

Pursuant to MN Statutes, section 245A.65, subd. 2					
Program Name / Type		Austin Manor – Intensive Residential Treatment Services (IRTS)			
Address		510 23rd Ave. NW			
City	Austin	State	MN	Zip	55912
Date Plan Developed		10/18/2024			

Population Assessment	
1. Age range of recipients.	
Recipients in this program are 18 years old to 55 and older which may increase vulnerabilities due to different developmental stages and the individual priorities and needs at various ages. Individuals also risk being exposed to non-age-appropriate social factors outside of their peer group.	
2. How will this program reduce the potential of abuse and/or harm to recipients related to the age of the recipients served?	
The program will attempt to allow shared bedroom spaces with no more than double occupancy within a similar age range. The program encourages Resident Council for recipients to verbalize problems and difficulty within the milieu. The program offers individualized instruction on Enhanced - Illness Management and Recovery (E-IMR), Integrated Dual Diagnosis Treatment (IDDT), and WRAP programming to accommodate varying levels of education and development. Staff of the program will provide 60-minute safety and wellness checks.	
3. Gender of recipients:	Individuals identify throughout the gender spectrum and Thrive will accommodate living arrangements based on their identified needs and personal safety assessment
4. How will the program reduce the potential of abuse and/or harm to recipients related to the gender of the recipients served?	
This program makes rooming assignments according to gender. Sexual Education is available through the Clinical Supervisor and Registered Nurse. The program encourages Resident Council for recipients to verbalize problems and difficulty within the milieu. The program offers individualized instruction on Enhanced - Illness Management and Recovery (E-IMR), Integrated Dual Diagnosis Treatment (IDDT), and WRAP programming to accommodate varying levels of education and development. Staff of the program will provide 60-minute safety and wellness checks.	
5. Describe the range of mental functioning of recipients.	
IQ greater than 60, primary mental health diagnosis per the DSM –5. Individuals of this program may be having difficulty being redirected to using healthy coping skills, using their crisis prevention plan, or identifying positive supports. Some individuals may not demonstrate the ability to establish personal boundaries with other individuals or staff in the program. Also, noted we serve many individuals diagnosed with Serious and Persistent mental illnesses.	
6. How will this program reduce the potential of abuse and/or harm to recipients related to the mental functioning of the recipients served?	
The program encourages Resident Council for recipients to verbalize problems and difficulty within the milieu. The program offers individualized instruction on WRAP programming to accommodate different levels of education. The program staff’s qualified Mental Health Professional(s), Mental Health Practitioners, Registered Nurse, Mental Health Rehabilitation Workers, and Certified Peer Specialists trained in working with vulnerable populations. Implement the Positive Supports Rule for all individuals who qualify with a documented IQ below 70 or a Developmental Disability diagnosis before the age of 21. Staff will employ the strategies that the individual and their support team identify and document in their Individual Treatment Plan.	

<p>7. Describe the range of the physical and emotional health of recipients.</p>
<p>Recipients are ambulatory and capable of self-preservation; some require special diets and medication regimens. Primary mental health diagnosis per the DSM –V.</p>
<p>8. How will this program reduce the potential of abuse and/or harm to recipients related to the physical and emotional health of the recipients served?</p>
<p>The program employs an RN who trains and supervises all staff in relation to each recipient's medical health needs, including monitoring of side effects of psychotropic medications. The program staff's qualified Mental Health Professional(s), Mental Health Practitioners, Mental Health Rehabilitation Workers, RN's and Certified Peer Specialists are all trained in working with vulnerable populations.</p>
<p>9. Describe the range of adaptive/maladaptive behavior(s) of the recipients.</p>
<p>Recipients have often been exposed for prolonged periods of time to stress and anxiety and have difficulty making and monitoring adjustments to their environment.</p>
<p>10. How will this program reduce the potential of abuse and/or harm to recipients related to the adaptive/maladaptive behavior(s) of the residents served?</p>
<p>The program staff's qualified Mental Health Professional(s), Mental Health Practitioners, Mental Health Rehabilitation Workers, RN's and Certified Peer Specialists trained in working with vulnerable populations. Staff will develop and Individual Treatment Plan along with the recipient to identify current stressors and development of coping skills. All staff will be trained in Trauma Informed Care, verbal de-escalation techniques, and perform 60-minute location and wellness checks unless factors associated with imminent risk of harm to self or others are present, in which case on-site staff will consult with the Treatment Director, on-call staff and/or clinical supervisor to determine safety protocol or intervention.</p>
<p>11. Describe the need for specialized programs of care for the recipients.</p>
<p>Recipients require structured daily programming to address mental health and co-occurring disorders. This may include individual sessions of E-IMR, IDDT, WRAP, and individual and group Family Psychoeducation. Programming is offered Monday to Friday.</p>
<p>12. How will this program reduce the potential of abuse and/or harm to recipients related to the need for specialized programs of care for the recipients served?</p>
<p>The program offers individualized instruction on Enhanced-Illness Management and Recovery (E-IMR), Integrated Dual Diagnosis Treatment (IDDT), and WRAP programming to accommodate varying levels of education and development.</p>
<p>13. Describe the need for specific staff training to meet individual recipients' needs.</p>
<p>Staff are provided ongoing training specific to the needs of vulnerable adults with mental health diagnoses.</p>
<p>14. How will this program reduce the potential of abuse and/or harm to recipients related to the need for specific staff training designed to meet individual recipient's needs?</p>
<p>An annual staff training needs assessment is conducted by the Treatment Director to determine individual program and staff's training needs. Topics include, but are not limited to HIPAA, Mandated Reporter, Mental Health Diagnoses, and Co-Occurring Disorders.</p>

<p>15. Describe any knowledge of previous abuse that is relevant to minimizing the risk of abuse to recipients.</p>
<p>Staff assess for many types of abuses using the Individual Abuse Prevention Plan and Vulnerable Adult Assessment. Higher incidents of abuse, neglect, exploitation and inability to utilize healthy coping skills to reduce harmful behaviors. We also anticipate a lack of a primary or healthy support system. Some individuals may also experience recent medication changes requiring monitoring.</p>
<p>16. How will this program reduce the potential of abuse and/or harm to recipients related to the knowledge of previous abuse?</p>
<p>The program staff's qualified Mental Health Professional(s), Mental Health Practitioners, Mental Health Rehabilitation Workers, RN's and Certified Peer Specialists trained in working with vulnerable populations. Staff will develop and Individual Treatment Plan along with the recipient to identify current or past vulnerabilities to abuses.</p>

<p>Physical Plant Assessment</p>	
<p>1. Describe the condition and design of this program's building as it relates to recipient's safety.</p>	<p>The building consists of two stories. On the main level there are staff offices, group meeting rooms and one storage closet and laundry room. There is also one apartment with an unlocked door into the apartment from the main hallway. There is a shared living space with kitchen, living room, one bathroom, and two bedrooms in each apartment. The upstairs is open to the main level and has two separate apartments identical to the main floor apartment. There is a hallway at the top of the main stairs that includes a drop down to the second-floor hallway if a person scaled the 1/2 wall. All cleaning materials and toxins are kept in a locked staff bathroom.</p>
<p>2. How will this program reduce the potential of abuse and/or harm to recipients related to the condition and design of this program's building in terms of recipient's safety?</p>	<p>Staff conducts 60-minute safety and location checks on each unit and recipients. Cleaning materials and toxins are kept in the locked staff bathroom in the office area. Recipients are instructed on appropriate use of the kitchen appliances and supervised during meal preparations. Each apartment is one gender only.</p>
<p>3. Describe any areas of this program's building that are difficult to supervise.</p>	<p>Each apartment can be difficult to supervise on the overnight shift when allowing for least disruption and sleep privacy. The main entry is not supervised at all times and is left unlocked during the day and evening hours.</p>
<p>4. How will this program reduce the potential of abuse and/or harm to recipients related to the areas of this program's building that are difficult to supervise?</p>	<p>All staff access to keys for the building during their shift. Staff conducts 60-minute safety and location checks on each unit and recipients. Staff will not disrupt recipient's sleep if no safety concerns. There are sign near the main door indicating that guests are to go to the main office first which is down the hall to check-in.</p>

<p>Environmental Assessment</p>	
<p>1. Describe the location of this program including information about the neighborhood and community that this program is located.</p>	<p>The facility is located in a rural residential neighborhood on a side street. Within walking distance there is access to many stores, restaurants, and gas stations.</p>

<p>2. How will this program reduce the potential of abuse and/or harm to recipients related to the location of this program, including factors about the neighborhood and community?</p>
<p>Recipients are offered transportation in the company vehicle for any recreation activities, personal shopping, or appointments they have. Staff is available 24 hours per day and 7 days per week to transport clients if needed. Client confidentiality is ensured by not using identifying signs at the home or any identifying badges for staff or clients. Staff conducts 60-minute safety and location checks on each unit and recipients.</p>
<p>3. Describe the type of grounds and terrain that surround this program.</p>
<p>There is a driveway and a sidewalk leading to the main entrance of the facility. There is a large yard on the north and east side of the building and an area designated for smoking on the east side of the building by the driveway. The outside front of the facility is landscaped with natural bushes and plants. There is a side entrance into the staff offices, a small storage shed for maintenance equipment, and a smoking area for recipients to use.</p>
<p>4. How will this program reduce the potential of abuse and/or harm to recipients related to the type of grounds and terrain that surround this program?</p>
<p>The home is landscaped to blend into the neighborhood and be aesthetically pleasing. The lawn is mowed and sidewalks/paths are cleared by a company we contract with for those services. Human Resources send out annual education on prevention of slips, trips, and falls for all recipients and employees. The smoking area is cleaned weekly by staff and recipients.</p>
<p>5. Describe the type of internal programming provided at this program.</p>
<p>Evidence-Based Practice programming is the core of treatment at this home. E-IMR, IDDT, WRAP and Family Psycho education are presented multiple times per week both individually and in group education settings. As needed individual supportive counseling is offered.</p>
<p>6. How will this program reduce the potential of abuse and/or harm to recipients through the type of internal programming provided at this program?</p>
<p>The program qualified staff consisting of Mental Health Professional(s), Mental Health Practitioners, Mental Health Rehabilitation Workers, RN's and Certified Peer Specialists trained in working with vulnerable populations will deliver the programming. Individual and/or group programming is offered based on the recipient's identified goals in their Individual Treatment Plan. Recipients are expected to participate in structured programming and treatment although they are offered a choice in services to best fit their presenting issues.</p>
<p>7. Describe this program's staffing pattern.</p>
<p>The program has 24 hours per day and 7 days per week awake staffing. There are three shifts throughout one calendar day. Staffing consists of a variation between Mental Health Professional(s), Mental Health Practitioners, Mental Health Rehabilitation Workers, and Certified Peer Specialists trained in working with vulnerable populations.</p>
<p>8. How will this program reduce the potential of abuse and/or harm to recipients through this program's staffing pattern?</p>
<p>A minimum ratio of 1 staff to 9 recipients will be adhered to at all times. The Treatment Director monitors and ensures that staffing levels and ratios are in compliance with the IRTS MN Statute 245I. The Clinical Supervisor, Treatment Director, and RN are available Monday through Friday on-site and anytime for on-call purposes.</p>

EACH PROGRAM MUST ENSURE THAT:

1. Residents are provided with an orientation to the Program Abuse Prevention Plan. This orientation must be within 24 hours of admission or within 72 hours for individuals who would benefit from later orientation.
2. The President and Program Administrator must review the Program Abuse Prevention Plan at least annually.
3. A copy of the Program Abuse Prevention Plan must be posted in a prominent place in the facility and be available, upon request, to mandated reporters, residents, and legal representatives.

This plan will be reviewed annually along with any substantiated maltreatment findings that occurred since last review.



Program Administrator - Signature

10/24/24

Date Reviewed / Approved



President - Signature

10/24/24

Date Reviewed / Approved