit them in writing. The *Health / Medication Concerns* form may be used for this purpose. A completed copy of this form will be sent to the person's place of residence. The original will be maintained in the person's record (see form in this section).

SUPERVISION OF STAFF IN MEDICATION ADMINISTRATION

1. It is the responsibility of the RN to provide on-going supervision and monitoring of the performance of medication administration.
2. This supervision may include:
    - Direct observation of the staff member administering medication
    - Monitoring of medication administration error reports
    - Periodic review of the procedures
3. If at any time the RN has determined that medication administration is not being performed safely, the RN may do one of the following:
    - Re-train the staff member
    - Require additional training

- Provide more frequent direct supervision
- Determine the staff member cannot adequately perform the delegated medication administration and inform the Adult Day Services provider

4. The nurse consultant will continually monitor medication administration systems to assure safe medication handling and administration. If the nurse determines there are concerns with the medication administration system, the nurse will review the medication administration system and determine a correction plan.

GENERAL GUIDELINES FOR MEDICATION ADMINISTRATION

1. Administer medication only when you have received training in medication administration and completed a demonstration of your skill.
2. The person administering the medication has the following responsibilities:
    - To administer the correct dose
    - Of the correct medication
    - To the correct person
    - Using the correct route
    - At the correct time
    - On the correct date
    - Charting the medication correctly
    - Storing the medication safely
3. Follow established procedures when administering medications.
4. Medications should be given in accordance with the frequency prescribed by the physician.
5. Specific hours of the day that medications are administered will be determined. If there is a problem with administering medications at the assigned time due to scheduling, the staff will notify the person's place of residence of this, so an alternative time may be assigned.
6. The person administering medication has the responsibility to know:
    - The medication's intended use.
    - Any reactions or side effects which might occur.
    - Any warnings or direction of a specific nature concerning the medication.
    - This information will be obtained from: a nurse, drug reference manual, physician, pharmacist, or the parents.
7. It is the responsibility of the person administering medications to be familiar with the condition of the individual (i.e.: allergies, ability to swallow, etc.).
8. When administering medications, pay attention to only one person at a time.
9. The person administering medications will do so directly to the individual, not via another person.
10. Follow warning label(s) on the medication container.
11. Do not use one individual's medication supply for someone else.
12. Never leave medication unattended.
13. All containers will be kept closed. Changes in color, odor, or consistency or suspected tampering must be reported to the person's place residence or the pharmacy. Do not administer this medication to the person.
14. Make sure all medications are stored safely.
15. PRN Medication

- PRN refers to medication that is administered on an as-needed basis. This may include prescription PRN medication, over-the-counter medication sent from the person's place of residence, and over-the-counter medication supplied by the adult day center.
- PRN medication will be given in accordance with the specific instruction provided. PRN medication will be given following criteria listed on the medication administration record. The reason for giving PRN medication and the outcome of giving the medication will be documented.
- Prior to administering PRN medication, staff will contact the person's place of residence to insure that adequate time as elapsed since the last dose was administered. If the staff is unable to reach the individual's caregiver, a minimum of 4 hours (check specific medication instructions) must elapse between the time the person arrives at the adult day center and the PRN medication is administered.
- Administration of all PRN medications will be documented. (See Medication Documentation Section.)
- The person's place of residence will be informed of all PRN medications administered.

16. Chart medications after they have been administered.
17. Notify the nurse of all new medication orders.
18. Notify the nurse, the person's place of residence and your supervisor of all medication omissions, errors, and refusals.
19. If you believe the person is having side effects of medication, call the nurse, or person's place of residence before administering the medication.

OBSERVED SKILL ASSESSMENT

Name of staff member _____

The staff member has successfully demonstrated the ability to administer medications by the following routes, according to facility procedures:

Route	***Date***	***Nurse Signature***
Oral	_____	_____
Skin/topical	_____	_____
Ear drops	_____	_____
Eye drops	_____	_____
Buccal	_____	_____
Sublingual	_____	_____
Inhaler	_____	_____
Nasal Spray	_____	_____
Gastrostomy	_____	_____
Other _____		_____
Other _____		_____
Other _____		_____

File in staff member's personnel file.

AUTHORIZATION FOR MEDICATION ADMINISTRATION

Regarding _____
Name

I authorize the employees of _____
who are trained in medication administration, to administer or assist in administering:

1. Oral or topical medications that are prescribed by the individual's physician or dentist and are required to be taken during Adult Day Center hours
2. Over-the-counter medications as directed to do so by the person's place of residence
3. The following over-the-counter medications from facility stock supply:

   Tylenol Extra Strength (Acetaminophen) 500 mg (o) 2 tablets or capsules every 6 hours as needed for discomfort and/or fever. Do not exceed 3 doses in 24 hours (Max. 3000 mg in 24 hours).

_____ _____
Individual or individual's legal representative Date

HEALTH/MEDICATION CONCERNS

Name: _____ Date: _____

Health Concern *(Check all areas of concern, describe under comments section)*

Mental/Emotional/Behavioral: ☐anxiety ☐crying ☐↑ tiredness/sedation ☐↑ confusion ☐agitation ☐restlessness ☐displaying known pain behaviors ☐↑ in target behaviors ☐unusual quietness	
Medication concerns: ☐refusing meds ☐displaying possible med side effects ☐low blood sugar concerns ☐high blood sugar concerns ☐reports taking med incorrectly	
Breathing: ☐bloody nose ☐shortness of breath ☐wheezing ☐cough ☐nasal discharge ☐nasal congestion	
Skin: ☐rash ☐itching ☐blue (cyanosis) ☐open sore ☐bruising ☐swelling ☐reddened area ☐pain ☐pus/discharge	
Hygiene/grooming: ☐toenail concerns ☐fingernail concerns ☐body odor ☐oral hygiene	
Ears: ☐right ☐left ☐both ☐pain ☐visible earwax ☐discharge	Eyes: ☐right ☐left ☐both ☐pain ☐discharge ☐redness ☐abnormal eye movement
Gastro-intestinal: ☐↑ choking episodes ☐reports nausea ☐vomiting ☐diarrhea ☐weight change ☐appetite change ☐constipation ☐reports stomach pain ☐dietary concerns ☐tube-feeding problems	
Muscular/skeletal: ☐swelling ☐stiffness ☐stumbling ☐lack of coordination ☐reports pain ☐abnormal movements	
Urinary Tract: ☐↑ frequency ☐incontinence ☐reports burning/pain ☐odor ☐difficulty voiding ☐catheter problems	
Discomfort: ☐headache ☐dizziness ☐sore throat ☐mouth pain ☐tooth pain ☐other pain location: _____	
Equipment concerns: ☐nebulizer ☐glasses ☐hearing aid ☐wheelchair ☐walker ☐other: _____	

Comments: _____

_____

_____

_____

Staff Signature _____

Contact Number _____

Follow up _____

INFORMATION ABOUT MEDICATIONS

Client: _____

Name and dose of medication:

Time to be administered:

Special instructions for administration:

How long is the medication to be given:

What is the reason for administering this medication?

What are the side effects of this medication we should be observing for?

If this medication is a PRN, we need to know the exact criteria for administering.

If this medication is a behavior controlling medication (psychotropic), complete the information on the back side of this form.

Name of person supplying this information **Date**

Comments:

PSYCHOTROPIC INFORMATION

Client: _____

List target behaviors (specific behaviors to be controlled by the medication).

Do you want us to collect data on these behaviors? ☐ No ☐ Yes

If yes, describe method for data collection.

Please send us any other relevant information.

Safe Transportation Policy

Typically rides to and from Interact Center will be scheduled with Metro Mobility. In rare circumstances, buses, public transit, or cab services may be utilized. Interact Center does not manage every artist's transportation. Please work with your Client Services Coordinator if needing assistance with managing your transportation.

It is the policy of Interact Center to promote safe transportation, with provisions for handling emergency situations, when Interact is responsible for transporting persons receiving services. The following policy applies to Interact Center owned vehicles and vehicles being rented by Interact Center for use to transport artists or supplies and equipment for Interact Center.

Interact Center will ensure the following regarding safe transportation:

1. Equipment used for transportation, including vehicles, supplies, and materials owned or leased by the program, will be maintained in good condition following the standard practice for maintenance and repair, including any ramps, step stools, or specialized equipment used to help people enter or exit the vehicle.

2. Vehicles are to be kept clean (interior and exterior).

3. Staff will report all potential mechanical problems immediately.

4. Staff will report all potential equipment, supply and material problems immediately.

5. Staff will report all accidents immediately.

6. Staff will report all vehicle maintenance and concerns to the Managing Director.

Interact Center will ensure the vehicle and drivers are properly insured when transporting artists.

All staff will follow procedures to ensure safe transportation, handling, and transfers of the person and any equipment used by the person when assisting a person who is being transported, whether or not this program is providing the transportation. When the program is responsible for transportation of the person or a person's equipment, staff will utilize the following assistive techniques:

1. Staff will provide assistance with seatbelts, as needed, to ensure they are correctly fastened.

2. Staff will assist with the use of any ramp or step stools to ensure safe entry and exit from the vehicle.

3. Staff will ensure all supplies, equipment (including wheelchairs and walkers or other mobility aids used by a person), and specialized equipment using proper vehicle restraints, are properly secured before the vehicle is in motion.

Program vehicles are to be utilized exclusively to for the purpose of transporting persons served by this program, and equipment and supplies related to the program.

Staff will be responsible for the supervision and safety of artists while being transported.

1. When the vehicle is in motion, seatbelts are to be worn at all times by all passengers, including the driver and all passengers.

2. Staff must be prepared to intervene in order to maintain safety if an artist being transported engages is known behavior that puts the person, the driver, or other passengers at risk of immediate danger of physical harm.

Staff will be prepared for emergencies to ensure safety. Vehicles will be equipped with the following in case of emergency:

1. Name and phone number of person(s) to call in case of emergency.

2. First aid kit and first aid handbook.

3. Proof of insurance card and vehicle registration.

In the event of a severe weather emergency, staff will take the following actions:

1. Monitor weather conditions. Listen to local television or radio or a weather-radio for weather warnings and watches.

2. Follow directions for the need to change plans and activities, or seek emergency shelter.

3. Inform passengers why plans and activities have changed. Assist passengers remain calm.

All staff are required to follow all traffic safety laws while operating the program vehicle. This includes maintaining a valid driver's license, wearing seatbelts, and obeying traffic signs while operating program vehicle.

All staff are prohibited from smoking, eating, drinking, or using cellular phones or other mobile devices will operating the program vehicle.

Insurance Coverage:

Interact Center carries comprehensive general liability insurance and hired and non-owned auto insurance. It also carries workers compensation insurance for eligible staff. You may speak with the Managing Director for further information.

Emergency Cab Rides:

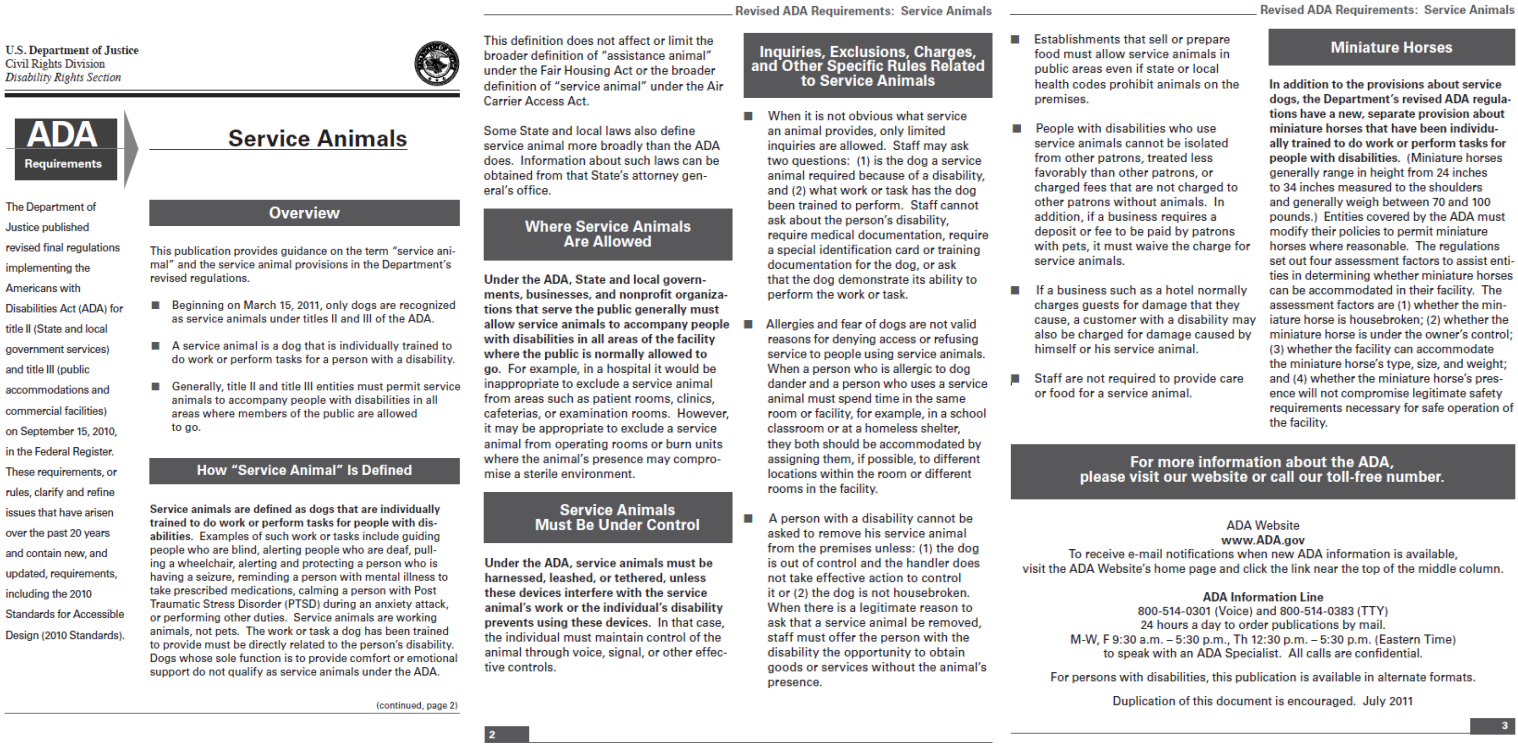
In the rare event that an urgent ride is needed through a cab service (i.e. Metro Mobility shut down), an artist's emergency contact MUST be contacted first to give permission for the artist to ride in the cab during that emergency situation. If both the primary and secondary emergency contacts cannot be reached after 60 minutes, staff should attempt calling any other contact person for the artist to receive this permission; this may include case managers, house staff, guardians, etc. If after another 30 minutes no one can be reached, 911 must be called. If calling 911, staff should instruct the operator that we are a day program and that there is a vulnerable adult present with no means of transportation available to get home. Artists must have emergency contact numbers and guardian numbers on file. These must be reviewed and updated at minimum annually during annual team meetings.

Pet Policy

Interact Center recognizes the importance of service and companion animals. While pets are not allowed at Interact Center during programing hours, services animals are welcome as required by the Americans with Disabilities Act. Companion animals are also considered on a case by case basis.

All animals that will be present at Interact Center during programing hours are required to be current on rabies shots and tags. Interact Center will also request a copy of the animal's annual examination by a licensed veterinarian confirming the animal is free from communicable diseases and parasites. Clients at Interact Center are made aware that service animals and/or companion animals may be present at the center during their initial intake to the center.

Clients that will have a service or companion animal present at Interact Center will be provided with a copy of the ADA Requirements on Service Animals.



U.S. Department of Justice
Civil Rights Division
Disability Rights Section

ADA Requirements

Service Animals

The Department of Justice published revised final regulations implementing the Americans with Disabilities Act (ADA) for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010, in the Federal Register. These requirements, or rules, clarify and refine issues that have arisen over the past 20 years and contain new, and updated, requirements, including the 2010 Standards for Accessible Design (2010 Standards).

Overview

This publication provides guidance on the term "service animal" and the service animal provisions in the Department's revised regulations.

- Beginning on March 15, 2011, only dogs are recognized as service animals under titles II and III of the ADA.
- A service animal is a dog that is individually trained to do work or perform tasks for a person with a disability.
- Generally, title II and title III entities must permit service animals to accompany people with disabilities in all areas where members of the public are allowed to go.

How "Service Animal" Is Defined

Service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties. Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA.

(continued, page 2)

This definition does not affect or limit the broader definition of "assistance animal" under the Fair Housing Act or the broader definition of "service animal" under the Air Carrier Access Act.

Some State and local laws also define service animal more broadly than the ADA does. Information about such laws can be obtained from that State's attorney general's office.

Where Service Animals Are Allowed

Under the ADA, State and local governments, businesses, and nonprofit organizations that serve the public generally must allow service animals to accompany people with disabilities in all areas of the facility where the public is normally allowed to go. For example, in a hospital it would be inappropriate to exclude a service animal from areas such as patient rooms, clinics, cafeterias, or examination rooms. However, it may be appropriate to exclude a service animal from operating rooms or burn units where the animal's presence may compromise a sterile environment.

Service Animals Must Be Under Control

Under the ADA, service animals must be harnessed, leashed, or tethered, unless these devices interfere with the service animal's work or the individual's disability prevents using these devices. In that case, the individual must maintain control of the animal through voice, signal, or other effective controls.

Inquiries, Exclusions, Charges, and Other Specific Rules Related to Service Animals

- When it is not obvious what service an animal provides, only limited inquiries are allowed. Staff may ask two questions: (1) is the dog a service animal required because of a disability, and (2) what work or task has the dog been trained to perform. Staff cannot ask about the person's disability, require medical documentation, require a special identification card or training documentation for the dog, or ask that the dog demonstrate its ability to perform the work or task.
- Allergies and fear of dogs are not valid reasons for denying access or refusing service to people using service animals. When a person who is allergic to dog dander and a person who uses a service animal must spend time in the same room or facility, for example, in a school classroom or at a homeless shelter, they both should be accommodated by assigning them, if possible, to different locations within the room or different rooms in the facility.
- A person with a disability cannot be asked to remove his service animal from the premises unless: (1) the dog is out of control and the handler does not take effective action to control it or (2) the dog is not housebroken. When there is a legitimate reason to ask that a service animal be removed, staff must offer the person with the disability the opportunity to obtain goods or services without the animal's presence.

- Establishments that sell or prepare food must allow service animals in public areas even if state or local health codes prohibit animals on the premises.
- People with disabilities who use service animals cannot be isolated from other patrons, treated less favorably than other patrons, or charged fees that are not charged to other patrons without animals. In addition, if a business requires a deposit or fee to be paid by patrons with pets, it must waive the charge for service animals.
- If a business such as a hotel normally charges guests for damage that they cause, a customer with a disability may also be charged for damage caused by himself or his service animal.
- Staff are not required to provide care or food for a service animal.

Miniature Horses

In addition to the provisions about service dogs, the Department's revised ADA regulations have a new, separate provision about miniature horses that have been individually trained to do work or perform tasks for people with disabilities. (Miniature horses generally range in height from 24 inches to 34 inches measured to the shoulders and generally weigh between 70 and 100 pounds.) Entities covered by the ADA must modify their policies to permit miniature horses where reasonable. The regulations set out four assessment factors to assist entities in determining whether miniature horses can be accommodated in their facility. The assessment factors are (1) whether the miniature horse is housebroken; (2) whether the miniature horse is under the owner's control; (3) whether the facility can accommodate the miniature horse's type, size, and weight; and (4) whether the miniature horse's presence will not compromise legitimate safety requirements necessary for safe operation of the facility.

For more information about the ADA, please visit our website or call our toll-free number.

ADA Website
www.ADA.gov
To receive e-mail notifications when new ADA information is available, visit the ADA Website's home page and click the link near the top of the middle column.

ADA Information Line
800-514-0301 (Voice) and 800-514-0383 (TTY)
24 hours a day to order publications by mail.
M-W, F 9:30 a.m. – 5:30 p.m., Th 12:30 p.m. – 5:30 p.m. (Eastern Time)
to speak with an ADA Specialist. All calls are confidential.

For persons with disabilities, this publication is available in alternate formats.

Scent-Sensitivity Policy:

In response to health concerns, Interact has developed a scent-sensitivity policy. Scented products may trigger reactions such as respiratory distress and/or headaches for some people. Artists, staff, and visitors are now asked to be aware of this and to please refrain from using highly scented personal products, such as hair products or perfumes. Scent free products would be preferred, however if choosing to use scented products, Interact asks that a minimal amount be used so that the scent is not noticeable from an arms-length distance. Interact Center supports this policy by using as many scent-free cleaning products as possible.

Laundry Policy:

Interact Center has a clothes washer and dryer located inside the ceramic studio. Interact Center clients are not to do laundry themselves. The ceramic studio instructor, or other designated staff, will be responsible for running laundry when needed.

Laundry may be run as needed so long as operation of the washer/dryer does not disrupt the artists working in the ceramic studio. A staff member MUST be in the building while the laundry machines are in operation.

Storage of chemicals and cleaning products:

All laundry products are to be stored in a locked cabinet when not in use. This locked metal cabinet is located in the **Back Hall.** This cabinet is to be locked at all times. Chemical data sheets can be found in this cabinet for every chemical/product located in the cabinet. If the cabinet lock is ever found to be broken or not functioning properly, staff are to report this to their supervisor immediately.

POISON CONTROL: 612-347-3141
Always call before administering any remedy by mouth.

Soiled Clothing:
It is not Interact Center's responsibility to do client laundry. Exceptions may be made under certain circumstances, up to staff member's discretion. For soiled clothing, while utilizing personal protective equipment, Interact Center staff should place the soiled clothing into a plastic, water-proof/leak-proof bag. Staff should attempt to double bag soiled clothing if possible. The bag should then be tied shut and labeled. The client should bring this bag of clothing home with them at the end of the day. If borrowing Interact Center clothing, clients should attempt to return this clothing as soon as possible, in clean condition.

OSHA:

AWAIR Program

(An Accident and Injury Reduction Program)
MN Rules: Chapter 5208

Company Safety Statement and Objectives

The foundation of the Interact Center for the Visual and Performing Arts Injury Prevention Program is that every employee is entitled to a safe and healthful work environment. Our Injury Prevention Program is focused on the protection of our employees and visitors. Every employee should make injury prevention a top priority.

We acknowledge that every employee is concerned for his or her own safety and the safety of co-workers/clients and will recognize that safety rules and policies are for their protection. The goals we have set for our Injury Prevention Program will be achieved only through a cooperative effort among all employees. Safe work habits, on the job awareness and knowledge of all safety rules and policies are a condition of employment at Interact Center. All employees are required to attend training to become familiar with rules and policies and to abide by them. These rules and policies will be enforced just as any other company policy. Failure to comply can result in reprimand, suspension, or employment termination.

All employees are encouraged to make suggestions that will assist in maintaining safe work conditions and should bring these suggestions to their supervisor's attention. It is through our joint participation that accidents can be prevented, but only you can make safe work practices a habit.

Accidents cause pain and suffering, wasted time and money, and can cost someone his or her life. Interact Center is committed to providing you with a safe place to work. We require your assistance and participation in keeping it that way. We will never ask you to commit an unsafe act or violate a safety rule. We expect the same from you. Our policy toward safety is in no way limited to the rules that follow. All unsafe practices, whether listed here or not, will be addressed.

-Jeanne Calvit

Executive Director
Artistic Director
Founder

Company Safety Goals and Objectives

Interact Center is committed to providing its employees with a safe and healthful working environment. To achieve this environment, Interact Center has established the following goals, objectives, and tactics:

Goal 1: We will establish and maintain a company culture that is committed to workplace safety and health.

Objectives:

1. We will establish an Interact Center Safety Committee, consisting of no less than 4 employees, that will be responsible for holding quarterly safety meetings. No more than half the committee can be members from upper management.
2. We will actively train employees on safe work habits and practices.
3. We will provide an atmosphere of open communication between employees and management.

Process:

1. Management will maintain an open-door policy with regards to workplace safety and health.
2. Safety hazards identified during Safety Committee meetings will be prioritized so they are corrected in a timely manner.

Goal 2: Interact Center will maintain zero employee accidents and injuries.

Objectives:

1. We will maintain the OSHA Form 300, 300A, and Form 301.
2. We will investigate thoroughly any reported accidents and injuries, so they may be prevented in the future.
3. We will provide employee training on safe work habits and practices.

Process:

1. As the designated Safety Coordinator, the Director of Licensing will maintain the OSHA Form 300, 300A, and Form 301.
2. An Interact Center Director will be responsible for conducting accident/injury investigations.
3. Employees will receive OSHA training at onboarding, and at minimum annually thereafter.

Safety Roles and Responsibilities

All responsibilities will be clearly communicated and understood. No person should be held responsible for performing a function unless that person also has the authority to accomplish it.

At Interact Center all employees, including administrative staff, must follow all safety rules at all times. **Everyone is responsible for safety in the workplace.**
For ALL Employees:

We want all Interact Center employees to be the safest, most knowledgeable, and most conscientious employees in our industry. To develop and maintain this professional image, our management must provide all employees with proper training. Interact Center employees must:

1. Understand all safety rules and policies, and work in such a manner that abides by these rules.
2. Maintain the physical and mental standards necessary for the job.
3. Daily inspect his or her assigned work area and equipment, and immediately report any unsafe conditions or damaged equipment.
4. Immediately report all accidents or near miss accidents involving property damage or injuries, regardless of who was at fault.
5. Become familiar with and abide by all local, state, and federal regulations that apply to his or her job activity and ask for training if needed.
6. Attend all required safety meetings and trainings.
7. Help extend the life of equipment through proper operation and avoidance of abuse.
8. Utilize all provided personal protective equipment and be familiar with the proper maintenance of it.

For Department Managers:

Managers are responsible for translating policies into action and for promoting safety activities among employees in their departments. They will provide leadership for their employees in their daily functions related to workplace safety and health.

1. Periodically inspect all areas in their department to identify safety hazards and act to correct all unsafe conditions or practices.
2. Ensure compliance with all company, local, state, and federal safety regulations.
3. Assist in orienting new employees to safe job procedures, assignments, requirements, and rules related to their job.
4. Assist in training employees involved in accidents and those whose performance or actions make additional training necessary.
5. Enforce the use of required personal protective equipment.

For Directors:

Directors accept the responsibility for impressing upon all employees that safety and injury prevention have a high priority at Interact Center. Directors will ensure that all rules and policies are followed.

1. Thoroughly investigate all accidents and injuries, and file all necessary reports in a timely manner.
2. Provide resources for training and monitoring the Injury Prevention Program.
3. Correct any reports of hazardous conditions or equipment at Interact Center.
4. Maintain open lines of communication between employees and management relative to the free exchange of safety suggestions and information.
5. Monitor the follow-up on recommendations made to improve performance and prevent accidents.

Safety Coordinator Responsibilities:

The Director of Licensing will be the designated Safety Coordinator at Interact Center. Their primary responsibility will be to maintain the Injury Prevention Program and to provide leadership in their daily functions related to safety.

Safety Committee Responsibilities:
At least four employees will make up the Interact Center Safety Committee. No more than half the committee can consist of upper management. Interact will ensure that this is a position of prestige and importance. The Safety Committee will:

1. Promote active participation.
2. Meet on a regular, quarterly basis with a pre-planned agenda and documentation of who attended, what was discussed and what action was taken.
3. Conduct regular (at minimum quarterly) safety inspections of all areas in the center and suggest corrective action on all hazards noted.
4. Be responsible for promoting safety awareness that will lead to accident and injury prevention.
5. Bring ideas and suggestions before management that will encourage safety awareness in all employees.
6. Keep management informed of situations that will jeopardize safety or the compliance with Interact Center's Injury Prevention Program.
7. Conduct monthly checks of Interact Center's fire extinguishers.

Work Standards and Rules

All Interact Center employees are expected to be familiar with and abide by all the following rules. Our policy toward safety is in no way limited to these rules alone. All unsafe practices, whether listed here or not will be addressed. Failure to comply with any safety rule will be cause for disciplinary action and can lead to reprimand or termination. All employees will:

1. Always report any injuries or accidents to the immediate supervisor.
2. Know where first aid kits are located. All injuries should be treated immediately.
3. Refrain from practical jokes and horseplay which can lead to accidents. Such activities will not be tolerated. Never distract another employee.
4. Obey all warning tags and signs posted throughout the workplace or affixed to machinery, equipment, or tools. Be careful when lifting or pushing heavy objects. Avoid unnecessary back injuries by following rules of common sense:
    a. Use equipment to move heavy items whenever practical.
    b. Use team lifting to share the load.
    c. If an employee must lift a load alone, they will:
        i. Know your limitations.
        ii. Keep neutral curve in low back.
        iii. Keep head up
        iv. Lift with legs.
        v. Bring load in close to body.
5. Know where a fire extinguisher is located and how to properly operate it. Do not play with fire extinguishers.
6. Keep all areas neat, orderly, and free from trash and debris.

7. Check the condition of all personal protection equipment, machinery, and extension cords daily. Never remove ground wires from electrical tools. Never attempt to make electrical repairs on your own.
8. Smoking is only allowed outside in designated areas. Completely extinguish all matches and butts.
9. Possessing, using, selling, or being under the influence of alcohol, marijuana, hallucinogens, or any other drug or controlled substance on company property or under company time is strictly prohibited and could result in immediate termination of employment.

Enforcement Process

Responsibilities do not stop with the management. Employees are responsible to obey all company rules and to work in such a manner that will prevent injury to themselves, clients, or fellow employees.

Interact Center's intent is not to discipline employees who are involved in non-preventable accidents. Interact Center's position is to work with employees to make them safer workers. Disciplinary procedures are established to deal with any employee who disregards company policies and rules, or who may be repeatedly negligent in their duties. Our procedures are set up to first warn, then if properly communicated warnings are not heeded, to discipline problem employees. Interact Center cannot and will not permit negligent individuals to repeatedly injure themselves or to put clients or their fellow employees in danger.

Should there be a violation of safety rules or practices, the following disciplinary procedures will apply:

1. **Verbal Warning:** The employee will be given a verbal warning for a minor offense. A record of this warning will be placed in the employee's personnel file.
2. **Written Warning:** The employee will be given a written warning for relatively serious or repeat offenses. Copies of the written warning are filed in the employee's personnel file.
3. **Suspension:** The employee may be suspended from work duties without pay and with a written warning for continual repeated offenses or sever violations that result in injury to themselves or others. A copy of the written warning will be filed in the employee's personnel file.
4. **Termination of Employment:** The employee may be terminated for flagrant violations of company policies and procedures. Termination may also occur if the employee persists in continued or repeated violations of company rules after repeated warnings and continues at an unacceptable level or performance.

Employee Training

The training of all employees (including management and admin staff) is vital in a successful Injury Prevention Program. Interact Center management provides training to all employees. Tracking of employee training will be maintained in the employee training file.

Safety training is not a one-time occurrence. Continual monitoring and interaction between employees and supervisors demonstrate accident prevention efforts.

Safety rules and safe work procedures should be discussed specifically with each employee on an ongoing basis.

Work routines should be reviewed periodically. Employees should be given explanations of potential hazards to avoid and safeguards to follow. Discussions should include a review of safety procedures, along with an explanation of why they are necessary.

Safety training may include the following topics:

- What is an infectious agent?
- Blood Borne Pathogens
- How to use personal protective equipment
- Hepatitis, Tuberculosis, & HIV
- Needlestick precautions
- Hazardous substances and art supplies
- Kiln operation

It may become necessary to retrain employees in safety rules or procedures. It is vital to our Injury Prevention Program that all safety training programs and meetings be carefully documented. Written records of all training activities will be maintained in the employee training file.

Worksite Review and Inspections

Job safety review and inspection is a process for identifying hazards and developing safe job procedures. Interact Center is committed to providing a safe and healthful work environment for its employees. Part of providing this environment involves uncovering potential hazards in the workplace. These hazards may have been overlooked in the layout of the building or the design of equipment, been developed after production started, or resulted from changes in work procedures or personnel.

The four basic steps in doing a job safety review and inspection are:

1. Select the job to be reviewed. Selecting jobs to be reviewed should be based on frequency of accidents, injury severity, potential injury severity and whether the job is newly established.
2. Break the job down into successive steps or actions and observe how they are performed.
3. Identify the hazards or potential accidents. Look for accident types – what can the employee be struck by, caught on, contacted by, etc.?
4. Develop solutions for potential accidents. This may include writing a standard operating procedure, finding a new way to do the task, changing physical conditions, or reducing the number of times the task must be performed.

The major benefits of job safety reviews come after completion. Safety attitude and awareness among employees is improved. The analysis can also be used for initial job safety training and as pre-job safety instructional tools. Properly used, job safety review and inspections can reduce accident frequency and severity.

All reviews and inspections will be documented by the Interact Center Safety Committee for follow-up in the future to determine if recommendations have been implemented.

Accident Reporting and Investigation Process

The directors at Interact Center accept the responsibility for minimizing losses due to unsafe practices by promptly and accurately investigating all accidents whether an injury occurs or not. Accident investigation is a vital part of our Injury Prevention Program and is designed to prevent or control unsafe practices. The information obtained in a thorough investigation will assist in determining when an accident occurred and then give a basis for taking corrective action. The investigation must include a written report.

Accident investigation procedure:
Usually the Director of Licensing is responsible for accident investigation. The Managing Director may find it necessary to also be involved in the investigation. An investigation should always be done as soon after the accident as possible. Facts should be gathered, and statements taken while the accident is still fresh in the minds of those involved. If possible, every employee who is involved or who witnessed the incident should be interviewed. All possible causes should be studies and accurate details should be obtained. The accident investigator should interview witnesses separately and caution should be used in jumping to hasty conclusions.

Preparing a written report:
All possible questions related to the accident must be answered and corrective actions must be recommended.

1. ***Personnel and background information.*** Name of the person involved in the accident. What are the employee's regular job tasks? What are the nature of the injuries and the injured body parts?
2. ***Accident description and related information.*** Give the exact location of the accident. What was the job task the injured was doing at the time? What was the exact step or part of the job being done? What type of accident occurred?
3. ***Analysis of accident causes.*** What did the injured employee do or fail to do that may have contributed directly to the accident? What defective or otherwise unsafe conditions of tools, equipment, machinery, structures, or work contributed directly to the accident? What was the primary type of unsafe action or condition involved?
4. ***Actions to prevent accident recurrence.*** Indicate actions needed to prevent recurrence. Identify persons responsible for planned corrective actions.
5. ***Miscellaneous information.*** When was the last job hazard analysis of the job conducted? Who investigated the accident?

Reporting procedures:
All accidents must be reported to a supervisor as soon as possible. If an employee is injured, be sure to get the injured employee the necessary medical attention first. Then, the Managing Director is responsible to report the injury to our workers' compensation provider as soon as possible to be sure the claim is processed as efficiently as possible. A copy of the accident investigation report should be attached to Interact's First Report of Injury when it is submitted to the insurance company.

HAZARD COMMUNICATION PROGRAM

1. Company Policy

To ensure that information about the dangers of all hazardous chemicals used by Interact Center for the Visual and Performing Arts is known by all affected workers, the following hazard communication program has been implemented. Under this program, workers will be informed of the requirements of the OSHA Hazard Communication Standard, the operations where exposure to hazardous chemicals may occur, and how workers can access this program, as well as labels and SDSs.

This program applies to any chemical which is known to be present in the workplace in such a manner that workers may be exposed under normal conditions of use or in a foreseeable emergency. All work areas that involve potential exposure to chemicals are part of the hazard communication program. Copies of the hazard communication program are available in the office of the Director of Licensing & Recruitment and in the Admin Hallway for review by any interested worker.

The Director of Licensing and Recruitment is the program coordinator, with overall responsibility for the program, including reviewing and updating this plan as necessary.

2. Container Labeling

Department Managers will verify that all containers received for use will be clearly labeled in accord with the requirements of HazCom 2012, including a product identifier, pictogram, hazard statement, signal word, and precautionary statements, as well as the supplier's contact information (name and address).

Department Managers in each work area will ensure that all secondary containers are labeled with the original supplier’s label or with an alternative workplace label. For help with labeling, see the Director of Licensing and Recruitment. If chemicals placed into a secondary container will be utilized immediately and not left unattended at any moment, labeling the secondary container is not necessary.

3. Safety Data Sheets (SDSs)

Department Managers and the Director of Licensing and Recruitment will be responsible for establishing and monitoring the company SOS program. The procedure below will be followed when an SDS is not received at the time of initial shipment.

> The Director of Licensing and Recruitment will periodically check for updates to SDS already being maintained. If updates are required, the Director of Licensing and Recruitment will update the 3-ring binder and train all impacted employees on the new SDS. The Director of Licensing and Recruitment may delegate Department Managers to lead any required training if needed. The Director of Licensing and Recruitment is also responsible for assisting department managers in determining if new products are hazardous chemicals requiring SDSs.

When ordering new inventory, Department Managers will add a new SDS to the 3-ring binder if the product is a hazardous chemical. Department Managers may check with the director of licensing and recruitment if unsure whether or not the product is hazardous.

The Interact Center Safety Committee will be responsible for annually reviewing the SDS binder for accuracy, safety and health implications, and to recommend any needed changes in workplace practices.

Copies of SDSs for all hazardous chemicals to which workers are exposed or are potentially exposed will be kept in a large 3-ring binder located in the Admin Hallway.

4. Employee Information and Training

The Director of Licensing and Recruitment is responsible for employee information and training. The Director of Licensing and Recruitment may delegate Department Managers to lead any required training if needed.

Every worker who will be potentially exposed to hazardous chemicals will receive initial training on the Hazard Communication standard and this program before starting work.

The training program for new workers is as follows:

Workers will be provided with a copy of this Hazard Communication Program. Workers will also complete a training (in person with the Director of Licensing and Recruitment or Department Manager) on GHS (Globally Harmonized System of classification and labeling of chemicals) and RTK (employee Right-to-Know).

Prior to introducing a new chemical hazard into any work area, each worker in that work area will be given information and training for the new chemical hazard. The training format will be as follows:

During the weekly department team meeting, the Director of Licensing and Recruitment or Department Manager will present the chemical SDS and describe how to utilize the chemical in a safe manner. They will also answer any questions that may arise regarding the use of the chemical.

5. Hazards of Non-routine Tasks

Periodically, workers are required to perform non-routine tasks that are hazardous. Examples of non-routine tasks are: confined space entry, tank cleaning, and painting reactor vessels. Prior to starting work on such projects, each affected worker will be given information by their Department Manager about the hazardous chemicals he or she may encounter during such activity. This information will include specific chemical hazards, protective and safety measures the worker should use, and steps the company is taking to reduce the hazards, including ventilation, respirators, the presence of another worker (buddy systems), and emergency procedures.

6. Informing Other Employers/Contractors

It is the responsibility of the Managing Director to provide other employers and/or contractors with information about hazardous chemicals that their workers may be exposed to on this work site, and suggested precautions for workers. It is the responsibility of the Managing Director to obtain information about hazardous chemicals used by other employers to which our workers may be exposed. Other employers and/or contractors will be informed of the hazard labels used by the company if utilizing an alternative workplace labeling system.

7. List of Hazardous Chemicals

A list of all known hazardous chemicals in the workplace is attached to this program. This list includes the name of each chemical, and the work area(s) in which each of the chemicals is used. Further information on each chemical may be obtained from the SDSs, located in the Admin Hallway.

When new chemicals are received, this list is updated within 30 days of introduction into the workplace. To ensure that any new chemical is added in a timely manner, the following procedures shall be followed:

> When purchasing a new chemical, the Director of Licensing and Recruitment and/or Department Manager will determine if the new chemical is hazardous or not. If the chemical is hazardous, they will immediately print an SDS and update the attached chemical list. They will then be responsible for ensuring workers are trained on the chemical during the next department team meeting.

The hazardous chemical inventory is compiled and maintained by the Director of Licensing and Recruitment and/or Department Manager. The Interact Center Safety Committee will be responsible for annually reviewing the SDS binder and attached chemical list for accuracy and/or updates.

8. Program Availability

A copy of this program will be made available, upon request, to workers, their designated representatives, and OSHA.

EXPOSURE CONTROL PLAN / EMPLOYEE RIGHT TO KNOW

In accordance with OSHA (Occupational Safety and Health Administration), Interact Center is required to provide a safe and healthful workplace. The official OSHA poster is posted prominently on the lunchroom corkboard. Staff also receive annual OSHA training which may include modules specific to Blood Borne Pathogens, a more common potential hazard here at Interact Center. Personal protective equipment is provided by Interact Center to employees at no cost to the employee. Staff should always utilize universal precautions/sanitary practices.

Being an art studio, toxic and potentially dangerous materials can be found throughout the center. General use art supplies are to be kept in cabinets and shelves. Toxic materials, such as special paints or bleach, must be locked in cabinets. Sharp objects used for artistic purposes, such as sculpting tools, are used only under staff supervision. The ceramics kiln is not to be operated during programming hours. Medications are also to be kept locked in medication boxes.

Interact Center maintains a record of all work-related injuries and illnesses. The OSHA Form 300 is an ongoing log of all recordable incidents. Details of each OSHA Form 300 are documented further on the OSHA Form 301. Each year from February 1st through April 30th, Interact will post a summary of this form from the previous year (OSHA Form 300A) to the lunch room corkboard for employees to view as desired. Employees and their representatives have the right to request copies of the OSHA Form 300 log which must be made available within 1 business day.

The complete OSHA Workers' Rights packet, including details on how to file complaints with OSHA, can be found online at www.osha.gov/workers. Interact Center guarantees they will not retaliate against any employee making a complaint in good faith.

All Interact Center employees have the Right To Know the risk of potential exposure to infectious agents while at the center. Interact Center is committed to providing a safe and healthful work environment for staff and clients alike. The following Exposure Control Plan is provided to eliminate and/or minimize occupational exposure to potential hazards in accordance with OSHA standards. The following plan is to be updated annually and Interact Center employees are required to complete annual reviews of the plan.

Any Interact Center staff with direct client contact may face exposure to infectious agents. It is important for all staff, including volunteers, to understand this Exposure Control Plan to know what steps to take in the event of exposure.

WHAT IS AN INFECTIOUS AGENT?

MN Administrative Rules, Chapter 5206, Hazardous Substances; Employee Right-to-Know

Infectious agent. "Infectious agent" means a communicable bacterium, rickettsia, parasites, virus, or fungus determined by the commissioner by rule, with approval of the commissioner of health, which according to documented medical or scientific evidence causes substantial acute or chronic illness or permanent disability as a foreseeable and direct result of any routine exposure to the infectious agent. A full listing of all infectious agents can be found at https://www.revisor.mn.gov/rules/5206.0600/ subparts 4 - 8.

Infectious agents that are present in human blood and can cause disease in humans are also called **blood borne pathogens**.

Infectious agent does not include an agent in or on the body of a patient before diagnosis. Infectious agent does not include an agent being developed or regularly used by a technically qualified individual in a research, medical research, medical diagnostic or medical educational laboratory or in a health care facility or in a clinic associated with a laboratory or health care facility, or in a pharmacy registered and licensed under Minnesota Statutes, chapter 151.

Blood borne pathogens. "Blood borne pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV). More information about Blood Borne Pathogens can be found at https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact01.pdf.

IDENTIFY ALL INFECTIOUS AGENTS:

Hepatitis:

Hepatitis means inflammation of the liver and is often caused by a virus. The most common types of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C. Many people with hepatitis do not have symptoms or do not know they are infected. If symptoms occur with an acute infection, they can appear anytime from 2 weeks to 6 months after exposure. Symptoms of chronic viral hepatitis can take decades to develop and may include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, light-colored stools, join pain, and jaundice, according to the CDC.

Hepatitis A is spread when a person ingests infected fecal matter. It can last from a few weeks to several months. Most people recover from Hepatitis A with no lasting liver damage.

Hepatitis B is primarily spread when blood, semen, or certain other body fluids from a person infected with hepatitis B virus enters the body of someone who is not infected. People infected with Hepatitis B may develop chronic liver disease including cirrhosis, liver failure, or even liver cancer. Failure to provide adequate infection control measures in health care facilities has led to hepatitis outbreaks.

Hepatitis C is a leading cause of liver transplants and liver cancer. Hepatitis C is spread when blood from an infected person enters the body of someone who is not infected. There is currently no vaccine available for hepatitis C.

To prevent potential exposure to hepatitis, Interact Center employees are to follow universal precautions, wear personal protective equipment, and are offered the hepatitis B vaccination series.

Hepatitis B Vaccination:

The hepatitis B vaccination series is available at no cost after training and within 10 business days of initial contact with Interact Center clients. Choosing to receive the vaccination is completely voluntary. Hepatitis B is spread when blood, or other body fluid infected with the virus enter the body of a person who is not infected. The hepatitis B vaccine is an injection typically given in the arm as a three-dose series over the course of 6 months. The hepatitis B vaccine can prevent hepatitis B and its consequences, including liver cancer and cirrhosis. More information about the hepatitis B vaccination can be found at https://www.cdc.gov/vaccines/hcp/vis/vis-statements/hep-b.html and https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact05.pdf.

Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series, 2) antibody testing reveals that the employee is immune, or 3) medical evaluation shows that vaccination is contraindicated.

Notify the Managing Director if you would like to receive this vaccination. If an employee chooses to decline vaccination, the employee must sign a declination form to turn into the Managing Director. Employees who decline may request and obtain the vaccination at a later date at no cost.

Declination Statement

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to me; however, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature:_____ Date:_____

Tuberculosis (TB):

Tuberculosis (TB) is a communicable, potentially lethal disease. TB is caused by the bacteria *Mycobacterium tuberculosis* and is spread by airborne droplets generated when a person with TB disease coughs, speaks, spits, sneezes, etc. Infection occurs when a susceptible person inhales droplets containing the bacteria.

Symptoms of TB depend on where in the body the TB bacteria are growing. TB disease symptoms in the lungs (most common location) include:

- A bad cough that lasts for 3 weeks or longer
- Pain in the chest
- Coughing up blood or sputum

Other symptoms of TB disease include:

- Weakness or fatigue
- Weight loss
- No appetite
- Chills
- Fever
- Sweating at night

Interact Center will offer a TB skin test (Mantoux) at no cost to the employee for the first 30 days after hire date. Thereafter, if an employee wishes to be tested, they may do so out of pocket. Annual TB testing is not recommended by the CDC unless there is a known exposure or ongoing transmission. Interact Center will cover the cost of subsequent TB skin tests should there be a high-risk incidence of exposure at the center. Notify the Managing Director if you would like to receive this test.

More information about TB can be located at https://www.cdc.gov/tb/publications/faqs/pdfs/qa.pdf.

Human Immunodeficiency Virus (HIV):

Human Immunodeficiency Virus (HIV) is a virus that weakens a person's immune system by destroying important T-cells that fight disease and infection. There is no cure for HIV, however with proper medical care, HIV can be controlled. If untreated, HIV can lead to Acquired

Immunodeficiency Syndrome (AIDS). The medicine used to treat HIV is called Antiretroviral Therapy (ART).

HIV can only be transmitted through specific activities, typically through sexual behaviors and needle/syringe use. HIV is NOT spread by air or water; insects or pets; sharing toilets, food, or drinks; or through saliva, sweat, tears, or closed-mouth kissing.

Occupational exposure to HIV on the job is very low when using personal protective equipment. According to the CDC (2019), “For health care workers on the job, the main risk of HIV transmission is from being stuck with an HIV-contaminated needle or other sharp object. However, even this risk is small. Scientists estimate that the risk of HIV infection from being stuck with a needle used on a person with HIV is less than 1%.”

Interact Center employees are routinely reminded to utilize appropriate personal protective equipment when anticipating contact with blood or body fluids. Interact Center employees should immediately wash hands and other skin surfaces after contact with blood or body fluids. Interact Center employees should also use extra precautions when handling needles or other sharps. Should an Interact Center employee believe to have been exposed to HIV infected blood or body fluid, they should immediately follow the post-exposure evaluation and follow-up plan outlined below.

LABELING:

Labeling of infectious waste must comply with the requirements of the Occupational Exposure to Bloodborne Pathogens standard, 29 CFR 1910.1030, and the Minnesota Infectious Waste Control Act.

All hazardous waste materials must be disposed of in the marked bio-hazard trash receptacle in the Glucometer Testing Area. The bio-hazard trash is disposed of by the Interact Center cleaning crew every first Tuesday of the month. Trash bags from this container must be closed tightly before being placed into a larger trash container. This can be achieved by twisting the ends of the bag into a knot or using a twist adhesive.

All sharps must be placed in the marked sharps container also located in the Glucometer Testing Area. The sharps bin is an approved container that is closable, puncture-resistant, leakproof on sides and bottom, and appropriately color coded and labeled. The sharps container is taken to the Hazardous Waste Disposal Site in St. Paul whenever it becomes full.

EXPOSURE PREVENTION*:*

Universal Precautions & Sanitary Practices:

All employees will utilize universal precautions (this means that employees will treat all blood and other bodily fluids as if they are infectious) and sanitary practices, including hand washing, for infection prevention and control, and to prevent communicable diseases.

Personal Protective Equipment (PPE):

Personal Protective Equipment is provided to Interact Center employees at no cost to them. As part of adhering to universal precautions, employees should use appropriate PPE, which may include masks, gloves, eyewear, or gowns, when exposed to bodily fluids.

- Employees should always practice proper handwashing procedures. Employees should wash hands immediately, or as soon as feasibly possible, after removing gloves or other PPE. If handwashing is not available, employees should use hand sanitizer and wash hands as soon as soap and water become available.
- Employees should remove PPE after it becomes contaminated, but before leaving the immediate work area, if possible, to prevent potential contamination of clean areas in the center. PPE may be disposed of in appropriate trash receptacles.
- Employees should use gloves when in contact with infectious materials. Employees should always replace gloves if torn, punctured, or if their ability to function as a barrier is compromised.
- Employees should never wash disposable gloves so they can be reused. Always discard after a single use.
- Employees should wear appropriate face and eye protection if they believe bodily fluids or blood may have the potential to splash, spray, or splatter into the face (eye, nose, or mouth).
- Employees should wear a gown or apron when clothing may become soiled with infectious materials.
- Employees should use gloves and disinfecting solution when cleaning a contaminated surface.
- Employees should use gloves and proper bagging procedures when handling and washing contaminated laundry.
- Blood contaminated PPE should only be disposed of in the biohazard bin located in the Glucometer Testing Area.
- Contaminated sharps are to be discarded immediately in the labeled sharps container located in the Glucometer Testing Area. This container is closable, puncture-resistant, leakproof on sides and bottom, and appropriately color coded and labeled.

More information about Personal Protective Equipment can be located https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact03.pdf.

Control of Communicable Diseases:

Reportable Infectious Diseases: Reportable Diseases A-Z - Minnesota Dept. of Health

- Staff will report any signs of possible infections or symptoms of communicable diseases that a person receiving services is experiencing to their supervisor immediately.
- When a person receiving services has been exposed to a diagnosed communicable disease, staff will promptly report to other licensed providers and residential settings.
- Staff diagnosed with a communicable disease, may return to work upon direction of a health care professional.

Needle-stick Precautions:

To prevent unnecessary needle-stick or sharps injuries, Interact Center employees are to adhere to the following:

- Never bend, recap, or remove contaminated needles and/or other sharps unless such an act is required by a specific procedure.
- Do not shear or break contaminated sharps.
- Always dispose of needles and sharps immediately into appropriate containers.
    - Interact Center will ensure that sharps containers are closable, puncture-resistant, and leak-proof on sides and bottom. Interact Center will ensure these containers are accessible, maintained upright, and not allowed to overfill. These containers will be labeled, or color coded appropriately.
- Report all needle-stick and sharps-related injuries immediately.
- Participate in training related to infection prevention.

More information on how to protect yourself when handling sharps can be located at https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact02.pdf.

POST EXPOSURE EVAULATION AND FOLLOW UP:

Should an exposure incident occur, immediately contact your direct supervisor and the Director of Licensing and Recruitment. If the Director of Licensing and Recruitment is not available, contact the Managing Director or Executive Director instead. They will assist in determining next steps and clean up.

Interact Center will cover the costs for a confidential medical evaluation and follow up with a medical professional.

After exposure, staff should take the following steps:

1. Perform first aid: clean the wound, flush the eyes or other mucous membrane, etc.
2. Document the routes of exposure and how the exposure occurred on an Incident Report.
3. Identify and document the source individual on the Incident Report.
    a. REMINDER: This incident report is to be kept strictly confidential and only shared with the Director of Licensing and Recruitment (or Managing Director/Executive Director if the Director of Licensing and Recruitment is not available).
4. The Director of Licensing and Recruitment will work with the source individual, their guardians, and their medical professionals in determining if testing is needed to determine infectivity. If the source individual is already known to be positive, new testing does not need to be performed.
5. Staff who experienced the exposure will have the opportunity to get tested at no cost to the employee. Any required follow up visits will also be covered at no cost to the employee.
6. The Director of Licensing and Recruitment will perform an internal investigation to ensure appropriate policies and procedures were followed and adequate. Correction orders will be issued as needed. The Director of Licensing and Recruitment will determine if the exposure event warrants documentation for OSHA Recordkeeping and will maintain this log.
    a. If the incident occurred due to a needle-stick, the following will be recorded in a Sharps Injury Log, which is maintained for at least five years:

i. Date of the injury
ii. Type and brand of the device involved
iii. Department/work area where the incident occurred
iv. Explanation of how the incident occurred

More information about OSHA standards for reporting blood borne pathogen exposure can be located at https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact04.pdf.

For additional information regarding Occupation Exposure to Bloodborne Pathogens, please reference the Health Counseling Services Medication and Health Care Policy and Procedure Manual.

Glucometer Testing Area

The Interact Center Glucometer Testing Area is located off the main reception area right when entering the building. People should always **knock before entering** the Glucometer Testing Area to ensure the privacy of others who may be using the space.

Glucometer testing, blood draws, and any other injectable procedures must only be done in this assigned location at Interact. All hazardous waste materials must be disposed of in the marked bio-hazard trash receptacle in the testing area. All sharps must be placed in the marked sharps container. Interact Center staff are to monitor clients utilizing sharps and needles.

The use of emergency Epi-Pens does NOT need to be performed solely in this Glucometer Testing Area. Staff are to utilize their First Aid Training when administering lifesaving emergency epinephrine. This is typically done immediately at the site where the individual in need is located.

Procedure for glucometer testing and other injectable procedures:

1. Wipe surface with bleach wipes or cleaner that is available at the testing counter.
2. Wash hands. If soap and water are unavailable, use hand sanitizer.
3. Proceed with the glucometer testing or injection.
4. Dispose of any sharps into the marked sharps container.
5. Dispose of test strip and any other trash into the designated bio-hazard trash receptacle.
6. Use bleach wipes or cleaner again to wipe down the countertop.
    a. Dispose of this bleach wipe in the designated bio-hazard trash receptacle.

Procedure for Blood Draws:

Blood draws should not be performed by Interact Center staff. This should only be done at Interact Center by a registered nurse.

Prohibited in Testing Area:

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in the Glucometer Testing Area.

Waste Disposal:

The sharps bin provided by Interact Center is an approved container that is closable, puncture-resistant, leakproof on sides and bottom, and appropriately color coded and labeled. The sharps container is taken to the Hazardous Waste Disposal Site in St. Paul whenever it becomes full.

The bio-hazard trash is disposed of by the Interact Center cleaning crew every first Tuesday of the month. Trash bags from this container must be closed tightly before being placed into a larger trash container. This can be achieved by twisting the ends of the bag into a knot or using a twist adhesive.

Hazardous Objects, Materials, or Equipment

In compliance with MN Rule 9555.9720 Subpart 5, Interact Center will store all chemicals that are poisonous when swallowed or inhaled, or that are damaging to eyes or skin, in locked cabinets. In compliance with MN Rule 245D.22 Subdivision 2, all chemicals, detergents, and other hazardous or toxic substances will not be stored with food products or in any way that poses a hazard to persons receiving services. In accordance with OSHA standards, Interact Center will maintain Chemical Safety Sheets on all toxic and/or hazardous chemicals and products.

Interact Center has handrails and nonslip surfaces on interior and exterior runways, stairways, and ramps in accordance to applicable building code. All ramps, stairways, and corridors are free of obstructions. Outside the building is kept free from debris and other safety hazards. Exterior walkways are shoveled and salted during the winter months.

The ceramics kiln is not to be operated during programming hours when participants may be present. Other heating, ventilation, air conditioning units, and other hot surfaces and moving parts of machinery will be kept shielded or enclosed.

As an art studio, many frequently used arts products and tools may be considered hazardous or dangerous. General use art supplies are kept in cabinets and shelves. Toxic materials, such as special paints or bleach, are kept in locked cabinets. Sharp objects used for artistic purposes, such as sculpting tools, are used only under supervision and in accordance with the person's support plan.

POISON CONTROL: 612-347-3141
Always call before administering any remedy by mouth.

Interact Center Rules

1. **No gifts.** For example, rings and other gifts may not be exchanged during your time at Interact.

2. **No rumors.** This includes talking about others in a negative or bad way behind their backs, planning what you might say or do to somebody at Interact, and also includes making threats to other artists and staff.

3. **Respect personal space.** All artists must respect SPACE at the workplace. No holding hands, back rubs, hugging, kissing, touching other artist's supplies, work, or props.

4. **Sexual Harassment.** Sexual harassment is a serious offense and will not be tolerated at Interact Center. Anyone found to have engaged in sexual harassment or retaliation will be met with appropriate sanctions, up to and including discharge from the program. If you believe to have been a victim of sexual harassment notify any Interact Center staff member immediately.

5. **No notes.** No note passing or writing about others.

6. **No hiding or leaving Interact unannounced.** Artists must always stay in supervised spaces, except to use the restroom. If an artist has community time, or wishes to take a smoke break, they must sign out at the front reception desk.

7. **Scents.** Due to the scent sensitivities some of the artists may have at Interact, it is expected that should an artist choose to wear scented hygiene products they be used so that the scent cannot be smelt from an arms distance away. The same applies to personal hygiene. Artists at Interact are expected to maintain their personal hygiene so that body odor cannot be smelt from an arms distance away.

8. **Restroom Use.** Artists do not need to ask permission to use the restroom. Interact welcomes and respects all individuals regardless of sex, gender, gender identity, gender expression, or sexual orientation. Individuals are encouraged to use the restroom for which they identify. There is also a single stall, gender-neutral, accessible bathroom available for use.

9. **Social Media, Computer Use, & WiFi.**

   There is no expectation of privacy on Facebook, Instagram, Snapchat, Twitter, or other social medial platforms. Anyone who posts on social media should remember that they can be held liable for anything that is considered defamatory, obscene, or not true.

   Interact Center has computers available for use in the Visual Arts department. Should an artist require 1:1 staff attention at the computer, artists will be limited to 45 minutes with the instructor, schedule permitting.

   WiFi is not available for use by Interact Center artists.

Employee Acknowledgment

Topics covered in this manual:

- About Interact Center
  - Telephone number of the department's licensing division
  - Program funding
  - Scope of the program, services, and care offered
  - Description of the population served
- Artist's Rights
  - Rights restrictions
  - Virtual Interact rights policy
- Program Abuse Prevention Plan
- Maltreatment of Vulnerable Adults
- Admission Criteria Policy
- Attendance Policy
- Fees, Billing Arrangements, & Plans for Payment
  - Lack of Payment
- Temporary Service Suspension Policy
- Service Termination Policy
- Transferring Clients and/or Records
- Policy for Reporting Death in the Program
- Emergency Response
  - Emergency phone numbers
  - Emergency floor plan
  - Site plan
  - Fire evacuation
  - Power failure
  - Emergency shelter
  - Emergency evacuation
  - Temporary closure/relocation
  - Severe weather: Tornado
  - Severe weather: Blizzard/Storm
  - Weather closing procedures
  - Lockdown policy
- Illness Policy
- Elopement/Missing Artist Policy
  - Community Time Guidelines
- Incident Response and Reporting
- Emergency Use of Manual Restraint Policy
  - De-escalation techniques
  - Positive support strategies
  - How to avoid a power struggle
  - What to do if conduct poses an imminent risk of harm
- Person-Centered Planning
- HIPAA/Confidentiality/Data Privacy
- Grievance Policy
- Sexual Harassment
- Professional Boundaries
- Gift Acceptance Policy
  - Gifts between clients and staff
- Social Media
- Computer Use
  - Computer use and 1:1 staffing
  - Wi-Fi use
- Restroom Use
- Meals and Snacks
- Smoking Policy
- Drug and Alcohol Prohibition Policy
  - Alcohol and events
- Health Services Policy
  - Nurse notification & health monitoring
  - Safe medication assistance and administration policy
  - Information about medications form
  - Psychotropic information form
- Safe Transportation Policy
  - Insurance coverage
  - Emergency cab rides
- Pet Policy
- Scent-Sensitivity Policy
- Laundry Policy
  - Storage of chemicals and cleaning products
  - Soiled clothing
- OSHA
  - AWAIR program
  - Hazard communication program
  - Exposure control plan/employee right to know
    - What is an infectious agent?
      - Blood borne pathogens
    - Hepatitis B vaccination
    - Tuberculosis (TB)/Mantoux
  - Universal precautions & sanitary practices
    - Personal protective equipment (PPE)
    - Control of communicable diseases
    - Needle-stick precautions
  - Post exposure evaluation and follow-up
- Glucometer Testing Area
- Hazardous Objects, Materials, or Equipment
- Interact Center Rules

By signing below, I indicate that I have received a copy of the Interact Center for the Visual and Performing Arts Policy and Procedure Manual. I have read through and understand the policies and procedures put forth in this manual. I understand that it is my responsibility as an Interact Center employee to adhere to these policies and procedures. Any updates or changes that are made to this manual will be distributed to me in a timely manner.

_____

Printed Name

_____

Signature Date