

14. PROGRAM ABUSE PREVENTION PLAN – 1239 Willow Lake Blvd.**I POPULATION ASSESSMENT:**

1. Merrick, Inc., provides services to clients 21 years of age and older. Based on the 2023 demographic data, the youngest service recipient is 21 and the oldest is 82.
2. The program will reduce the potential of abuse and/or harm to clients related to their age in the following manner:
 - Encourage age-appropriate interactions with others.
 - Follow age-related instructions with the Individual Abuse Prevention Plan.
 - Respond to age-related abuse or harm trends that emerge from the analysis of incident reports.
3. Based on demographic data from 2023, 52% of clients are men and 48% are women.
4. The program will reduce the potential of abuse and/or harm to clients related to their gender in the following manner:
 - Encourage gender-appropriate interactions with others.
 - Follow gender-related instructions with the Individual Abuse Prevention Plan or Support Plan Addendum.
 - Respond to any gender-related abuse and/or harm trends that emerge from the analysis of incident reports.
5. Range of cognitive functioning includes:
 - Clients with a diagnosis of a related-condition, indicating their needs are similar to persons with a diagnosis of a developmental disability.
 - Clients with a developmental disability include those with a diagnosis of:
 - Dementia and Alzheimer’s Disease and related-conditions;
 - Autism Spectrum Disorder;
 - Intellectual Disorder (Intellectual Disability) and related condition such as epilepsy and cerebral palsy;
 - Traumatic Brain Injury; and
 - Mental Illness; depression, schizophrenia, intermittent explosive disorder, and bipolar disorders.
 - Recipients with imitations in cognitive functioning can range from benign to significant.
6. The program will reduce the potential of abuse and/or harm to clients related to their mental functioning in the following manner:
 - Each client is considered a vulnerable adult and has an Individual Abuse Prevention Plan that is intended to reduce the potential for abuse and/or harm, including potential for abuse and/or harm related to their cognitive functioning.
 - DSPs must be competent to perform assigned duties for the clients they are assigned to support and their cognitive functioning needs.
 - Internal reviews are conducted, and corrective action is taken, if it is found that the potential for or actual abuse and/or harm are related to the cognitive functioning of clients.
7. The range of physical and emotional health of clients is as follows:
 - The physical health of clients can range from no limitations to being medically fragile.
 - The mental health of clients can range from no mental health diagnosis to one or more diagnoses from the Diagnostic and Statistical Manual of Mental Disorders.
 - As with the general population, there can be time-limited occasions of need within the area of physical and emotional health.

8. The program will reduce the potential of abuse and/or harm to the physical and emotional health of clients in the following manner:
 - Most of the clients have been vaccinated against Covid-19 and their physical health can range from no limitations to being medically fragile.
 - Each client is considered a vulnerable adult and has an Individual Abuse Prevention Plan that is intended to reduce the potential for abuse and/or harm, including potential for abuse and/or harm related to the individual's physical and emotional health.
 - DSPs must be competent to perform assigned duties for the clients they are assigned to support and their physical and emotional health needs.
 - Internal reviews are conducted, and corrective action taken, if it is found that the potential for or actual abuse and/or harm are related to the physical and emotional health of clients.
 - Formal plans responding to factors that risk the health and safety of clients will be developed and implemented in accordance with licensing standards or mandates as needed.

9. The range of adaptive/maladaptive behavior(s) for clients is as follows:
 - Limitations in a client's adaptive behavior can range from minor to major.
 - The display of maladaptive behavior may range from non-existent to frequent display of one or more maladaptive behaviors.
 - As with the general population, the display of maladaptive behavior can be short- or long-term in nature. Clients with ongoing or intense behaviors can be suspended or terminated from our program per Merrick's Service Termination and Service Suspension Policies.

10. The program will reduce the potential of abuse and/or harm to clients with adaptive/maladaptive behavior(s) served in the following manner:
 - Each client is considered a vulnerable adult and has an Individual Abuse Prevention Plan that is intended to reduce the potential for abuse and/or harm, including potential for abuse and/or harm related to their adaptive/maladaptive behavior.
 - DSPs must be competent to perform assigned duties for the clients they are assigned to support and their adaptive/maladaptive behavior needs.
 - Internal reviews are conducted, and corrective action is taken, if it is found that the potential for or actual abuse and/or harm are related to adaptive/maladaptive behavior.

11. Describe the need for specialized programs of care for clients.
 - Our Day Support Services offer individualized onsite and community-based training and support services to help clients to develop and maintain needed and personally preferred enriching life skills so they can effectively access and participate in meaningful activities they prefer in their communities. These include a variety of therapeutic non-work activities including music therapy, pet therapy, horticulture, various art activities and community inclusion based on client need and interest.
 - Medication Administration is under the supervision of a RN Consultant.

12. The program will reduce the potential of abuse and/or harm to clients needing specialized programs of care in the following manner:
 - Trained Medication Passers are assigned to oversee the medication administration needs of the clients. The RN Consultant will provide consultation and monthly reviews of clients' health status, health education, medication procedures, and the training of personnel to medication administration.
 - All employees are offered training in First Aid, CPR, and use of an AED.

13. The need for specific training to meet individual service needs are as follows:

- Prior to working with a client for whom A DSP has assigned responsibilities, that DSP must receive training sufficient to achieve competency addressing the specific service needs of that client.
 - DSPs will be trained on any changes to specific needs of the clients they are assigned to support.
14. The program will reduce the potential of abuse and/or harm to clients with specific service needs in the following manner:
 - All employees are offered training in First Aid, CPR, and use of an AED. The First Aid kit and AED is located on the wall in the med room.
 - DSPs review information on dementia and Alzheimer's disease prior to supporting clients with a diagnosis of dementia and/or Alzheimer's disease.
 - DSPs are trained on the use of specialized equipment (i.e., standers, wheelchairs, lifts, etc.) and demonstrate competency before using the specialized equipment with clients and competency will be documented in the DSP's training file.
 15. The program maintains files of reports submitted to the Minnesota Adult Abuse Reporting Center and, if received, disposition of those reports by the Department of Human Services in order to minimize the future risk of abuse to clients.
 16. The program will conduct internal reviews when there is an allegation of maltreatment and, as warranted, take corrective action to prevent maltreatment in the future.

II PHYSICAL PLANT ASSESSMENT:

1. The following is a summary of the condition and design of the facility as it relates to safety for the clients. The program is located at 1239 Willow Lake Blvd in Vadnais Heights Minnesota, is a leased site and was renovated in 2022. The total leased space is 17,410 square feet with 6,816 square feet of usable program space. With service recipient input, it has open and barrier-free environments. The building is wheelchair accessible with ground level exits to interior evacuation zones and to the outside. The program activity areas have ample lighting. The building is equipped with hard-wire smoke detectors and sprinklers and meets current licensing and fire code standards. A non-coin operated telephone with posted emergency numbers is located in the Cafe and is accessible to clients and employees. All chemicals (i.e. cleaning, laundry) are stored in a keyed locked storage closet. Cleaning and laundry is conducted during non-program hours. Medications are stored per the Medication Administration Policy. Employees are instructed to keep their own personal medications locked up in their lockers or in their personal vehicles. There is an operable flashlight next to the AED kit, in case of a power outage. A battery-operated NOAA radio is located in the Administrative office area. The exterior doors are equipped with a keypad requiring a passcode to exit (except in case of a fire alarm when all doors would be accessible) and all exterior doors emit an audible alarm.
2. The program will reduce the potential of abuse and/or harm to clients related to the condition and design of the facility in terms of safety for clients in the following manner:
 - To address general maintenance, Merrick contracts for these services 1-2 hours per week or as needed. Merrick, Inc., has a FTE maintenance position that is available to this program. If there are maintenance concerns, employees can email AAA Fix which serves to identify the issue and prioritize being addressed.
 - Portable Hoyer lifts are available for non-ambulatory clients who need assistance moving safely.
3. Describe any areas of the program area that are difficult to supervise. If a client chooses to go into an office or other non-program space to be in a quieter area, employees will frequently monitor the status of the client in accordance with their Support Plan Addendum and encourage them to rejoin activities.

4. The program will reduce the potential of abuse and/or harm to clients related to the areas of the program that are difficult to supervise in the following manner:
 - When dangerous supplies and chemicals are not in use for cleaning or laundry purposes, the items are stored in the locked janitorial closet. The medication storage and disposal procedures are identified within the Medication Administration Policy.
 - On a daily basis, employees clean the program areas once the clients have left for the day.
 - Deep cleaning is completed weekly by employees when clients are not present.

III ENVIRONMENTAL ASSESSMENT:

The following is a summary of the facility location including information about the neighborhood and community that the facility is located. Merrick, Inc., is located in Vadnais Heights, Minnesota. There are a number of commercial businesses in the area, ranging from small to large and residential areas to north, south and west of the facility. The facility parking lot entrance is adjacent to Willow Lake Blvd, a street with a low level of traffic. There is a section of the sidewalk in front of the entrance that is level to the parking lot for access to those with mobility challenges. On a daily basis, employees are assigned to assist clients getting off and on their vehicles.

1. The program will reduce the potential of abuse and/or harm to clients related to the location of the program, including factors about the neighborhood and community in the following manner:
 - The program does provide and coordinate transportation to and from the program. Vehicles with hydraulic lifts to accommodate passengers using wheelchairs are available within the service area.
 - The Ramsey County Sheriff's Department provides law enforcement services to the Vadnais Heights community. The non-emergency phone number is (651) 767-0604.
 - The Vadnais Heights Fire Department provides fire protection, fire safety education and emergency response to the Vadnais Heights community. The non-emergency phone number is (651) 204-6030
 - The grounds and terrain that surround the facility include a nature preserve located to the south of the facility. A building complex is also located to the south and Labore Road to the west.
2. The program will reduce the potential of abuse and/or harm to clients related to the type of surrounding grounds and terrain in the following manner:
 - Employees are assigned to assist with the unloading and loading of vehicles bringing clients to the program. Only two vehicles will be unloaded/loaded at a time.
 - When accessing the community, employees will guide and provide verbal cues for clients to maneuver around uneven terrain and support them in accordance with their Support Plan Addendum to safely reach the entrance of community locations.
3. Internal programming provided at this Day Support Service site includes:
 - Individualized community-based training and support services (i.e. social skills, music, art, yoga, community inclusion activities, walking activities, therapies, academics, exercise, volunteerism, and horticulture) to help clients develop and maintain needed and personally preferred enriching life skills so they can effectively access and participate in meaningful activities they prefer in their communities.
 - Assistive technology is incorporated into daily routines to promote communication and socialization.
 - Self-Advocacy activities are offered to promote empowerment, self-determination, choice, and leadership skills.
4. The program will reduce the potential of abuse and/or harm to clients through the type of internal programming provided in the following manner:
 - Staffing ratios, employee qualifications, and daily routines address the needs of clients to best ensure their successful and safe participation in activities.

- A Self-Management Assessment is completed on each client identifying their independence to respond to emergency situations and the staff-to-client ratio needed.
5. Each client has been assigned a staff-to-client ratio to meet their health and safety needs. The daily schedule reflects this information to ensure the staff-to-client ratio of the clients is met daily.
 6. The Program Director (PD) or designee is responsible for reviewing, developing, and monitoring daily schedules to ensure the staffing pattern reflects what is identified for each client. The PD is responsible for orientating and training volunteers to understand their role to the clients, social boundaries, activity engagement, and information about the population served.

IV PROGRAM ASSURANCES:

- A. Clients 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 clients who would benefit from a later orientation.
- B. Merrick, Inc.'s Board of Trustees must review the Program Abuse Prevention Plan at least annually.
- C. A copy of the Program Abuse Prevention Plan must be posted in a prominent place in the program area and be available, upon request, to mandated reporters, clients, and their legal representatives.
- D. The plan must include a statement of measures to be taken to minimize the risk of abuse to the vulnerable adult(s) or when the need for additional measures is identified. This includes identifying referrals that are made when the vulnerable adult is susceptible to abuse outside the scope or control of the licensed services.
- E. If the assessment indicates that the vulnerable adult does not need specific risk reduction measures in addition to those identified in the Program Abuse Prevention Plan, the Individual Abuse Prevention Plan must document this determination.
- F. In addition to the Program Abuse Prevention Plan, an Individual Abuse Prevention Plan must be developed for each new client. A review of the Individual Abuse Prevention Plan must be done as part of the review of the program plan. The client must participate in the development of the Individual Abuse Prevention Plan to the best of their abilities. All Individual Abuse Prevention Plans must be reviewed at least annually by the support team.

Board Approved 02/14/2024.

Policy revised and authorized on 02/15/2024 by:



John Wayne Barker, Executive Director