

□ MARSHALL PLACE
STAFF MEETING SUMMARY

Subject: Marshall Place Staff Meeting

Date: January 8th 2026

Time: 10:30-12:30PM

❖ **Safety/Health Review** –

- Emergency Procedures Power Outage Drill
- Please make sure that the clients are dressed appropriately for the weather conditions. *If clients choose to wear clothing that may not be appropriate for the weather that is their choice it is our job to advise them not to make their decisions. They will have to deal with the natural consequences of their actions. IE being to hot or cold.*

❖ **Nursing Inservice** – None this month

❖ **Program policies (STAR)** –

- Bloodborne Pathogens/ Universal Precautions

❖ **Emergency Procedures**

- Fire Drill- (AT) Bedroom #2 Smoke Detector- Madison
- Fire Drill- garage (maintenance check smoke detector)- Cheryl
- Power Outage - Cheryl

Meeting Review:

- **January Calendar Reviewed** – Reminder to turn in requests off by the 10th of the month prior. Calendars will be released on the 15th of the month. After the 10th of the month, staff will be responsible for filling their own shifts. (see attached calendars)
- **Holiday Calendar Reviewed** – Attached the current year and upcoming year's holiday schedule please notify Kelsey or Cheryl if you are interested in picking up any of the shifts.
- **Administration Memo** – see attached
 - 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
 - Kristal works from home on Wednesdays and sometimes Mondays when it's payroll.
 - Remind staff: Sabrina does NOT want text messages to fix timesheets. It must be a SCOMM. If you must go back to the house and send a SCOMM then that's up to you to do so.

- o Contact the Program Supervisor first regarding anything related to the clients and staffing. The Board (Kristal and Sabrina scomm) should be contacted for Payroll, benefits, financial in relation to the home's budgets and HR items.
 - o 2026 Employee handbook will be available in Star Services soon. Splash in Therap will be posted when it is up. Staff have 60days to review and acknowledge it. A copy will be loaded into resources in Star and directions made on how to view it at any time. DO NOT PRINT OUT COPIES! This can cause policies to be outdated and incorrect information received. Anyone who needs a written copy must contact Board.(Sabrina and Kristal) via SCOMM. Otherwise, it can be accessed electronically.
 - o Employers are not legally required to print out copies of the employee handbook from all staff. However, they are expected to provide access to the handbook for all employees, either through printed copies or digital formats.
 - o Office hours Starting on December 8th and going forward will be:
 - o Monday, Tuesday, Wednesday, Thursday -8a-4p
 - o 2nd Thursday of each month-Office is closed 8a-11a for administration meeting
 - o Fridays-Office is closed.
 - This will be an administration paperwork day.
 - Calls will still be answered via direct lines
 - Appointments are required to meet anyone at the office on Fridays
 - All urgent matters will still be handled
 - o All Checkbooks need to be balanced and up to date. The office will be starting to review them monthly on the 3rd Thursday of each month.
 - o Garage Heat-Please do not mess with these and turn them up. They are not meant to keep the garage warm like the house. Set them at 40 degrees and leave them alone. This has been a constant issue. These are to help protect the appliances in the garages and to keep the vehicles warm enough to start each day but not to keep them at 60 degrees or higher.
 - o If you haven't met with the board and you would still like to, you can reach out to tiffany to set up a time to do so.
- **Behavior Plans/Data** – all clients 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.
 - o 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.
 - o Please chart behaviors that are under the behavior tab even if they seem to be their normal habits.
 - **Will be getting these updated and back online ASAP**
 - **GOALS NEED TO BE COMPLETED AND CHARTED ON**
 - o **Weekly, Wayne will write a letter or send a card to his mother or sister on Fridays.**
 - o **Weekly, Jack will make an art project that can be mailed to a family member on Fridays.**
 - o **Brandie will budget his personal needs money monthly with DCC.**
 - o **Brandie will Stop Browsing YouTube at night Daily**

- **Brandie will work on coping skills in stressful situations. Daily**
- **Alex will budget his personal needs monthly with DCC.**
- **Weekly Alex will choose a baking item to make or assist in planning and cooking a meal.**
- House Concerns
 - PRN
 - Check the MAR first
 - If not in MAR check the standing orders.
 - **MAKE SURE THAT YOU ARE CHARTING WHEN YOU ARE GIVING A PRN**
 - Behaviors
 - DATA /FORM
 - Data- Daily every shift
 - Form -incidences if you do a behavior form it should also be done as a data entry.
 - Charting
 - Bubble numbers need to be charted
 - Put in your shift time when doing a tlog such as 9A-9P
 - When doing a late entry it needs to be indicated in the description.
 - When putting a time in a chart you need to indicate whether it is AM or PM
 - Chart when you arrive and chart at the completion of your shift.
 - Brandies BMs need to be charted daily If Brandie refuses his clear lax it needs to be charted as REFUSED not on hold.
 - Cleaning
 - If you use something up, please replace it and make note if you notice the supply is getting low.
 - House should be straightened after the guys leave in the morning counters and table wiped off floors swept
 - Check JO room and guys bathroom for urine in the morning do a quick scan for dirty clothes and dirty briefs
 - JO and WD rooms are to be cleaned **EVERY** weekend on either Saturday or Sunday
 - a. JO dust/ sweep/mop
 - b. WD vacuum/dust if needed
 - Check the cover on Jacks chair to make sure it is clean extras in his closet.
 - Food
 - Juice is for breakfast not the ODC
 - Medication
 - Initialed on the left side.
 - Rotate to the back when administered
 - Alex must take his pills at the med counter; his pills cannot be left unattended at all. Have him get a drink before grabbing his pills.
 - House-

- -Staff make sure you are cleaning the front steps of snow, even when its snowing. Its hard on the door to open it when there is a bunch of snow against it
- -dont let Wayne take out garbage can out in the dark, its not safe. He will need many reminders about this
- -Reminder if Wayne gets hurt while shoveling it is on the staff working. He should not be shoveling, its a liability and he does not know if its slippery under the snow.
- Document:
 - Alex and Brandie Vacuuming their rooms.
 - Alex-Tuesday
 - Brandie -Thursday
 - Jacks exercises.
 - Jack OT. It was decided that the time on the Nustep will be increased to 9 minutes. Arm exercises there is a one pound weight on the counter for jack to use. He is to do 5-10 reps of bicep curls He is to do 5-10 reps of over the shoulder raises (start at chest and lift arm straight over the head) Jack will put a sticker on the day he has completed these exercises on the calendar on counter. He is to do these daily and is to be t-logged when he does them or if he does not do them. We still need be asking Jack to do his exercises I know he has been refusing but it is still our job to ask and document his response.
 - Waynes Mask if it is off or on at checks.
 - Reminder to document in a T-Log (per Joann at May Mtg) if WD mask is on or off at nightly checks CPAP documentation should be: usage number, events number and for the seal if its a smiley face=good, sad face=bad Remind staff not to document no concerns for the overnight.
 - If Jacks and Waynes rooms are being cleaned on Saturday and Sunday.
 - Please chart when Alex is showering.
 - Chart if Brandies showers are over 20 min.
 - When Brandie is coming out in the middle of the night to get a snack.
- Please read the communication book when you come on shift.
- IF YOU GIVE A STANDING ORDER PRN OR A REGULAR PRN AND DO A FOLLOW UP YOU MUST DOCUMENT AND TLOG. REPORT TO ONCOMING STAFF.
- Please make sure that you are checking the lube in the bathroom and replenishing it as necessary. *A handful of packets.*
- Please make sure that both Brandies doors are closed at night so that if he comes out into the kitchen to get a snack, he is heard. The alarm volume was increased.
- Intake and Output **REVIEW**

Consumer reports:

WAYNE: weight 195 (same)

Appts: none

Outings: library, group home Christmas party, cafe for supper, went home for holidays

Behaviors/Normal: spends more time in his room

-his eating needs reminders to go slow and small bites

-has been a little antsy, no basketball games in december and was not able to go to church

Outcome (ISP): Weekly, Wayne will write a letter or send a card to his mother or sister on Fridays.

JACK: weight 165 (169.5) down 4.5

Appts: music therapy on Wednesdays

Outings: library, cafe for supper, group home Christmas party, went to Holly's for holidays

Behaviors/Normal: he has been bickering with Wayne more often, he has told him to "shut up" often

-his brief seems to be wet more often and needs reminders to change

-he needs reminders not to wear the same clothes every day, his pants have been smelling of urine, and he has been told to change them and to put dirty pants in hamper.

-he has been spending more time in his room, urine smell be from him not drinking enough fluids during the day

-he has refused his bath a couple times

Outcome (ISP): Weekly, Jack will make an art project that can be mailed to a family member on Fridays.

BRANDIE: weight 156 (159.5) down 3.5

Appts: none

Outings: library, cafe for supper, group home Christmas party, went home for holidays

Behaviors/Normal: he has made a comment on his belly that its getting big

-kelly is his girlfriend, they do not talk daily. They can go a long time between talking

-questionable about him putting fan outlet plug up his butt. He said he had to wash because it was dirty/dusty then it wasn't working

-not showering all the time, it can be 3-4 days in between

-he has mentioned a few times again he does not have to follow the rules

Outcome (ISP): Brandie will budget his personal needs monthly with DCC.

Brandie will Stop Browsing YouTube at night Daily

Brandie will work on coping skills in stressful situations. Daily

ALEX: weight 169 (166) up 3

Appts: none

Outings: library, cafe for supper, group home Christmas party, spent some time with family for holidays

Behavior/Normal: showering has not been going good, especially during his DAC break

-he has not vacuumed his bedroom in over a month and keeps saying "i don't want to or just no"

-he has been taking his meds at counter like he was told

-he spent \$60 on a game and didn't care if he had money for an outing

-Alex want to do online dating, he was told not to use the house address, (housemates privacy)

Outcome (ISP): Monthly, Alex will budget his personal needs money monthly with DCC.

Weekly Alex will choose a baking item to make or assist in planning and cooking a meal.

The next monthly staff meeting will be held Thursday, February 5th 2026 at 10:30a.

STAFF MEMBERS: meeting notes assigned to review this month due to illnesses amongst staff members

Name:	Position:	Name:	Position:
Kristal Walen	EXC	CEO	Mary Kay Stinar Present DCS
Kelsey Grandstrand	Present	CRSS	Holly Confer Phone DCS
Henrietta Linder	EXC	RN	Amanda Mock Present DCS
JoAnn Saunders	Present	LPN	Madison Mock Present ONP
Cheryl Lubarski	Present	DCC	Maxine Mitchell Present DCS

Authorized By: Kelsey Grandstrand PS

Acknowledgement completed in STAR Services

POLICY AND PROCEDURE ON EMERGENCIES

I. PURPOSE

The purpose of this policy is to provide guidelines on preparing for, reporting, and responding to emergencies to ensure the safety and well-being of persons served.

II. POLICY

The company will be prepared to respond to emergencies as defined in MN Statutes, section 245D.02, subdivision 8, that occur while providing services, to protect the health and safety of and minimize risk of harm to the person(s) served. Staff will address all emergencies according to the specific procedure outlined in this policy and act immediately to ensure the safety of persons served. After the situation has been resolved and/or the person(s) involved are no longer in immediate danger, staff will complete the necessary documentation in order to comply with licensing requirements on reporting and to assist in developing preventative measures, if applicable. For incident response procedures, staff will refer to the *Policy and Procedure on Responding to and Reporting Incidents*.

All staff will be trained on this policy and the safe and appropriate response to and reporting of emergencies. Program sites will have contact information of a source of emergency medical care and transportation readily available for quick and easy access. In addition, a list of emergency phone numbers will be posted in a prominent location and emergency contact information for persons served at the facility including each person's representative, physician, and dentist.

III. PROCEDURE

Defining emergencies

- A. Emergency is defined as any event that affects the ordinary daily operation of the program including, but not limited to:
1. Fires.
 2. Severe weather.
 3. Natural disasters.
 4. Power failures.
 5. Emergency evacuation or moving to an emergency shelter.
 6. Temporary closure or relocation of the program to another facility or service site for more than 24 hours.
 7. Other events that threaten the immediate health and safety of persons served and that require calling "911."

Preparing for emergencies

- A. To be prepared for emergencies, a staff person trained in first aid will be available on site in a community residential setting, and when required in a person's *Support Plan and/or Support Plan Addendum*, be able to provide cardiopulmonary resuscitation (CPR), whenever persons are present and staff are required to be at the site to provide direct services.
- B. Each community residential setting will have first aid supplies stored in the medication cupboard available for use by, and that meet the needs, of persons served and staff. The first aid kit will contain, at a minimum, bandages, sterile compresses, scissors, an ice bag or cold pack, an oral or surface thermometer, mild liquid soap, adhesive tape.
- C. Community residential setting facilities will have:
1. A floor plan available that identifies the locations of:
 - a. Fire extinguishers and audible or visual alarm systems
 - b. Exits, primary and secondary evacuation routes, and accessible egress routes, if any
 - c. An emergency shelter within the facility
 2. A site plan that identifies:

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- a. Designated assembly points outside the facility
 - b. Locations of fire hydrants
 - c. Routes of fire department access
 3. An emergency escape plan for each resident.
 4. A floor plan that identifies the location of enclosed exit stairs for facilities that have three (3) or more dwelling units.
- D. Quarterly fire and severe weather drills will be conducted throughout the year on various days of the week and times of the day or night. Staff and persons served in the facility will not be notified prior to the drill, if possible, to ensure correct implementation of staff responsibilities for response. The manager or designee will be responsible for the initiation of the emergency drill and will record the date, day, and time of the drill in the emergency plan files.
- E. As part of the emergency plan file kept at the facility site, the following information will be maintained:
1. The log of quarterly fire and severe weather drills.
 2. The readily available emergency response plan.
 3. Emergency contact information for persons served at the facility including each person's representative, physician, and dentist.
 4. Information on the emergency shelter within the facility and the designated assembly points outside the facility.
 5. Emergency phone numbers that are posted in a prominent location.
- F. If persons served require the use of adaptive procedures or equipment to assist them with safe evacuation, staff will receive specific instruction on these procedures and equipment.

Responding to emergencies

- A. Staff will call "911" based upon the emergency situation as provided in each individual response procedure as stated below.
- B. Fire**
1. Staff will respond immediately to all fire and smoke detector alarms or signs of fire by activating the alarms system.
 2. All persons will be evacuated from the building by staff and assembled at the established designated assembly point outside the facility.
 3. "911" will be immediately called from a neighbor's telephone or a cell phone in order to report the fire.
 4. Staff will contain the area of the fire, if feasible, by closing doors. If it is possible to put out the fire with a fire extinguisher, staff will attempt to do so.
 5. Staff will notify the manager or designee.
 6. Persons served and individuals will not reenter the program site until the police or fire department issue instructions that the area is safe.
 7. If the program site is not habitable and relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.
- C. Severe weather conditions and natural disasters**
1. At the first sign of severe weather, including but not limited to high winds, heavy snow or rain, or extreme temperatures, staff will confirm the location and safety of all persons served.
 2. Staff will listen to the radio or watch television for current weather conditions.
 3. Upon hearing sirens or a take cover warning, staff will notify all persons that they need to seek shelter and will guide all persons to the designated safe area in the facility and will also bring a battery-operated radio or television set, first aid kit, and flashlight.

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4. If feasible, persons served but not scheduled for supervision will be called and warned.
5. Staff will assist all persons in staying in the safe area until an all clear is issued through the radio or by other means.
6. If an injury or damage occurs, staff will notify the manager or designee and follow directions given.
7. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

D. Power failure (electricity outage or gas leak)

1. During a power failure, all staff will remain with persons served. If persons are not in the immediate area at the program, staff will locate them and bring them to the central program area.
2. The power company will be contacted by cell phone to determine estimated length of the power outage. If estimated to last less than two hours, the manager or designee will be contacted to determine what actions will be taken. If the power outage is to last more than two hours, staff will transport the persons to a safe area or location as previously established by the manager.
3. If gas is smelled or a gas leak is suspected, staff will evacuate persons to the established designated assembly point outside the facility.
4. The gas company will be immediately notified and instructions followed.
5. No one will be permitted to use lighters, matches, or any open flame during this time. All electrical and battery-operated appliances and machinery will be turned off until the all clear has been provided.
7. The manager or designee will be notified of the gas leak. This call will be made by staff from the safe area using a cell phone or from a neighbor's phone.
8. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

E. Emergency evacuation, moving to an emergency shelter, and temporary closure or relocation of the program to another facility or service site for more than 24 hours

1. Staff will ensure that everyone leaves the building and will assist all persons in gathering at the designated assembly point outside the facility.
2. Staff will immediately notify the manager or designee of the conditions that may require emergency evacuation, moving to an emergency shelter, temporary closure, or the relocation of program to another site.
3. The manager or designee will coordinate relocation of services in a way that promotes continuity of care of persons served.
4. The manager or designee will coordinate and assist staff as necessary in transporting persons to the designated location.
5. If access to the program site is permitted, staff will transfer persons' program files, clothing, necessary personal belongings, current medications, and medication administration records to the designated location.
6. The manager will notify the legal representative or designated emergency contact, and case manager, and other licensed caregiver (if applicable) of the new location of the program if necessary.

F. Other events that threaten the immediate health and safety of persons served and that require calling "911"

1. Pandemic event: Upon request, staff will cooperate with state and local government disaster planning agencies working to prepare for or react to emergencies presented by a pandemic outbreak.
2. Bomb threat
 - a. Upon receiving a bomb threat, staff at the program site should pull the fire alarm, if available.
 - b. Staff will ensure that everyone leaves the building and assembles at the designated assembly point outside the facility.
 - c. Staff will immediately call "911" from a neighbor's telephone or a cell phone.

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- d. Staff and persons will remain outside the building until further instructions are received from the police or fire department.
- e. If unable to re-occupy the building, staff will follow the procedures in Letter E of this **Responding to emergencies** section.
3. Repeated and unwanted or threatening phone calls
 - a. Upon receiving repeated and unwanted or threatening phone calls, staff will hang up the phone immediately or encourage the person served to hang up the phone.
 - b. Staff will lock all doors and windows.
 - c. Staff will monitor the frequency of disruptive phone calls, informing the manager when the calls continue to a point where the safety of persons served is in question or when the calls are personally threatening or environmentally threatening to a program site or property.
 - d. Staff will call “911” if at any point they feel threatened.
 - e. The manager will determine when and if the telephone number will be changed due to the harassing or threatening telephone calls.

Reporting emergencies

- A. Staff will immediately notify the manager that an incident or emergency has occurred and follow direction issued to them and will document the incident or emergency on an *Incident and Emergency Report* any related program or health documentation. Each *Incident and Emergency Report* will contain the required information as stated in the *Policy and Procedure on Reviewing Incidents and Emergencies*.
- B. If an incident resulted from the emergency situation, the manager will maintain information about and report incidents to the legal representative or designated emergency contact and case manager within 24 hours of an incident occurring while services are being provided, within 24 hours of discovery or receipt of information that an incident occurred, unless the company has reason to know that the incident has already been reported, or as otherwise directed in the person’s *Support Plan* and/or *Support Plan Addendum*.
- C. When the incident or emergency involves more than person served, the company and staff will not disclose personally identifiable information about any other person served when making the report to each person and/or legal representative and case manager unless the company has the consent of the person and/or legal representative.
- D. If a serious injury or death were to occur as a result of the emergency situation, staff will follow the response and reporting procedures as stated in the *Policy and Procedures on Responding to and Reporting Incidents* and, if needed, the *Policy and Procedure on Death of a Person Served*.

MARSHALL PLACE ~ FIRE DRILL ROTATION

CODES: DCC-Direct Care Coordinator DCA-Direct Care Assistant
DCS-Direct Care Support ONP-Over Night Programmer

January	-	** Cheryl Lubarski	<hr/>	❖ <u>Power Outage</u>
February	-	** Amanda Mock	<hr/>	• Fire Drill- Living Room Carbon/Smoke Detector
March	-	** Madison Mock	<hr/>	❖ <u>Tornado Drill</u>
April	-	** Maxine Mitchell	<hr/>	• Fire Drill- (WD) Bedroom #4 Smoke Detector
May	-	** Jackie Botha	<hr/>	• Fire Drill- Family Room Carbon/Smoke Detector BLOCKED EXIT DRILL – (Patio Door)
June	-	** Mary Kay Stinar	<hr/>	❖ <u>Health Emergency</u>
July	-	** Holly Confer	<hr/>	• Fire Drill- (JO) Bedroom #3 Smoke Detector
August	-	** Cheryl Lubarski	<hr/>	❖ <u>Severe Weather</u> (Hail storm with straight line winds) -Check smoke detector in West Hallway Cove (between bedrooms and west bathroom)
September	-	** Amanda Mock	<hr/>	• Fire Drill- (BS) Bedroom #1 Smoke Detector
October	-	** Madison Mock	<hr/>	❖ <u>Bomb threat</u>
November	-	** Maxine Mitchell	<hr/>	• Fire Drill- (AT) Bedroom #2 Smoke Detector
December	-	** Jackie Botha	<hr/>	• Fire Drill- garage – maintenance check smoke detector

**** SPECIAL DRILL Required**

MARSHALL JANUARY 2026

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Wk 2					1 New year day NO ODC/DAC	2	3 Admin-Janelle
					9a-11a-(AM)Maxine 11a-3p-(AM)Cheryl 3p-9p-Marykay 9p-9a-Marykay	9a-12p-(MJM)Marykay 12p-7.30p-(MJM/AM)Cheryl 7.30p-9a-(AM)Maxine	9a-11a-(AM)-Maxine 11a-8p-(AM)-Cheryl 8p-9a-(AM)-Madison
4 Admin-Janelle		5 JO-2.30p OT	6 WD-9.45a GF(neuro)	7 JO Music Therapy 3p	8 BS-Caylie-3p BBB 6p Staff mtg 10.30a	9 ODC starting fri's 8.20a	10 Admin-Kelsey
Wk 1	9a-11.15a-Madison (church) 9.30a-1p-(AM)-Marykay 1p-4p-Maxine 4p-9a-Madison	10a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	8.30a-1p-Cheryl DCC 1p-9pCheryl 9p-9a-Madison 2-9p-Jackie train	9a-4p-Cheryl 4p-9p-Maxine 9p-9a-Maxine 4-9p-Jackie train 9p-9a-Jackie train	11a-1p-Cheryl DCC 1-9p-Cheryl 9p-9a-Amanda <u>LIBRARY</u> 1p-9p-Jackie train WD-dentist 1-3pm	9a-9p-Maxine 9p-9a-Maxine Recycle bins out	9a-9p-Jackie 9p-9a-Jackie
11 Admin-Kelsey		12 BS-10a Krantz trf JO-12.30p ODC mtg	13 AT- 11a Crookston AT-9.15a Valerie zoom	14 JO MusicTherapy 3p	15	16 ODC-8.20a	17 Admin-Janelle
Wk2	9.30a-8p-Maxine 8p-9a-Madison Jackie train church w/CL 9.45a-11.15a	9a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison JO 2.30 OT	9a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison Spag/GBB-6p	9a-4p-Cheryl 4p-9p-Maxine 9p-9a-Maxine	11a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Marykay	9a-5p- Maxine 5p-9p-Amanda 9p-9a-Amanda	9a-9p-Amanda 9p-9a-Amanda
18 Admin-Janelle		19 GBB-6p	20 BS- Mills 10a trf	21 JO MusicTherapy 3p	22 WD-10a GF(EEG)	23 ODC-8.20a	24 Admin-Kelsey
Wk 1	9a-8p-Amanda 8p-9a-Madison	10a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison JO-2.30 OT	9a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	9a-4p-Cheryl 4p-9p-Maxine 9p-9a-Maxine	11p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Amanda <u>LIBRARY</u>	9a-9p-Maxine 9p-9a-Maxine	9a-9p-Jackie 9p-9a-Jackie
25 Admin-Kelsey		26 GBB-6p	27	28 JO MusicTherapy 3p	29 WD-9a GF (MRI)	30 ODC-8.20a	31 Admin-Janelle
Wk 2	9.30a-8p-Maxine 9a-11.15a-Jackie (church) 8p-9a-Madison	10a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison JO-2.30p OT	9a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	9a-4p-Cheryl 4p-9p-Maxine 9p-9a-Maxine WD-10.20a NVHC	11a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Marykay BBB-6p?	9a-5p-Maxine 5p-9p-Amanda 9p-9a-Amanda BS-1p Physical NVHC	9a-9p-Amanda 9p-9a-Amanda

ODC hours will be Mon-Fri 8:20a-2:10p starting JAN 9th

DAC hours Mon, Wed, Th 8:30a-3:30p

Tues/Fri - AT and BS will be home

