

RIVER PLACE

STAFF MEETING SUMMARY

Subject: River Place Staff Meeting

Date: September 8th, 2025

Time: 10:00AM-12:00PM

- **Safety/Health Review** –
 - Please make sure that the clients are dressed appropriately for the weather conditions.
- ❖ **Nursing Inservice** – DOING NEXT MONTH
 - Nebulizers and other treatments in the home
 - Destruction of medication/missing medications
 - OT/PT Programs
- **Program policies (STAR)** –
 - Cultural Diversity
- **Emergency Procedures**
 - Fire Drill- SW - Bedroom #3 (JR) - Smoke Detector – Client in bed **Cindy**
 - Bomb threat –**Pam**

Meeting Review:

- ❖ **September Calendar Reviewed** – Reminder to turn in requests off by the 10th of the month prior. Calendars will be released between the 14th –16th of the month. After the 10th of the month, staff will be responsible for filling their own shifts. (see attached calendar)
- ❖ **Administration Memo** – see attached
 - Documentation
 - Go over documentation quiz (Attached)
 - Discuss the difference between subjective (personal feelings and opinions) and objective (unbiased statements, facts only)
 - Staff discussed writing the time of the shift they are documenting in the t-log in the summary line (ex. 8a-8p)
 - Holiday start times
 - These have been adjusted to reflect the 6am shifts and will start with Thanksgiving
 - Review the Health care provider appt schedule form and make sure all DCC/DCA know where to find this form and are using it.
 - Daily MARS will be implemented permanently with Therap on 11/30/25
 - There will be a monthly view only access to be able to review MARs and look at data
 - BM protocol needs to be moved to Health Tracking by 11/1/25. They will no longer be on the MAR. Staff would like to have a daily tracking form for BM's (Day 1, Day 2. Etc)
 - Contacting the office
 - Kristal-6011
 - Kelsey-6012
 - Janelle-6013

- Please call our direct lines first, then if you do not get us call 437-6695 as then it will ring to all desks in the office. If you call us directly and we are working outside the office, it will ring our cell phones.
- Kelsey and Janelle work in the office M-F (Janelle is in and out of the office from time to time as she is still working with the in-home program until someone is hired for this position.)
- Kristal works from home on Wednesdays and sometimes Mondays when it's payroll.
- The office will try and be better at letting staff know when we are out of the office and not working.
- Benefit open enrollment
 - Your benefit renewals will appear in Isolved this year. You will not need to meet with Kristal for anything.
 - Aflac will be coming in October 21st 9:30-3.
- If your timesheet is on paper, scan it to Kristal from the house, please DO NOT text it to her as well.
- ALL staff need to be better at going over their timesheets before payroll. Kristal is fixing many things that she has not received any messages about (ex: being punched in and not punching out, PTO not being put in)
- All benefitted staff FT or PT that receive benefits (PTO is a benefit!) MUST have at least 20 hours a week for PT and 35 hours a week for FT. Kristal will add PTO to get to your hours for the pay period.
- Remind staff: Kristal does NOT want text messages to fix timesheets. It must be an SCOMM, if you must go back to the house and send an SCOMM then that's on you to do so.
- We will need to pass on the Halloween Party this year and just do a Christmas Party for MCGH clients and staff only. We do not include staff families or client families, as we give a gift to the clients and staff and do not have for others.
- We will be advertising for direct support staff for all locations. There is a need for help in covering vacations, sickness and some weekends still.
- Contact the Program Supervisor first regarding anything related to the clients and staffing. Kristal has noted a lot of calls to her lately when the calls are to be made to the Program Supervisor so they are aware of what is happening in the home. Kristal should be contacted for Payroll, benefits, financial in relation to the homes budgets and HR items.

- ❖ **Behavior Plans/Data** – Wayne and Jeff have behavior plans in therap. These need to be charted on for **AM& PM shifts daily**. HS needs to chart if there is a behavioral incidence on their shift.
 - Every individual that is prescribed a psychotropic medication needs to have a behavior plan – these will be done in Therap. This data is vital for the consumers to continue getting the therapeutic value out of their psychotropic medication.
 - <https://support.therapservices.net/simulators-th/Behavior-Data-Record-Data-Web-2024/> This link is in a Scomm that you should have recieved to practice submitting behavior data. On.
 - Please chart behaviors that are under the behavior tab even if they seem to be their normal habits.

❖ **GOALS NEED TO BE COMPLETED AND CHARTED ON**

- ❖ **House concerns** –
 - ❖ Old Business

- *MAR checks* – Please look over the MAR at the end of your shift to ensure you have not missed charting anything you completed or administered.
- Please read the communication book when coming on to each shift. (Stand up on the counter)
- Charting
 - Intake and output **NEED** to be charted for Cheryl and Jeff.
 - Bubble number needs to be charted and bubble signed on the left side when administered.
 - Case notes need to be done every day for every client. DO NOT chart on items that you have not completed that is fraud.
 - TLOGS NEED TO BE COMPLETED EACH SHIFT
 - If working with Kelsey or Kristal, they will ask if you want them to TLOG anything before they leave.
 - Whenever charting LOA there needs to be a reason charted in the comment box.
 - Cheryl's Meds that are sent to the DAC need to be Charted as LOA the note needs to say sent to DAC and have the poppers initials.
- Cleaning
 - Please remember everyone's version of cleaning is different. The priority needs to be clients and client cares.
 - Please lay towels out to dry on hampers so they don't get all musty.
 - Towels
 - Cheryl-baby blue
 - Jeff- navy
 - Wayne-grey
 - Maurice- Black
- Parking
 - Please Park in the far row the handicap spot it for handicap guests.
- Bowel Protocol
 - Please use the bowel tracking in input and output under health tracking
 - Can enter Multiple BMs in an hour in health tracking.
 - **MAKE SURE YOU ARE STILL CHARTING BM's IN THE MAR**
 - Wayne has a chair alarm on both his kitchen chair and his rocker it needs to be used it CANNOT be removed this is for Waynes safety.
 - Doors are to be closed when completing cares. And blinds drawn
 - Remember to drape clients when giving bed bath.
 - It is our job to respect and uphold client dignity.
 - TVs need to be shut off when clients go to bed in the evening roughly around 10PM Jeffs can be on until a game is done then it should be shut off.
- ❖ Shower Schedule(Posted in the Bathroom)
 - Jeff – Wednesday Friday Sunday
 - Cheryl- Tuesday Thursday Saturday
 - Wayne- Monday Wednesday Friday and any other days he is wet at HS
 - Showers cannot be moved for staff convince

Consumer reports:

Wayne – **HAS HAD 2 SEIZURES 10-10-25& 10-13-25**

Client- weight - 9/6-165, 10/1 - 167

Appointments: Wayne had an appointment via zoom with Dr. Michels. There are no changes to his meds, and he will see him in 6 months.

Behaviors/concerns:

Outings: None

DIET: Low carb diet-Wayne is to have 4 carb choices per meal and 1-2 per snack. One carb choice equals 10-15 grams of carbs.

Ambulates with 1 assist and walker during the day. PROM to all extremities BID. Exercise program BID (Upper Extremity bike BID). Wear compression socks during the day.

Outcome (ISP): Wayne will participate in exploring the herb garden daily with physical assistance from staff.

Cheryl – Now taking Carafate pills rather than Sucralfate Liquid.

Client- weight - 9/3-101, 9/10 - 100, 9/17-100,9/24-100, 10/1 - 101

Appointments: Cheryl had Botox injections done in her arms. She is scheduled to return in December. Cheryl ate at Perkins; she had her dentist's appointment. We are to continue the current regimen.

Behaviors/concerns: None

Outings: Cheryl attended bible study. She seemed to enjoy it.

DIET: Mechanical soft – small bite sized pieces and drink offered between bites.

PROM to all extremities BID. Wears wrist brace on right hand during the day. Tilt W/C for a few minutes every hour. Reposition twice during the night

Outcome (ISP): On average, once every 3 months, Cheryl will participate in an individualized outing.

Jeff –

Client- weight - 9/3-150, 9/10-150, 9/17-150,9/24-156, 10/1-154

Appointments: None

Behaviors/concerns: Jeff had a few days where he wasn't looking so good. He wasn't smiling, laughing, Hospice came as well as family. He also had a urine sample taken to North Valley Health Center, hospice said that there was no definite answer, and they wanted to wait for the culture to come back. He also had his catheter changed. On Monday he looked better, he was laughing, thumbs up to responses, eye contact, and will mouth yes or no. Jeff's catheter came out with balloon intact. The facility nurse came and replaced the catheter. Jeff has had little to no input in bag, but his brief has been wet. The facility nurse came and replaced Jeff's catheter and it seems he is now flowing into the bag better.

Outings: None

DIET: Promote finely chopped and smooth consistency foods for Jeff. Prepare it in a way he can eat it

PROM exercises BID, hand braces worn 2-3x daily for time tolerated, tilt w/c 30 secs every 30 minutes when in chair, Reposition every two hours when in bed and 2x during the night

Maurice-

NEW CLIENT Moving in at the end of the month.

Courtney – will only be coming on Thursdays for the time being.

Behaviors/concerns:

Courtney has been coming to River. She has had her showers and played uno and other games with staff.

Outings:None

The next monthly staff meeting will be held Monday, October 6th, 2024 at 1:00pm.

STAFF MEMBERS PRESENT:

Name:		Position:	Name:		Position:
Kristal Walen	Excused	CEO	Cindy Blacklance	present	DCS
Kelsey Grandstrand	present	CRSS	Ashley Nygaard	present	DCS
Henrietta Linder	EXC	RN	Jeanne Johnson	EXC	DCS
JoAnn Saunders	present	LPN	Pam Abrahamson	present	DCS
Kelly Nordine	present	DCC	Billie Volker	present	ONP
Hannah Johnson	phone	DCS	Holly Confer	phone	DCS
Jenna Enloe	EXC	DCS			

Authorized By: Kelsey Grandstrand CRSS

Acknowledgement completed in STAR Services

Documentation Quiz

Please answer the questions independently and put in envelope and put in the office drawer for supervisor to review.

1. True or False If you work with a person but don't document your shift this could lead to an investigation of fraudulent billing
2. True or False Documentation should be completed one time per day.
3. True or False You should always contact your supervisor or the designated on call person when an incident or emergency report is completed.
4. You brought Bob and his housemate to get ice cream. You get back and write "Bob got ice cream with Jerry." Is this a correct way to document?
 - a. YES
 - b. NO
5. When an incident occurs, you should contact your supervisor or designated on call person:
 - a. Immediately
 - b. Whenever you see them next.
 - c. During your next shift
 - d. You don't need to because you took care of the situation
6. Appropriate documentation includes:
 - a. Use of Acronyms
 - b. As long as you can read your own handwriting it is neat enough. You can explain what you wrote to others if they can't read it.
 - c. Include your first name only when ending the entry.
 - d. It uses the POP method. Professional Objective and Positive
7. Which of the following is NOT correct about an incident report?
 - a. An incident report needs to be filled out if the person is experiencing a mental health crisis that requires the program to call 911 or a mental health crisis intervention team.
 - b. An incident report is completed immediately or before the end of a shift and the supervisor needs to be notified.
 - c. An incident is any medical emergency, unexpected serious illness, or significant unexpected changes in illness or medical condition, or the mental health status of a person that requires the program to call 911, physician treatment, or hospitalization.
 - d. If your supervisor doesn't answer when you call to report an incident you can wait to follow up during your next shift even if it is a few days later.
8. True or False Accurate and thorough documentation can protect you from false allegations, including allegations about maltreatment.

9. By documenting what a person enjoys you make sure that all staff who work with the person are able to make the person's life fulfilling. When you do this you are:
- Ignoring health and safety
 - Writing too much information
 - Being person-centered
 - Not sticking with the routine
10. Which type of documentation is used to give a description of what happened during your shift with a person?
- Program addendum
 - Daily Log Notes
 - Incident report
 - Community support plan
11. True or False Most companies have forms to track an individual's funds, but you will not need to be familiar with this document.
12. True or False Subjective means writing the facts of a situation without including your own emotions, thoughts, or perceptions of an event.
13. "Sarah ate a bowl of cereal this morning and was given a choice of what she wanted to do for the day. She said she wanted to start the day by sitting on the deck, drinking coffee, and watching the birds." This would be an example of what kind of documentation?
- Subjective writing
 - Objective writing
 - Storytelling
 - Being too descriptive
14. "Kyle was crabby today and continually tried to argue and picked fights with staff and housemates. I think it's because he was up all night playing video games." This is an example of:
- Objective documentation
 - Subjective documentation
 - Storytelling
 - Person centered documentation
15. Good documentation is important because:
- It gives a clear indication or picture of what occurred during the staffs shift.
 - It can be a way to share information with other people who support the person.
 - It shows the company is providing people with the services mandated by the federal and state government.
 - All of the above