



CHILDREN'S CENTER PROGRAMS, LLC

ADULT DAY HABILITATION PROGRAM

POLICY AND PROCEDURES MANUAL

**11/16/2019, Revised 01/05/2022, 10/19/2022
12/28/2022, 3/7/2023, 4/12/2023, 4/26/2023,
7/17/2023, 9/2023**

This manual is a compilation of policies and procedures developed by Children's Center Programs (CCP). The Policies were submitted to the Department of Developmental Disabilities (DDD) for review, recommendations, and approval. CCP received full approval February, 2020. CCP made a concerted effort to follow the guidelines set forth by the various editions of the DDD Supports Program Policies and Procedures Manual up to and including its most recent version: January, 2023. We thank you in advance for your time in becoming familiar with our Policies and Procedures. Updates and revisions, when needed, will take place, be submitted to DDD for approval, and be added to this manual.

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CHILDREN'S CENTER PROGRAMS ADULT DAY HABILITATION OVERVIEW

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: PROGRAM MISSION, VISION, CORE VALUES, BELIEFS, GOALS

Effective Date: 8/2017 Revised: 3/30/2019, 10/3/2022

SCOPE & SUMMARY: This policy pertains to all employees, Home Representatives/Guardians, and participants associated in any amount with the Adult Day Habilitation Program at CCP (Children's Center Programs).

Our Core Values:

- **Personal Choice:** Provide our participants with personal choice through increased person-centered options.
- **Engagement:** Focus each day on engaging with and empowering our participants.
- **Improvement:** Continuously improve through increased community inclusion and age-appropriate activities.
- **Professional Development:** Collaborate and make a difference through staff training, professional, and personal growth.
- **Integrity:** Do the right thing by being kind, accepting, empathetic, respectful, and judgement free.
- **Safety:** Create and maintain a safe and secure environment.
- **Stakeholder Relations:** Dedicate ourselves to support positive relationships with our stakeholders and constituents.

Our Vision:

We are a day habilitation program that provides adults with intellectual and developmental disabilities the opportunity to participate in services designed to address the outcomes identified in their Individual Services Plans in a supportive environment.



Our Mission:

We offer choices from a variety of person-centered, meaningful, age-appropriate options designed to enrich the life experiences of those we support. Community and on-site activities are created to foster independence, acceptance, and belonging. Our highly trained Direct Support Professionals implement strategies designed to achieve participants' personal outcomes.

Adult Program Philosophy: (Beliefs)

The most important stakeholder(s) are our participants and their families. We will continually make every effort to satisfy, work with, listen, and communicate with those who are the end-users of our Day Program.

- We will maintain the highest level of ethical standards in our external and internal relationships in order to succeed in our mission.
- We will make decisions based upon facts, objective data, conversation, and agreement.
- We will maintain a safe, clean, and secure internal (building) and external (campus) environment for our Associates and Participants.
- We will hire, train, and evaluate our Associates based upon objective information, core competencies, actual performance and not personalities. We will maintain our foundation of being an equal employment opportunity employer.
- We will maintain all required and relevant records of Associates and Participants according to standards set forth by applicable State Code.
- We will strive for urgency in everything we do for the betterment of our Adult Participants.
- We will create a warm, accepting, and sensitive environment for our Adult Participants.
- We will consistently strive to develop an innovative, engaging, cultural, community-based, center-based, fun, socializing, activity-based, daily experience for all our Participants who are able to take part.
- We will refrain from using physical force or inappropriate restraints on/with our Participants. Only fully trained and certified Associates will be contacted should a need arise so that the proper methods of a safe outcome are employed.
- We will strive daily to have fun working together as a team.
- We will partner with community-based organizations and colleges/universities in an effort to affiliate ourselves for the betterment of our program.



- We will work with and maintain contact with home representatives/guardians of Participants in order to keep them up to date on the various parts of our Program and their family member.
- Our focus is the Participant and their Family. We will provide them with the best Day Program experience they can get.
- We will present ourselves in a professional manner every day.
- We will maintain communication among ourselves daily with facts and data not innuendos and hear-say.

Adult Program Goals:

The Goals of the Adult Program continue to be fluid and grow with the ever-changing needs of our participants and their families. Here are a few initial and basic goals that have become the cornerstone of our Program.

Recognizing the unique and individualized characteristics of each Adult, it is our goal to design programs and activities to fit the cognitive and physical strengths of Adults with intellectual and developmental disabilities and moderate to severe cognitive and physical disabilities.

Working with individuals and their families it is our goal to help guide participants toward making the best choices .

It is our goal to utilize dedicated buildings and rooms on a campus like setting for the Day Program servicing Adults with disabilities.

It is our goal to offer a wide variety of Campus/Center based activities for Adults enrolled in our Day Program. (please refer to our guide sheet for families)

It is our goal to offer a wide variety of Community based activities for Adults enrolled in our Day Program. (please refer to our guide sheet for families)

It is our goal to offer a wide variety of flexible and convenient options to individuals and their families regarding program attendance of their son/daughter.

It is our goal to provide Home Representatives/Guardians with a Customer satisfaction survey at the minimum every three (3) years. Results will be shared and available.



Adult Program Goals: (cont'd)

It is our goal to maintain the presence of a Nurse on Campus and available when the regular program is in session.

It is our goal to hire, orient, develop, and continually train qualified individuals for employment at the Day Program.

It is our goal to align ourselves with local Universities and Colleges as a source of up to date research and resources in the area of working with Adults with Autism and/or multiple disabilities.

It is our goal not to discriminate with regard to hiring, firing, promoting, setting wages, testing, training and other conditions of employment with regard to race, color, age, gender, national origin, religious beliefs, sexual orientation, and disability.

It is our goal to provide and maintain a safe and secure environment for staff and participants.

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: CODE OF ETHICS

Effective Date: 3/30/2019

Build Trust and Credibility

The success of Children's Center programs, LLC (CCP) is dependent on the trust and confidence we earn from our employees, participants, their families, caretakers, and other stakeholders. We gain credibility by adhering to our commitments, displaying honesty and integrity, and reaching our goals solely through honorable conduct. It is easy to *say* what we must do, but the proof is in our *actions*. Ultimately, we will be judged on what we do and how we do it.

When considering an action, we will ask ourselves: Is what we are doing going to build additional trust and credibility for CCP? Will it help create a working environment in which employees can succeed? Is the action we are taking one we can be at peace with and one that benefits the well-being of our Program participants? If our answers are "yes" then we are working on the correct path to enhancing and building our trust and credibility in those that depend upon us the most.

Respect for the Individual

We all deserve to work in an environment where we are treated with dignity and respect. CCP is committed to creating such an environment because it brings out the full potential in each of us, which, in turn, contributes directly to our overall success. We cannot afford to let anyone's talents go to waste.

CCP is an equal employment/affirmative action employer and is committed to providing a workplace that is free of discrimination of all types and from abusive, offensive, exploitive, or harassing behavior. Any employee who feels harassed or discriminated against should report the incident to his or her manager, management or human resources immediately and without fear of reprisal.



Code of Ethics

Create a Culture of Open and Honest Communication

At CCP everyone should feel comfortable to speak his or her mind, particularly with respect to ethical concern and/or behaviors. CCP tries hard to create an open and supportive environment where employees feel comfortable raising such questions or concerns. We all benefit tremendously when employees are able to exercise their freedom to prevent mistakes or wrongdoing by asking the right questions at the right times. Our environment demands such openness due to whom we service.

If a wrongdoing has been observed and reported, CCP will investigate this/these instances of questionable or unethical behavior. In every instance where improper behavior is found to have occurred, CCP will take immediate and appropriate action. We will not tolerate retaliation against employees who raise genuine ethics concerns in good faith as per *CCP's Whistleblower policy and the law that governs same*.

Set Tone at the Top

The Management of CCP has the added responsibility for demonstrating, through their actions, the importance of this Policy. Ethical behavior does not simply happen; it is the product of clear and direct communication of behavioral expectations, modeled from Management and demonstrated by example. Again, ultimately, our actions are what matters. At CCP we want the ethics dialogue to become a natural part of daily work if the need arises.

Uphold the Law

CCP's commitment to integrity begins with complying with the laws, rules and regulations that govern our agency. Further, each of us must have an understanding of the company policies, If we are unsure of whether a contemplated action is permitted by law or CCP policy, we should ask and seek the advice from the resource expert. We are responsible for preventing violations of law and human rights and for speaking up if we see possible violations.

Health and Safety

CCP is dedicated to maintaining a safe, secure, and healthy work environment. Various trainings and evacuation drills will take place throughout each year. We ask each employee to notify Administrative and Security Personnel of visitors well before their arrival on campus. Sign-in and sign-out procedures are in place, as well as lock-down, and secured entrances to each building. Necessary evacuation routes are posted, and rooms are identifiable from outside each building.

Code of Ethics

**Conflicts of Interest**

We must avoid any relationship or activity that might impair, or even appear to impair, our ability to make objective and fair decisions when performing our jobs. At times, we may be faced with situations where the decisions or actions we take on behalf of CCP may conflict with our own personal or family interests. We have a responsibility to CCP to inform them in advance if such an opportunity arises, e.g., outside employment policy. We must never use CCP property or information for personal gain or personally take for ourselves any opportunity that is discovered through our position with CCP.

Determining whether a conflict of interest exists is not always easy to do. Employees with a conflict of interest question should seek advice from management. Before engaging in any activity, transaction or relationship that might give rise to a conflict of interest, employees must seek review from management.

Acceptance of non-business-related materials for personal gain.

Gifts, gratuities, business courtesies, lavish meals, refreshments, inappropriate entertainment or lavish excessive tangible courtesies, compensation, presents, tickets, memberships, etc. must be evaluated prior to acceptance in that if they are for personal gain it would place CCP in a unfair position overall. Questioning oneself whether this is ethical or not is best prior to consideration and asking oneself if:

- The practice violates any law or regulation or the standards of conduct of CCP as an organization.
- The courtesy offered is consistent with good business practice, is infrequent in nature and is not lavish.
- The courtesy can be properly reflected on the books and records of CCP for proper audit.

Corporate Recordkeeping

We create, retain and dispose of our company records as part of our normal course of business in compliance with all CCP policies and guidelines, as well as all regulatory, fiducial, and legal requirements.

All corporate records must be true, accurate and complete, and company data must be promptly and accurately entered in our books in accordance with GAAP and other applicable accounting principles.

Code of Ethics

We must not improperly influence, manipulate or mislead any unauthorized audit, nor interfere with any auditor engaged to perform an internal independent audit of CCP books, records, processes or internal controls.



Accountability

Each of us is responsible for knowing and adhering to the values and standards set forth in this Policy and for raising questions if we are uncertain about any CCP policy or procedure. If we are concerned whether the standards are being met or are aware of any ethical violations, we must contact management and/or the HR department.

CCP takes seriously their policies and procedures and expects that employees own accountability for their actions while in their employ. Violations are cause for disciplinary action up to and including dismissal from employment.

Confidential and Proprietary Information

Integral to CCP's success is the protection of confidential information, (company, employee, participant, health, family, guardianship, etc.) Information will not be disclosed, shared, published, etc. unless the appropriate permissions have been granted.

Use of Company Resources

CCP resources, including time, material, equipment, and information, are provided for use on the job. Nonetheless, occasional personal use may be permissible as long as it does not affect job performance or cause a disruption to the workplace and as long as the proper authorizations have been given.

Employees will not use company equipment such as computers, copiers, fax machines, etc. in the conduct of an outside business or in support of any religious, political, environmental, social, academic or other outside activity, except for CCP -requested support, e.g., autism awareness, Special Olympics, Related Services, etc. Employees will not solicit contributions nor distribute non-work-related materials during work hours.

Code of Ethics

In order to protect the interests and integrity of CCP's network and employees, CCP reserves the right to monitor or review all data and information contained on an employee's company-issued computer or electronic device, the use of the Internet or CCP's intranet. We will not tolerate the use of company resources to create, access, store, print, solicit or send any materials that are harassing, threatening, abusive, sexually explicit or otherwise offensive or inappropriate. Questions about the proper use of company resources should be directed to Management.

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Media Inquiries

CCP is an organization dedicated to servicing the expressed needs of adults and their families beyond the age of 21 years. From time to time, employees may be approached by reporters and other members of the media. In order to ensure that we speak with one voice and provide accurate information about a topic, we must direct all media inquiries to the Executive Director and/or his/her representative. Employees are not to issue a press release without first consulting with Top Management. We all must do the Right Thing

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ADMISSION AND SERVICE



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: SERVICE ADMISSION

Effective Date: Effective Date: 1/1/14; Revised: 5/14/18, 10/30/20, 12/28/22

SCOPE & SUMMARY: This Policy pertains to all Individuals, Home Representatives, Guardians, and Families seeking to gain admission of an adult into Children's Center Program's (CCP) Day Habilitation Program.

POLICY: Children's Center Programs has developed, maintained, and implemented admission procedures that align with the requirements set forth in the current Supports Program and Community Care Program Policies and Procedures Manuals. This policy is shared in writing with families when they meet with the Program Director to consider the program

PURPOSE: To establish procedures for the admissions process and to develop criteria for acceptance into the Program

PRE-ADMISSION PROCEDURE

A meeting/interview with Program Director and the individual and home representative/guardian is required before placement is offered. The Support Coordinator is welcome to attend the meeting(s)/interviews

Preliminary Contact

1. Contact to express interest in the program is made by the individual, home representative/guardian and/or Support Coordinator
2. CC Programs requests the IEP (for upcoming/recent graduate) and the NJISP and PCPT for review prior to scheduling a meeting. CC Programs may contact the Support Coordinator and/or individual/guardian to ask additional questions
3. Based on a review of the documents and any subsequent contact(s) with the individual/guardian or Support Coordinator, CC Programs decides to proceed with the meeting or to decline the meeting based on the program's ability to meet the needs of the individual
4. If an interested person is declined by CC Programs, an explanation is provided within five business days. If CC Programs decides to proceed with the meeting, CC Programs contacts the family within five business days to schedule the appointment.



Interview/Tour

1. Review of Program and discussion with prospective participant and home representative/guardian
 - a. Overview of Program offerings and structure
 - b. Overview of individual's support needs (amount and type), interests, and pertinent information to include behavioral, medical, and specific support needs. Level of supervision needed by the individual is determined based upon interview with the individual/guardian, observation of the individual, and review of the NJISP, IEP, Behavior Support Plan, etc.
 - c. Review of calendar
 - d. Participant Attendance/Schedules
 - e. Review of transportation
2. Tour of facility
3. Need for Program Trial – If it is determined that more extensive observation is needed before a decision about placement can be made or if the individual is unsure about the appropriateness of the program, then a trial is arranged. Trials can range from one to three separate sessions. The home representative/guardian must remain on-site during the program trial(s), but is not involved in the trial itself

ADMISSION PROCESS

Criteria for Acceptance

The Program Director will contact the individual/home representative/guardian and Support Coordinator within five business days of the initial meeting or program trial(s) to either offer placement, ask additional questions or to explain that the program cannot meet the needs of the individual ((This timeline does not include those who are interviewing for post-graduation placement well in advance of graduation. Determination for placement for graduates is made beginning in late winter/spring of the graduating year)

1. Placement is offered based on:
 - a. Interest in the program by the individual
 - b. Available space and appropriate grouping in the program
 - c. Appropriateness of the program to meet the needs of the individual
 - i. Ability to safely manage behavioral issues
 - ii. Ability to safely manage medical issues
 - iii. Ability to provide a program suited to the individual's interests and specific needs
 - iv. Agreement of the individual/guardian/home representative (Support Coordinator where appropriate) to meet any conditions required by the Adult Program for inclusion in the program (specialized seating/equipment, need for PDN, etc.)
2. Placement will not be offered or will be rescinded if the above listed criteria cannot be met



Once placement in the program has been offered, the following must occur in advance of a start date:

1. New Participant Folder must be completed in full and submitted five business days prior to start in the program. The folder includes policies/procedures, authorizations, participant rights and health forms
2. Support Coordinator, guardian/individual/home representative and program need to confirm the following:
 1. Unit information
 2. Schedule
 3. Any specific agreements that were made during the pre-admission process
 4. Tentative start date
 5. Discussion regarding Outcome on NJISP
3. Program must set up transportation (if applicable) and communicate information with individual/guardian/home representative
4. Program must receive a **draft*** of the NJISP and Service Detail Report from the Support Coordinator to ensure the information is correct
5. Program must receive the approved Service Detail Report/Receipt of Prior Authorization, approved NJISP and the PCPT (with individual/guardian approval) before confirming the start date.

*** CCP requires that even after admission, draft SDRs and ISPs be provided to the program by Support Coordinators prior to authorization so that they can be reviewed by CCP and suggestions for modifications can be submitted**

APPEAL PROCESS

If an individual is not accepted into the program, the reason is provided in writing. Additionally, the individual and/or home representative/guardian may request reconsideration via another meeting/interview at a later date. The Program Director will respond to the written request within five business days of receipt of the request.

WAITING LIST PROCESS

If an individual is placed on a waiting list due to lack of available space or appropriate grouping in the program, the individual/guardian/home representative will be notified should an opening occur. At that time, depending on the length of time since the initial meeting, another interview may be required

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: SERVICE DESCRIPTION AND LIMITS

Effective Date: 10/15/15

SCOPE & SUMMARY: This Policy pertains to The Children's Center Program (CCP) Adult Day Habilitation Program. The Children's Center Adult Program must provide Day Habilitation services that align with the requirements set forth in the current Supports Program and Community Care Program Policies and Procedures Manual.

POLICY and PURPOSE: To define the services that are available and the limits of those services

SERVICE PROVISION: CCP's Day Habilitation program seeks to provide education and training to meet each participant's outcome from his/her Individualized Service Plan in both center-based and community settings.

Activities are developed to advance skills in the following areas:

- Problem-solving
- Self-help
- Social skills
- Adaptive skills and self-regulation
- Daily living skills
- Leisure skills
- Communication

Personal choice and increasing independence are essential to the program.

Services are provided during daytime hours.

SERVICE LIMITS

Day Habilitation is limited to 30 hours per week. Transportation is provided, as required, for those living within the catchment area of five miles. Transportation for those living outside the catchment area is provided when available at the established transportation rate.

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: SERVICE SETTINGS

Effective Date: 10/15/15

SCOPE & SUMMARY: Children's Center Programs (CCP) Adult Day Habilitation Program must adhere to the standards set forth in the current Supports Program and Community Care Program Policies and Procedures Manual regarding the settings for its Day Habilitation Program.

POLICY STANDARDS:

CCP's Day Habilitation service settings/activities will meet the following standards:

- Non-residential setting which is separate from any home/facility in which the individuals reside

- Complies with all local, municipal, county and state codes

- The CO is available on site and a copy is posted

- Complies with ADA

- Municipal fire safety inspections are conducted according to local code and are maintained on file

- Exit signs are posted over all exits

- There is a fire alarm system that is appropriate to the population

- Sufficient ventilation is provided

- Adequate lighting is provided

- The facility is maintained in a clean, safe condition:

 - Aisles, hallways, and main routes of egress are clear of obstruction and stored material

 - Floors are free and clear of obstruction and are slip resistant

- Equipment is maintained in safe working order

- Adequate sanitary supplies are available



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: MONITORING

Effective Date: 11/10/17

Revised: 3/30/19, 10/28/19, 10/13/22

SCOPE & SUMMARY: This policy pertains to any and all property of Children's Center Programs, LLC (hereinafter referred to as CCP) located at 1115 Green Grove Road, Neptune Township, Monmouth County, New Jersey, including but not limited to all buildings, rooms, bathrooms and hallways within buildings, parking lots, aquatic center, all walkways, grassy areas, playground/recreation areas located on the CCP campus where Adult Participants, staff and visitors populate.

CCP is aware of its obligation to monitor and protect the health, safety and security of its Adult Participants in the delivery of its services within and outside of all its buildings on its campus. CCP will use its best efforts to adhere to State and Federal laws relating to privacy issues of its Adult Participants.

POLICY: CCP maintains a security monitoring camera system on its campus which includes cameras located on the inside and outside of buildings. The cameras are installed in all public areas but not in any bathrooms. The security monitoring camera system is designed to monitor and record events in real time. CCP program activities, events and incidents are available for review by CCP Supervisory staff as the need arises to protect the health and safety of Adult Participants. The security monitoring camera system is solely and exclusively for internal use of CCP Supervisory staff.

PROCEDURE:

1. Only Supervisory staff including the Executive Director, Director, Assistant Director, Facilities Director and the Human Resources Director and their designees shall have access to the security monitoring camera system.
2. The Supervisory staff shall have the authority to observe live or recorded activities, events or incidents to gain information pertaining to the health, safety and security of its Adult Participants.



TITLE: MONITORING

3. The security monitoring camera system and any recordings captured by the system are not available to be viewed by unauthorized staff, participants, parents, guardians and home representatives, or anyone who is not an employee of CCP.
4. Any viewing of live activities or events will be conducted in the privacy of the office of Supervisory staff.
5. Any security monitoring camera systems records captured by the system shall be routinely looped and overwritten in a maximum time period of 14 days.
6. DVD's/CD's of specific events/incidents can only be requested by the Executive Director or his designee and shall remain the property of CCP. Those DVDs/CD's shall be secured in a private and locked file with access only by the Executive Director or his designee. As soon as it has been determined by the Executive Director or his designee that those DVDs/CD's are no longer required to be saved, they shall be destroyed. However, in no case shall the DVD's/CD's be destroyed until such time as any active investigation has been completed and the Executive Director or his designee has determined that there is no further need for the DVD's/CD's.
7. It is hereby recognized that, the security monitoring camera system may temporarily malfunction resulting in the inability to recoup and/or view activities, events or incidents that may have occurred. CCP will take all appropriate steps to maintain the security monitoring camera system in working order in an attempt to minimize malfunctions.
8. Absent a Court Order, sharing or duplication of DVD's/CD's shall not be permitted.
9. This policy shall be distributed and shared with all Adult Participants and their parents, guardians or home representatives before beginning a program at CCP and annually thereafter as well as all staff of CCP.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: SPECIALIZED EQUIPMENT

Effective Date: 11/12/15, revised 3/29/18

SCOPE & SUMMARY: This Policy pertains to specialized equipment at Children's Center Programs (CCP). CCP has developed and implemented policies and processes for specialized equipment. This information is shared with families as part of the admissions folder that is reviewed prior to a participant starting in the program.

POLICY/PROCEDURE/PROCESS:

SPECIALIZED EQUIPMENT

Wheelchair Repair

Emergency Repairs: -Wheelchair repair is available in cases where there is an emergency while at program that could be considered a danger especially during transport. If a part is used from the program to repair the chair, it is the responsibility of the Individual/ Home representative/Guardian to replace or pay for the part.

Non-Emergent Repairs-If a repair is necessary but not an emergency, the Individual/Home Representative/Guardian is responsible for contacting a Durable Medical Equipment (DME) vendor to schedule the repair

Wheelchair Evaluation/Repair Locations-Wheelchair repairs and evaluations should be scheduled by the Individual/Home Representative/Guardian to occur at home. Obtaining Letters of Medical Necessity, insurance information, doctor's prescriptions or participant information for the DME vendor is the responsibility of the individual's Home Representative/Guardian and cannot be handled by the Physical Therapists from the Children's Center School.

It is suggested that the family call their insurance company to determine which DME vendor is covered before contacting a vendor.



Adaptive Seating

The Adult Program provides standard chairs for its participants. If it is determined that the chairs that are provided do not meet an individual's support needs for medical, positioning, or safety reasons, it is the responsibility of the Individual/Home Representative/Guardian to provide appropriate adaptive seating (complete with trays, foot plates, etc.). It is recommended that the Individual/Home Representative/Guardian contact the Support Coordinator and their insurance company for information regarding adaptive seating that may be needed for the Adult program.

Equipment

If an individual requires a walker, stroller, or another piece of specialized equipment, it is the responsibility of the Individual/Home Representative/Guardian to provide it. Equipment required for safeguarding purposes such as gait belts, helmets, transport harnesses, etc. can only be utilized with a physician's prescription (renewed yearly) and must be documented in the Individualized Service Plan.

Orthoses (splints, braces)

It is the Individual/Home Representative/Guardian's responsibility to schedule orthotics appointments with their vendor. If appointments are scheduled at the Adult Program, it is the Individual/Home Representative/Guardian's responsibility to contact the Program with the appointment date and time. Please keep in mind that Children Center School therapists are not available to assess or make the necessary recommendations regarding the fit and function of orthoses for those enrolled in the Adult Program.

Transport

For safety reasons, all wheelchairs which are transported on CC Programs vehicles must have a chest harness, foot straps, and a headrest.

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: MECHANICAL RESTRAINT AND SAFEGUARDING EQUIPMENT

Effective Date: DC#20-11/3/2014, DC #20-11/10/2014

SCOPE & SUMMARY: This Policy pertains to all Children's Center Programs, LLC (CCP) staff (transportation, program assistants, volunteers, interns, supervisors, community supports, related services, etc.) who work with any and all enrolled participants in the Adult Day Program.

POLICY: Mechanical restraint is not used in the program. Safeguarding equipment shall be used in accordance with Division Circular #20

The use of safeguarding equipment must be justified by health and safety concerns that may cause significant injury or otherwise compromise the health and wellbeing of the individual

DEFINITIONS

Safeguarding Equipment- devices that restrict movement used to provide support for the achievement of functional body position or proper balance; devices used for specific medical, dental or surgical treatment; and devices to protect the individual from symptoms of existing medical conditions, including but not limited to, seizures and ataxia

Mechanical Restraint-a device utilized by staff to intervene when a behavior will likely endanger the health or safety of the individual or others and less restrictive techniques have proved ineffective or not feasible. The device is attached to or adjacent to an individual's body and restricts partial or total freedom of movement or normal access to portions of the individual's body. The use of totally enclosed beds, papoose boards, and standing boxes shall be prohibited as a mechanical restraint



PROCEDURE:

Safeguarding Equipment

1. Shall be initiated on the prescription of a physician which will be included in the participant's file
 - a. Specific medical condition for which the equipment is to be used
 - b. Length of time permitted for its use
2. Once the physician has documented the need for safeguarding equipment, the need will be reviewed by the Interdisciplinary Team (IDT). The use of the safeguarding equipment shall be included in the individual's New Jersey Individualized Service Plan (NJISP) and/or the Person-Centered Planning Tool (PCPT)
3. If the use of the safeguarding equipment cannot be integrated into the NJISP and/or PCPT, the IDT will meet to develop other strategies to address the concern.
4. The need for the safeguarding equipment will be reviewed annually.
5. The need for continued use of the safeguarding equipment will be authorized by the physician

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: STAFF SUPPORT

Effective Date: 7/1/17

SCOPE & SUMMARY: This Policy pertains to Programs approved by DDD. Children's Center Programs (CCP) will establish staff support guidelines. CCP's policy is shared with families as part of the admissions folder which is reviewed prior to starting in the program.

PURPOSE: To establish procedures for the determination of staff supports

STAFF SUPPORT

Staffing support is provided based upon CC Program's assessment of the needs of each individual in the program. Areas taken into consideration when determining staff support needs are self-care, safety, communication, behaviors, and mobility.

There are times when participants require intermittent increased staff support to complete tasks and to function safely and appropriately in the program. When the need for increased support arises, it is provided on an as-needed basis for the duration of the need.

Permanent on-going one-to-one staff assignments are not provided except in very rare circumstances.

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: PRIVATE HIRING OF STAFF

Effective Date: 3/20/17

SCOPE & SUMMARY: This policy pertains to all staff, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP).

POLICY: The Children's Center Adult Program has developed, maintained, and implemented a policy regarding staff working privately for families. This policy is shared with Individuals/Home Representatives/Guardians as part of the admissions folder which is reviewed prior to starting in the program. Staff may also refer to Policy "***Outside Employment***" for additional clarification and forms recommended for additional private employment.

PURPOSE: To establish procedures for the private hiring of staff by families

PRIVATE HIRING OF STAFF

Families periodically independently hire Children Center Programs employees or request that CC Programs provide the name of an employee who might be interested in working privately for them outside of program hours.

As long as there is no presenting conflict of interest, CC Programs will not interfere with the private hiring of employees and will attempt to assist with requests for staff as a courtesy to the family. CCP does not have the capacity or the responsibility to supervise the work performance of a particular staff member hired independently by a family.

CC Programs staff is required to notify Management/Human Resources of any outside employment involving current Adult Program enrollees. They must acknowledge their understanding that they are entering into a private agreement with the family and that this outside employment will not interfere with their primary responsibility to CC Programs.

Families are asked to review this policy and to sign their understanding of it.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: DOCUMENTATION OF PROGRAM OUTCOMES

Effective Date: 10/1/15 Rev. 6/1/18

SCOPE & SUMMARY: Children Center Programs (CCP) has developed procedures for documenting and reporting participant progress in accordance with the current Supports Program and CCP Policies and Procedures manuals.

PROCEDURE: When developing the NJISP, the Support Coordinator and individual/home representative/guardian, in consultation with the CC Programs will develop the Outcome(s)

CCP in collaboration with the individual/home representative/guardian, will develop strategies to assist the individual in reaching the Outcome(s) as specified in the ISP. The strategies are developed within 15 business days of the date the individual begins to receive Day Habilitation services. Strategies are to be revised when the outcome is modified and when the annual ISP is approved

FORMS

1. The **Day Habilitation – Individualized Goals** form is completed.
The form includes the following information:
 - a. Outcome
 - b. Strategies for reaching outcome
 - c. List of those involved in developing strategies
 - i. Room Supervisor
 - ii. Program Supervisor/Director
 - iii. Individual
 - iv. Home Representative/Guardian
 - v. Support Coordinator
 - d. Date of completion
 - e. Signature of individual or home representative/guardian



2. The **Day Habilitation - Activities Log** is developed and is completed by the staff who work with the individual

The form includes the following information:

- a. Outcome
 - b. Strategy(ies)
 - c. Completed by
 - d. Status
 - e. Date of completion
 - f. # of units and times in/out of Day Habilitation are **not** logged on this form as they are recorded elsewhere
3. The **Day Habilitation Services- Annual Update** is completed yearly and provides an update on progress towards the outcome. It is available to be used for planning for the upcoming service year.
The following is included on the form:
 - a. Dates
 - b. Questions to be answered
 - c. Completed by
 - d. Date



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

**TITLE: PROGRAM CALENDAR, ATTENDANCE AND PRIVATE
TRANSPORTATION**

Effective Date: 3/12/16; revised 4/25/23

SCOPE & SUMMARY: This policy pertains to all individuals who attend Children's Center Program (CCP) Adult Day Program.

POLICY: Children Center Programs has established guidelines for attendance and for those transporting privately. Additionally, there are parameters established for changing schedules. These policies are shared with Individuals/Home Representatives/Guardians as part of the admissions folder and annually thereafter.

PROCEDURES:

PROGRAM ATTENDANCE

In the event that an individual will be absent, the Individual/Home Representative/Guardian is responsible for calling the program after 8:00 AM to report that absence.

While Children's Center Programs (CCP) strives to be flexible with participant attendance, excessive absenteeism (defined as absences in excess of 10% of the scheduled days excluding documented medical absences, emergencies, one-time extraordinary circumstances, budget constraints and or CCP cancellations/closures) is problematic for both the individual and the Program. If a reasonable solution regarding excessive absenteeism cannot be reached between the Program, individual, Home Representative/Guardian and the Support Coordinator, it may be necessary to consider a reduced weekly schedule or discontinuation in the program as potential outcomes. CCP understands that there are extenuating circumstances that could impact attendance and will consider each exception on a case-by-case basis.



PRIVATE TRANSPORTATION

For those who are transported to/from program by a home representative, guardian, or private transportation, it is required that the responsible party sign the individual in/out of program. For afternoon dismissal, it is imperative that the individual be picked up on time. Repeated lateness (three times in one quarter) or extreme lateness (more than 15 minutes late two times in one quarter) in picking up individuals could result in program suspension pending an IDT meeting to discuss resolution.

PROGRAM CALENDAR

All participants receive a calendar of scheduled closings and any changes that occur throughout the year. Included in the folder is the Automated Communication System and Closing or Delayed Opening forms which contain information related to program closings, delayed openings and early dismissals. The Program Calendar can be also located on our website: www.ccprogramsap.com

The Adult Program makes every effort to be flexible with scheduling with our participants. It is asked that individuals or their Home Representatives/Guardians contact the building secretary to discuss all scheduling revisions in advance of the change. Please note that not all schedule change requests can be accommodated for a number of reasons.

- If an individual wants to exchange one day in the week for another, 24 hours' notice must be provided. The program is unable to accommodate changes that are requested late in the day.
- Requests for permanent changes to an established schedule need to be discussed with the Program Director before confirming them with the Support Coordinator

All requests for scheduling changes need to come through the building secretaries and cannot be arranged through the van drivers or transportation department. The drivers have been instructed to refer individuals requesting scheduling changes to the building secretaries.

For information related to Optional Days, refer to the Optional Days policy.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: OPTIONAL DAYS

Effective Date: 6/20/14 Revised: 6/1/17

SCOPE & SUMMARY: This Policy pertains to all Individuals/Home Representatives/Guardians of currently enrolled participants in the Children's Center Programs (CCP) Adult Day Habilitation Program.

POLICY: The Children's Center Adult Program has developed and implemented procedures for Optional Days. This information is shared with Individuals/Home Representatives/Guardians during the interview process and is part of the Admissions folder provided once placement in the program has been offered and accepted

PROCEDURE:

The Optional Days, which are listed on the yearly calendar, are additional program days available as a courtesy to families and participants when the regular Adult Program is not in session. The Optional Days typically fall during late June and August and during holiday breaks when the regular program is closed. The program during the Optional Days normally runs from 8:30-2:00 and has a structure similar to the regular schedule.

In determining whether a family member might attend some or all of the optional days, the following information should be considered:

- There is no transportation available during optional days. Individuals/Home Representatives/Guardians need to make arrangements for transportation.
- There are no nurses on site to administer medications or to attend to non-emergent medical issues during the Optional Days.
- While the program is fully staffed by CCP employees during the optional days, it is possible that an individual may be grouped with staff that does not typically work directly with him or her.
- Participant groupings will vary from the regular program groupings.



- Registration for each block of Optional Days is required (forms are sent home approximately 3-4 weeks prior). It is imperative that the registration form be returned as soon as possible, but no later than the deadline on the form, as the number of individuals who can attend Optional Days is limited based upon staff availability and adherence to the registration deadline.

Before registering an individual to attend Optional Days, the Individualized Service Plan (ISP) should be checked to ensure that the individual has enough units allotted to attend some or all of the Optional Days in addition to the regular program days. The Support Coordinator can assist with this

Every effort is made to accommodate all who submit their registration forms on time. The program is unable to accommodate those who register to attend after the deadline even if the optional days are allocated in their plans.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: TRANSPORTATION CANCELLATIONS

Effective Date: 7/1/15 **Date Issued:** 7/1/15 **Revised:** 4/15/19

SCOPE & SUMMARY: This Policy pertains to Participants enrolled in the CCP Adult Day Program, Home Representatives/Guardians, and those involved in the transportation of participants to and from CCP's campus.

POLICY: The Children's Center of Monmouth County Adult Program has developed procedures for transportation cancellations generated by the Individual and/or Program.

PROCEDURE:

Program Generated:

Closings or Delayed Opening:

In the event that the Program is either closed or delaying the pick-up time, each Individual or Home Representative/Guardian shall be notified by the SMS Emergency Management System. The system will send notice to individuals via Phone Call, Email, and/or Text Message depending on the method selected.

Notification shall be made to local television and radio networks.

Notification shall be made available on Program website.

Early Closing:

In the event that the Program is closing early, each Individual or Home Representative/Guardian shall be notified by the SMS Emergency Management System. The system will send notice to individuals via Phone Call, Email, and/or Text Message depending on the method selected.

The Program shall make every effort to reach home or emergency contacts to ensure that someone will be there to receive the Individual, if required.

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Individual Generated:

Individuals shall contact the Transportation Office after 7:00 a.m. and the office shall alert the route driver. For long-term cancellations (sickness, hospitalization, etc.), individual shall be required to contact the transportation office the day before transportation shall resume.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: TRANSPORTATION PICK-UP / DROP-OFF PROCESSES

Effective Date: 7/1/15 **Date Issued:** 7/1/15; Revised: 8/15/17, 4/15/19

SCOPE & SUMMARY: This Policy pertains to the Home Representatives/Guardians of Individuals who attend the Children's Center Program's (CCP) Adult Day Program.

POLICY: CCP shall provide transportation services to and from the Program for individuals within a five (5) mile catchment area. For those living beyond the five (5) mile catchment area, transportation (at the established rate) may be offered, if available, to those who attend a minimum of three (3) days per week.

CCP has developed procedures for the pick-up and drop-off process.

PROCEDURE:

1. Upon acceptance of placement to the Day Habilitation Program, individuals residing within a five (5) mile catchment area shall receive the Transportation Instructions Memorandum for signature.
2. The Memorandum includes, but is not limited to, the following:
 - a. The approximate pick-up and drop-off time shall be supplied. A fifteen (15) minute window on either side is reasonable. Every effort is made to contact the home should the vehicle be running early or behind schedule.
 - b. Individuals are responsible for being ready to board the vehicle when it arrives. The waiting period for picking up an individual is five (5) minutes. If there is no response from within the home during that timeframe and the efforts to contact the home by phone are unsuccessful, the vehicle will continue on its route without the individual.
 - c. The individual and/or Home Representative/Guardian, shall indicate to the Program the applicable Drop-Off Guidelines:
 - i. Can be dropped off without home supervision
 - ii. Requires visual supervision, however, does not require Home Representative/Guardian escort from vehicle
 - iii. Requires Home Representative/Guardian escort from vehicle.



- d. If supervision is required and nobody is home to receive the individual, the following actions will occur:
 - i. Driver and/or Program shall make every attempt to reach the Home Representative/Guardian by phone
 - ii. Driver shall wait five (5) minutes
 - iii. Driver may continue on with the drop-off of the remaining individuals and come back to the house
 - iv. Driver may return individual to Program or local Police station. The Home Representative/Guardian shall be responsible to pick-up the individual from the final location.
3. Transportation is provided on a curb to curb basis. Transportation staff shall not be responsible for escorting individuals to and from the vehicle. Those who are not employees of Children Center Programs may not get on the vehicles.
4. Participants and staff must wear seatbelts at all times.
5. It is expected that CC Programs staff and Home Representatives/Guardians interact respectfully towards one another. CC Programs may consider a suspension or termination of transportation services for behavioral issues which present a clear danger to the individual and/or others and/or for failure to comply with transportation guidelines.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: TRANSPORTATION EMERGENCIES AND ACCIDENTS

Effective Date: 7/1/15 **Date Issued:** 7/1/15 **Date Revised:** 4/15/19

SCOPE & SUMMARY: This Policy pertains to transportation drivers and aides involved in the transporting of Participants to and from Children's Center Program's (CCP) Adult Day Program.

POLICY: Children Center Programs has developed procedures for transportation emergencies during the pick-up/drop-off process and community outings.

PROCEDURE:

Medical Emergency:

In the event of a medical emergency, the driver shall stop the vehicle (side of road, away from on-coming traffic) and contact 911 for police and paramedics.

The driver/aide shall contact Program Supervisor to alert the Program of the situation, who in turn will also contact the Transportation Department.

The driver/aide shall attend to the individual until police/paramedics arrive.

The Program Supervisor shall alert the Family Representative/Guardian of the situation and location of vehicle, if necessary.

The Transportation Department shall notify the Home Representative/Guardians of the late return home, if applicable.

The driver shall report to the Transportation Department to complete an incident report upon arrival back to the facility.

Non-Medical Emergency (Behavioral)

In the event of a non-medical emergency, the driver shall stop the vehicle (side of road, away from on-coming traffic) and contact the Program Supervisor.



Program Supervisor shall determine appropriate de-escalation strategies and/or call 911 for Police Intervention.

The driver/aide shall attend to the individual and/or other passengers until police arrive.

The Program Supervisor shall alert the Home Representative/Guardians of the situation and location of vehicle, if necessary.

The Transportation Department shall notify the Home Representative/Guardians of the late return home, if applicable.

The driver shall report to Transportation Department to complete an incident report upon arrival to facility.

Accident

In the event of an accident, the driver shall do the following:

1. In the event of an accident, the driver shall stop the vehicle (side of road, away from on-coming traffic) and contact the police or 911 for police and paramedics, if necessary.
2. Protect vehicle by placing red reflector warning devices on scene.
3. The driver shall contact Program Supervisor.
4. Attend to the passengers on vehicle until Police arrive.
5. In the event that evacuation of the vehicle is necessary, the driver/aide shall escort individuals a safe distance from vehicle and/or road.

The Program Supervisor shall alert the Home Representative/Guardian of the situation and location of vehicle, if necessary.

The Transportation Office shall dispatch assistance (personnel and/or vehicle) if necessary.

The driver shall report to Transportation Department to complete an incident report upon arrival back to the facility.

The Business Office shall contact the insurance company with the following information to report a claim:

1. Date and Location of Accident
2. Vehicle Number
3. Individuals involved
4. Description of Incident
5. Driver's accident report



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: TRANSPORTATION-GENERAL

Effective Date: Effective Date: 7/1/15 **Date Issued:** 7/1/15 **Revised:** 4/15/19

SCOPE & SUMMARY: This policy pertains to those employees involved in the transporting of participants enrolled in Children's Center Programs (CCP) Adult Day Program.

POLICY: CCP shall provide Transportation Services, including to and from the Program, as well as, intraday community experiences.

All vehicles utilized by the program to transport individuals shall:

- Comply with all applicable safety and licensing regulations of the State of New Jersey Motor Vehicle Commission regulations
- Be maintained in safe operating condition
- Contain seating that does not exceed maximum capacity as determined by the number of available seatbelts and wheelchair securing devices
- Be wheelchair accessible by design and equipped with lifts and wheelchair securing devices which are maintained in safe operating condition when transporting individuals using wheelchairs
- Be equipped with the following:
 - 10:BC dry chemical fire extinguisher
 - First aid kit
 - At least 3 portable red reflector warning devices
 - Snow tires, all weather use tires, or chains when weather conditions dictate

At no time may an individual being transported be left alone in the vehicle.

Individuals receiving pick-up/drop-off transportation services shall be given a Transportation Instructions memorandum to review and sign.

A system of preventative maintenance shall be maintained and documented in the vehicle file, to include, but not limited to, monthly driver inspections and quarterly mechanic inspections.

All transportation Policies and Procedures shall be reviewed annually with all drivers and aides.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: TRANSPORTATION SUSPENSION/DISCHARGE

Effective Date: 7/1/15 **Date Issued:** 7/1/15 **Revised:** 2/28/18, 4/15/19

SCOPE & SUMMARY: This Policy pertains to enrolled Individuals in Children Center Program's (CCP) Adult Day Program and use transportation services provided.

POLICY: CCP Adult Day Program may consider a suspension/discontinuation of transportation services for an individual. The suspension/discontinuation shall not be considered until other alternatives have been exhausted and is not utilized as a punitive measure against the individual. Examples of situations when suspension/discontinuation may be considered, include, but are not limited to, excessive absenteeism (defined as 15% of scheduled trips excluding documented medical absences), behavioral issues which present a clear danger to the individual and/or others, medical issues or failure to comply with Transportation guidelines.

PROCEDURE:

SUSPENSION:

The Program Director makes the determination to suspend transportation services. The following guideline shall be used as a guide to determine the suspension:

1. What is the reason?
2. Have attempts/warnings been made to rectify the situation?
3. Is there an immediate danger to individual and/or others?

The Program Director shall determine the length of the suspension to ensure adequate time to develop a plan for rectifying the situation and shall contact the Individual/Home Representative/Guardian and Support Coordinator regarding the suspension on the day it occurs. The Program Director shall consult with the Support Coordinator and Individual/Home Representative/Guardian to ensure safety as the primary factor. An Inter-Disciplinary Team (IDT) meeting may be held.



If a plan is established to safely transport the individual on the vehicle, transportation services will resume.

Where safety is imminently jeopardized, one incident of a behavior/unsafe occurrence may warrant immediate suspension

DISCHARGE:

If attempts to resolve the behavioral/compliance issue have not been successful, permanent discharge from transportation services may be considered.

Where safety is imminently jeopardized, one incident of a behavior/unsafe occurrence may warrant immediate discharge from transportation

APPEAL:

The Individual has the right to appeal the decision when suspended or discharged from transportation services. The appeal should be submitted to the Program Director in writing. A copy of the signed document will be forwarded to the Support Coordinator. A written response to the appeal will be provided by the Program Director within **five** business days.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: USE OF ELECTRONIC COMMUNICATION AND RECORDING DEVICES (ECRD)

Effective Date: 9/2023

SCOPE AND SUMMARY: This policy is being implemented with the intent to protect the privacy rights of the participants attending our program and Children's Center staff. Children's Center Programs believes participants and staff should not be subject to having video or audio recording taken of any participant(s) or program staff member(s) for any purpose without the consent of the participant, the participant's guardian and/or the program staff member.

POLICY: Children's Center Programs does not allow for any participants and/or direct care staff to use any Electronic Communication and Recording Device (ECRD) for the **PURPOSE OF RECORDING AUDIO AND/OR VIDEO** during program hours, including transportation on a program owned vehicle.

Electronic Communication and Recording Devices (ECRD) includes any device with the capability to audio or video record or is capable of receiving or transmitting any type of communication between persons. An ECRD includes, but is not limited to, cameras, cellular and wireless telephones, pagers/beepers, laptop computers, electronic readers, personal digital assistants (PDAs), two-way radios, portable fax machines, video broadcasting devices, and any other device that allows a person to record and/or transmit, on either a real time or delayed basis, sound, video, or still images, text, or other information.

An ECRD used in violation of this Policy will be turned off immediately by a program staff member, supervisor, or management.

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SUSPENSION DISCHARGE



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: SUSPENSION/DISCHARGE

Effective Date: DC#36-2/14/05

Supports/CC Programs Manuals- 5/18

Revised: 6/1/18, 4/8/20

POLICY: The Children's Center Adult Program has developed, maintained, and implemented suspension and discharge procedures that align with the current Supports Program and Community Care Program Policies and Procedures Manuals. These policies are shared with families as part of the admissions folder which is reviewed prior to starting in the program.

PROCEDURE: To establish procedures for implementing suspension and discharge policies

SUSPENSION

CC Programs works closely with individuals, guardians, and Support Coordinators to manage participant and family issues that arise. If issues are significant and are not able to be addressed via IDT meetings and reasonable modifications by the program and/or individual/guardian, suspension or discharge from services is considered.

Suspension: Suspension is a temporary short term interruption from a service (i.e., program, transportation) until a plan can be developed to resolve the issue. It is not intended to be punitive but rather to provide an opportunity to work together with the individual/guardian and Support Coordinator to safely return the individual to program.

Examples of reasons for program suspension include but are not limited to: lack of compliancy on the part of the family and/or disruptive behavior by the family; excessive, unexplained absence from the program by the participant; unsafe/unmanageable behavior by the program participant; participant medical issues that cannot be addressed by the nursing staff; an inability of the program to meet the needs of the individual; and/or lack of disclosure on the part of the family that results in the program's inability to meet the individual's need. Examples of reasons for suspension from transportation include unsafe behavior on the vehicle on the part of the participant or failure of the family to comply with transportation guidelines.



When issues arise that could ultimately lead to suspension, the family and Support Coordinator are contacted and efforts are made to resolve the problem. The number of warnings provided prior to suspension depends upon the seriousness of the issue, with safety as the primary factor. When safety is imminently jeopardized, one incident of a behavior/unsafe occurrence may warrant immediate suspension from the service without warning.

The Program Director determines the length of the suspension to ensure an adequate timeframe to develop a plan for rectifying the situation for the safe return of the individual to the service. Suspensions are typically short term (less than five days); however, their length varies depending upon the time needed to resolve the issue.

On the same day that a suspension has been implemented, the individual/guardian and the Support Coordinator are contacted to arrange for a meeting to discuss and resolve the issue. This meeting is to be held as soon as possible but no later than **five** business days from the date of the suspension.

The reason for the suspension, along with IDT notes (if applicable) are provided in writing to the individual/guardian and the Support Coordinator and written acknowledgement of the suspension is requested of the individual/guardian.

A suspension may be appealed in writing by the individual/guardian. The request should be submitted to the Program Director who will respond within **five** business days.

Discharge: Discharge, voluntary and/or involuntary, is a permanent discontinuation of the individual's enrollment in the service (i.e., program, transportation) which occurs when the issues detailed above (under suspension) cannot be resolved or when an individual determines that he no longer desires to attend the program. Involuntary discharge is not intended to be punitive, but is implemented when significant issues cannot be resolved and it is determined that CC Programs is unable to meet the support needs of the individual or, in some circumstances, the demands of the family.

Potential discharge from the program is discussed with individuals/guardians and Support Coordinators during the IDT meeting(s) and other interactions related to the issue. The warning is included as part of the IDT meeting notes which are received by all meeting participants. It is explained that if the concern is not remediated, discharge from the program is possible or even likely.

The individual/guardian is given 30 days' notice prior to discontinuing services. The reason for the discharge is provided in writing to the individual/guardian and the individual/guardian is asked to sign acknowledgement of the program discharge. The Support Coordinator is copied on this letter.

Children Center Programs will suspend an individual during this 30 day period if it involves the safety of the individual or others.

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If it is deemed safe, the program may continue to support the individual beyond 30 days, if necessary, until new services can be coordinated.

A voluntary/involuntary discharge or request for an extension of a discharge may be appealed in writing by the individual/ guardian. The request, which needs to be made at least **ten** days before the discharge date, should be submitted to the Program Director who will respond within **five** business days.

Should an individual or guardian decide to discontinue services, that information must be submitted in writing to the Program Director and two week's notice be given.

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COMPLAINT GRIEVANCE RESOLUTION APPEAL PROCESS



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: COMPLAINT/GRIEVANCE/ISSUE RESOLUTION /APPEAL PROCESS

Effective Date: 7/1/15 **Revised:** 10/8/18

SCOPE & SUMMARY: Programs approved by DDD shall have a complaint/grievance process and appeal process in place for the individuals attending the program and their home representatives/guardians. CC Program's policy is shared with individuals/home representatives/guardians as part of the admissions folder which is reviewed prior to starting in the program.

The procedure regarding IDT meetings described below is also followed for concerns initiated by the program staff or administration

POLICY/PROCEDURE

A complaint/grievance is defined as a verbal or written expression of dissatisfaction by the Stakeholder regarding the care or services provided by CCP to the individual that can be resolved among the parties involved through a multi-step process.

Step 1. If a program participant or home representative/guardian has a complaint/grievance about the program, individuals who attend, staff, or any other concern, that individual can speak to a staff (Program Assistant, Room Supervisor) regarding his/her concern.

Step 2. If the issue is not resolved or if the individual is more comfortable, he/she can speak with the Program Supervisor or Director. Written documentation of the complaint and its resolution shall be maintained in the individual's file

Step 3. If the issue is not resolved within **five** business days, the matter will be brought to the Executive Director's attention so that it can be resolved.

Note: This resolution may involve an IDT meeting (to be held within **five** business days) with the Support Coordinator, home representative/ guardian and appropriate CC Programs employees. During the IDT meeting, the issue will be discussed, suggestions for resolution will be made, and an implementation plan will be set. IDT meeting notes will be written by the meeting facilitator and disseminated to all involved within **ten** business days from the meeting.

Step 4. If the matter is not resolved to the satisfaction of the individual or home representative/guardian, a written appeal can be written. The request for reconsideration should be submitted to the Program Director who will respond within **five** business days.

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UNUSUAL INCIDENT REPORTING



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HOME REPRESENTATIVES/GUARDIAN/FAMILY COMMUNICATION

Effective Date: 3/15/10 Revised: 5/1/18

SCOPE & SUMMARY: This Policy pertains to all employees associated with Children's Center Programs (CCP). CCP has developed procedures for notifying guardians/family members regarding minor, moderate, and major injuries in compliance with Division Circulars #14, #15, and #20A and Komnino's Law. CCP will also follow the training requirement for all new and existing employees associated with The Adult Program.

POLICY& PROCEDURES:

All injuries (minor, moderate, major) **related to unusual incidents or allegations and/or witnessing abuse, neglect or exploitation** must be reported by phone or in person to the Home Representative/Guardian of the Program participant within two hours of the incident/observation. Follow-up communication regarding the incident can be done via email/electronic communication.

All moderate or major injuries, regardless of the cause, must be reported by phone or in person to the Home Representative/ Guardian within two hours of the incident/observation.

Family/Guardian notification is required for incidents or allegations of abuse, neglect or exploitation, **regardless of whether there is a resulting injury.**

If there is a legitimate reason why the notification was not provided to the guardian/family member in two hours, it must be provided within eight hours with a written explanation of the cause for the delay provided to the Home Representative/Guardian and to The Department of Human Services (DHS).



The individual can prohibit the family member from receiving this information by opting out.

Minor injuries (depending on the type and severity), **not related to abuse, neglect or exploitation**, will be communicated to guardians/families by note, phone call, or email by Program staff or the nurse

Voice mail messages are permitted, but should not include specific, health- related information (HIPAA protected) or that is otherwise protected by other confidentiality laws

When leaving a voice mail message, the individual calling is to provide the name of the person calling, the agency name, the date and time of the call and a number for the guardian or family member to call back.

The message left should ask that the Home Representative/Guardian call back so that the nature of the incident and injury can be explained, and the guardian or family member may ask questions.

The reporting process of the Unusual Incident will take place following CCP's Unusual Reporting Procedure.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: UNUSUAL INCIDENT REPORTING (UIR)

Effective Date: DC #14-1/1/07

Date Issued: DC #14-10/12/07

Revised- 8/26/18

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP).

POLICY & PROCEDURE: All unusual incidents shall be reported in accordance with Division Circular #14 and Komnino's Law

All individuals have a right to a safe supportive environment. However, even in a safe supportive environment adverse events may occur. In such occurrences, The Children's Center Adult Program expects all staff to take immediate steps to protect the individual, to ensure prompt medical attention, when needed, and to work to prevent future occurrences. In order to accomplish this, such occurrences must be reported as unusual incidents and be appropriately followed up.

All unusual incidents must be reported within the timeframes (two (2) hours) contained in DC#14 and Komnino's Law.

In addition to the reporting requirements of DDD, all reports required by NJ laws shall be made to the appropriate government protective and law enforcement agencies (refer to DC#14-sections V.E and F)

Law enforcement authorities shall be advised of any suspected criminal activities and documented in the UIR (refer to DC#14-sections V.E and F)

While it is the Regional Assistant Director's responsibility to ensure that each agency comply with the reporting procedures contained in DC #14, it is the responsibility of the administrative staff of the Children's Center Adult Program to ensure that every staff complies with the policies of the circular

All requests for exceptions or exemptions to the policies and procedures in DC # 14 and Administrative Order 2:05 must be submitted, in writing, to DDD through the Assistant Commissioner

All Unusual Incident Reports and related investigation reports shall be confidential and maintained in accordance with Division Circular #30



PURPOSE: To establish policies and procedures for the reporting of UIRs to DHS utilizing the Unusual Incident Reporting and Management System (UIRMS)

ACTIONS/REPORTING/STAFF RESPONSIBILITIES

Unusual Incident Reports

1. Investigation of Unusual Incidents

When incidents/accidents occur, witnesses, the individual and any others who may have observed the incident or have knowledge of it are interviewed by an objective party and written statements regarding the incident are recorded. The Program Supervisor/Director determines if the incident is reportable as a UIR, based on the criteria set in DC #14 and Komnino's Law

2. Reporting of UIRs

Incidents (as defined in DC #14 and Komnino's Law) should be reported to the Regional UIR Coordinator as quickly as safely allows.

- Category A- reported same day.
Written reports (DDD Initial Incident Report) shall be sent via UpDoc the same working day
- Category B- Written reports (DDD Initial Incident Report) shall be sent via UpDoc by the following working day after the incident

Notification

Notification to the home representative/guardian will be made by staff of the Adult Program. Notification to the home representative/guardian is by telephone within two hours of the incident. Notification to the Support Coordinator is made via telephone or email no later than the next business day after the incident.

Closing Criteria

A finding is required prior to closure of an incident. All incidents must be substantiated, unsubstantiated or unfounded in order to be closed. Required Elements for closing an incident:

- The present status of the individual involved in the incident is presented in the report
- Corrective action to address the issues raised by the incident is documented in the follow-up report
- If corrective action has not been taken, the expected date of completion must be cited
- If medical treatment or counseling is necessary, the report should confirm that it was obtained or is scheduled
- To close an incident involving an injury whose origin is unknown, the report must document the attempts to determine the cause of the injury and the steps taken, if possible, to prevent a recurrence of the injury



- In those cases, where the individual has a history of similar injuries/incidents, or the injury is particularly serious, more extensive corrective action to prevent recurrence of the incident may be required

Recommendations and/or corrective action plans are the responsibility of DDD and/or the Children's Center Adult Program. Where applicable, the Children's Center Adult Program will submit a DDD Follow-up Incident Report and forward it to the UIR Coordinator

- Follow-up reporting will continue whenever substantial information is obtained leading to the closing of the incident
- The Children's Center Adult Program will follow up every 30 days following an incident to ensure progress is being made toward the closure of the incident

Reporting of Alleged Abuse, Neglect, or Exploitation

Allegations received by DDD from any source shall be reported to the applicable UIR Coordinator

Suspected abuse or neglect of individuals over the age of 18, residing in their own home or in other unlicensed settings shall be reported to the county Adult Protective Service Agency in addition to the reporting requirements contained in DC#14

Suspected abuse or neglect of an individual 60 years or older who resides in living arrangements other than their own home, shall be reported to the NJ Office of the Ombudsman for the Institutionalized Elderly in addition to the reporting requirements contained DC #14

Suspected abuse, neglect or exploitation of individuals by Children's Center Programs staff shall be reported to DDD (see Abuse, Neglect and Exploitation policy)

Reporting of Criminal Activity

If there appears to be a violation of the NJ Code of Criminal Justice involving a participant, the matter must be reported to law enforcement authorities by Children's Center staff

Notification to law enforcement authorities can occur before, during or after the investigation of the incident is warranted. Law enforcement notification is required for:

- Unexpected, sudden or unusual death
- Sexual abuse or assault
- Physical abuse or assault
- Neglect
- Exploitation
- Theft/loss of money or property



- Injuries of unknown origin
- Illegal contraband

When staff reports a suspected criminal matter to a law enforcement agency, the Unusual Incident Report may be disclosed to the law enforcement agency unless the alleged perpetrator of the criminal act is a service recipient of the Division.

In addition to notifying law enforcement and the UIR Regional Coordinator, the Children's Center Adult Program will report unusual incidents to other units or agencies (i.e., Adult Protective Services) as per DC #14 Section V.D

Staff Training

All staff receive training regarding Unusual Incident Reporting and follow-up assessments will take place several times: during the mini pre contact with participant's orientation and then again during the full orientation program.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: COMPLIANCE WITH INCIDENT VERIFICATION

Effective Date: 5/15/18

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP).

POLICY: As required by Komnino's Law, any incidents or allegations of abuse, neglect or exploitation or injuries that are considered moderate or major involving program participants must be reported within 2 hours to Home Representatives/Guardians. If staff is witness to such they are to immediately contact either the Room Supervisor, Building Supervisor, Program Supervisor, Program Director. Whomever was contacted shall in turn immediately inform the Executive Director.

The witness of the abuse, neglect, and/or exploitation will be asked to be a part of an immediate investigation led by one or more of the aforementioned management employees as designated by the Executive Director or his/her designee.

The Executive Director or his/her designee will then contact the family representative/guardian within the two-hour window required by law. Should there become a necessity to leave a voice mail message all applicable HIPPA requirements will be followed along with requesting a return phone call as soon as possible.

As part of the investigation into an incident or allegation, the Office of Program Integrity and Accountability (OPIA) sends someone from the Incident Verification Unit to the program within 48 hours of an incident to see the individual.

PROCEDURE

The Executive Director or the Program Director are the liaisons assigned to work with OPIA and the Incident Verification Unit representative

CC Programs cooperates with OPIA representatives by answering questions, providing documentation, and providing access to the individual whose incident is being investigated. Additionally, CC Programs welcomes Home Representatives/Guardians who are invited by OPIA to attend an interview/investigation on-site.

Children's Center



Programs, LLC

COMPLAINT INVESTIGATION



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: COMPLAINT INVESTIGATIONS IN COMMUNITY PROGRAMS

Effective Date: DC# 15-2/14/06

Date Issued: DC #15-2/14/06

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP). The purpose of this Policy is to establish procedures for conducting civil investigations in response to allegations or suspicions of abuse, neglect and exploitation

POLICY & PROCEDURE:

All investigations in community programs shall be completed in accordance with Division Circular #15.

Individuals with developmental disabilities receiving services from the Division are entitled to protective services

It is the responsibility of all employees to cooperate with an investigation. Failure to cooperate or to knowingly provide false information during an investigation may result in corrective action.

It is the responsibility of all employees to fully cooperate with law enforcement authorities that investigate or prosecute suspected criminal violations

During the course of an investigation, representatives have the authority to visit and inspect all facilities as well as the authority to examine all books, records and accounts

Reports of investigations and information gathered during an investigation are not considered to be public information and as such shall be maintained as confidential records. Investigation reports shall not be maintained as part of the client record, but shall be considered agency records



Components of the Division, other than the Special Response Unit (SRU), shall not conduct investigations of abuse, neglect or exploitation unless otherwise instructed or advised by the Director, Deputy Director, or SRU Office of Investigation Chief

Unexpected deaths, injuries and losses must be investigated as possible abuse, neglect or exploitation

ACTIONS/REPORTING/STAFF RESPONSIBILITIES:

Reporting

1. An allegation of suspicion of abuse, neglect or exploitation may be reported from any source. The allegation should then be reported as a UIR in accordance with DC #14 (see UIR procedure)
2. Supervisory staff, support coordinators, individuals/home representatives/guardians as well as other staff (i.e., nurse) shall be notified that an investigation has been initiated unless the SRU Office of Investigation determines that such notification would compromise the integrity of the investigation.
3. An internal investigation will be initiated immediately by Management level staff assigned by the Executive Director (see Abuse, Neglect and Exploitation procedure)
 - Staff conducting the investigation should be impartial and not directly involved with the incident or staff
 - The investigation reports shall be forwarded to the SRU Office of Investigation and to the Regional Office in Freehold
 - Notifications will be made to the legal guardian of the participant and the support coordinator
 - Notification to the alleged or suspected perpetrator that an investigation has been opened will be made on a discretionary basis
 - If a suspected violation of the NJ Code of Criminal Justice is identified, the matter shall be promptly reported to the Neptune Police Department
 - The risk to the participant shall be assessed and referral for protective services shall be initiated if deemed appropriate
 - All pertinent evidence related to the incident shall be preserved



4. The investigation process shall include but is not limited to obtaining medical evaluations, taking photographs of the injury, securing, reviewing and analyzing evidence such as records, receipts, reports and relevant objects; inspecting all relevant sites; interviewing anyone who may provide relevant information. All information gained will be documented. The investigation report will be submitted to authorities no later than five days from the date of the incident

- The identity of those who provide information who wish to remain anonymous shall be protected to the extent possible
- The SRU Office of Investigation will advise of any corrective action

5. An investigative report shall include identifying information, description of the allegation, findings, conclusions, recommendations for corrective action, and attachments

6. Following an SRU Office of Investigation's investigation

- The Adult Program will receive notification regarding the SRU's findings, conclusions and related concerns

Disciplinary Action:

Based on the outcome of the investigation, staff involved in the issue will be addressed by the Human Resources department. Disciplinary measures will be implemented up to and including dismissal.

Children's Center



Programs, LLC

HEALTH MEDICAL



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HEALTH/MEDICAL-MEDICATION

Effective Date: 2/1/12

SCOPE & SUMMARY: This policy pertains to all Program nurses, staff, and participants at the Children's Center Programs (CCP) Adult Day Program.

POLICY: Children Center Programs has developed procedures for safely administering, storing and securing participant's prescription medication, "as needed" medication (PRN) and over the counter medication (OTC) medication with the appropriate documentation, definition of errors, emergency medication for life threatening conditions and staff training requirements.

PROCEDURES:

Medications

If it is necessary for a participant to receive medication "daily" or "as necessary" (PRN) **on site** during regular program days, it will be administered by the Program nurse and the following regulations must be adhered to:

- Medication must be received from the home representative/guardian in the appropriate prescription bottle issued by the pharmacy showing participant's name, name of the medication, dosage and time of administration.
- Medication cannot be administered without the proper authorization from the participant's doctor. A medication order is required from the doctor stating the participant's name, illness, medication name, dosage, time of administration of medication, the starting date and ending date of administration and possible side-effects.
- Non-Prescription/Over the Counter Medication (OTC) Medication will not be given at program unless written instructions (medication orders) are received from the doctor. All non-prescription (over the counter medication) medications must come to program in a new sealed bottle to insure proper medication identification.
- Medication orders must be renewed yearly (i.e. prescription current within one year).



- Verbal orders from a physician may be accepted by the Program nurse and shall be confirmed in writing by the physician within 24 hours or by the first business day following the receipt of the verbal order. The prescription shall be revised at the earliest opportunity. This is documented in the participant's SNAP program.
- As necessary (PRN) medications or PRN Over the Counter Medication (OTC) must be authorized by a physician. The medication order must include the individual's name, date of prescription, name of medication, dosage, interval between dosage, maximum amount to be given in 24 hours, stop date, and conditions PRN medication is given. The program nurse will contact the Home Representative/Guardian to determine the time the previous PRN medication was given, check the participant in 1-2 hours to determine the effect of the PRN, and notify the Home Representative/Guardian as to the time the PRN medication was given. Documentation of medication, time of medication and outcome is recorded in the participant's SNAP program.
- All medications must be locked in the medication cabinet in the health office in the participant's program building. The program nurse will have the key to the medication cabinet on her possession during regular program days.
- Individual participant's Epi-pen, copy of emergency card, and a copy of the medication order are kept in a personal bag in a cabinet next to the secretary desk or the nurse's office in each building, and program staff retrieves the Epi-pen upon participant's arrival
- Each individual participant's prescribed medication will be separated within the locked medication cabinet. Oral medications will be separated from other medications. If the medication requires refrigeration, then it will be locked in a locked box in the refrigerator in the building health office. Over the counter medications (OTC) are stored separately from prescription medications in a locked medication cabinet.
- Adult participants will **not** be permitted to self-administer or carry their own medication(s).
- Medication Order forms are included in the health packet sent to guardians yearly and must be completed and signed by the participant's physician. The home representative/guardian must also sign in the designated box on the medical order form requesting that the medications or procedure be administered to their family member.



- All medication will be transported between home and program in lock boxes provided by the Adult Program Health Office. Home Representatives/Guardians must contact the nurse before sending new medications into program.
- A nurse is available on-site between 8:30 a.m. and 3:00 p.m. on regular Program days September- June and from 8:30 a.m.-2:00p.m. during July and August.
- There are no nurses on site to administer medications or to attend to medical issues that are not emergencies on Optional Days. Should an individual experience a medical emergency, 911 will be contacted.
- Emergency medication will **not** be administered off-site by Program staff except for the emergency administration of an epi-pen by a fully trained CPR/First Aid employee. If there is a medical emergency while in the community, staff will call 911 immediately. They will follow the instructions of the respondent. A call to the Program nurse will also be made by any other staff member, e.g., driver, assistant, etc. on the trip. Designated management at the Program will contact the home representative/guardian. When the First Responders arrive, pertinent emergency information will be given to the First Responders.
- For those participants who are prescribed emergency medication and have a medical acuity attached to their tier, an LPN will attend off-site outings with them.

Procedures for Administering Medication

1. Medication labels are made for every medication given. Each label will indicate:
 - Participant's name and room number
 - Medication
 - Dose
 - Time
2. A medication label is applied to a medication cup for each dose to be administered. A medication label is also applied to a medication card, along with any special instructions.
3. Medication cups and cards are arranged chronologically in the order in which they are given. Each medication card is placed in front of each medication cup in the medication tray daily in every Health Office.
3. Medications are poured in the morning before participants arrive or at the end of previous day and are locked in the medication cabinet in the Health Office in each program building. Medications are not poured before a weekend or holiday break.



- 4.. A medication/treatment sheet is posted daily in each Health Office. After the medication is dispensed, the participant's name is crossed off the medication/treatment list and initialed by the nurse administering the medication.
5. If the medication cup is not in the medication tray and the participants name is crossed off the medication/treatment list and is initialed by the nurse, the medication has been given. If there are any questions as to whether or not a medication has been given, the nurse will consult with the other nurse(s) in the Health Office. No medication will be poured again or given until there is a complete clarification of the matter.
6. The nurse will enter on the participant's SNAP computer program only those medications he/she has given using his/her assigned SNAP PIN number.
7. Any change in medication orders/dosage by the physician is immediately entered in the SNAP program and the written order is filed in participant's health office file.

Substitute Nurses Administering Medication

All substitute nurses will be oriented to the medication cabinet/cart procedure for pouring and administering medications and for documentation.

If it is necessary for a substitute nurse to give medications, a verbal report is to be given by the Children Center Program's full-time nurse prior to administration of medications.

The report should include:

- ♦ Name of participant to receive medication
- ♦ Name of medication
- ♦ Dosage
- ♦ Time of administration
- ♦ Special instructions

If the substitute nurse has any questions, the medication should be held until clarified by the full-time staff nurse. The substitute nurse will enter medication given into the SNAP computer program using the substitute nurse code.



Transporting Medications/Refills

1. As medication refills are needed, a locked lock box containing the empty medication bottle is sent home.
2. A note requesting a medication refill indicating the date medication is needed and the combination number for the lock box is stapled securely to the lock box handle.
3. The nurse places the locked lock box in the participant's backpack.
4. The nurse retrieves the lock box from the participant's backpack upon arrival at program.
5. The nurse documents the arrival of medication from home, per procedure.
6. The combinations for the lock boxes are secured in the Health Office and in Building 9.

Documenting Medications from Home

1. Nurses will retrieve medication boxes from backpacks. Staff members are not to transport medication boxes to the Health Office. The nurse should be notified if a medication box needs to be retrieved from an adult room.
2. Nurse will enter in the SNAP computer program the participant's name, name of medication and number of pills or amount of elixir.
3. Nurse, using carbonized Nurse/Therapist note, will note the participant's name, date, medication and number of pills or amount of elixir as receipt for parents, guardian or group home. Nurse will file copy in participant's #3 Health Office file.

Emergency Administration of Prescription Medications

Each participant who has Epi-pen orders for life threatening allergic reactions has his/her own Epi-pen and doctor's orders for use along with home representative/guardian permission slip for the delegate placed in a fanny pack and stored in the health office in his/her program building. Administration of an Epi-Pen will only occur by a fully trained and certified staff in this process. Trained staff will also administer VNS as needed. Any other medications, emergent or not, will only be administered on site by a fully licensed CCP employed Nurse. Other staff will not dispense or administer medications.



The trained First Aid/Epi-pen delegated staff member follows the life-threatening emergency procedures and the orders/protocol established by the physician. In the absence of a delegate, the Room Supervisor will assume the responsibility of insuring that the Epi-pen is carried by a program staff member who accompanies the participant at all times.

1. The delegated Epi-pen trained staff member/room supervisor signs out the Epi-pen Fanny pack from the nurse when the participant arrives at program.
2. This Epi-pen delegate/Room Supervisor carries the Epi-pen fanny pack when leaving the building and remains with the participant at all times.
3. When the Epi-pen delegate is away from the participant for any reason he/she passes it on to another Epi-pen trained staff member when out of the building.
4. The Epi-pen delegate/Room Supervisor returns the Epi-pen to the Health Office and signs it back in at the end of the day and the participant has left. The Epi-pen is locked in the cabinet
5. An Epi-pen delegate must carry the participant's Epi-pen on off-site trips.
6. Only CPR Certified/Epi-pen trained staff members may act in the capacity of Epi-pen delegate for the administration of the Epi-pen. **911 must be called if Epi-pen is administered.**

Medication Count Procedure

1. All daily medications will be counted on Friday.
2. Medication counts will be justified by two nurses against the SNAP computer program medication count.
3. Medication count will be done the afternoon before and morning after a holiday or break.
4. Any medication discrepancies will be reported to the Program Executive Director.

Children's Center



Programs, LLC

Medication Cabinet Keys

1. Each nurse will take home the office door key and the medication cabinet keys daily
2. Any keys not taken home will be locked in the Health Office medication cabinets
3. Adult Program nurse will have the medication cabinet key with her at all times while on campus



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HEALTH/MEDICAL-EMERGENCIES

Effective Date: 2/1/12; *Revised:* 1/28/19, 4/15/19, 12/15/21

SCOPE & SUMMARY: This policy pertains to all employees and participants of Children's Center Program (CCP) Adult Day Program.

POLICY: Children Center Programs has developed procedures for managing emergencies.

PROCEDURES:

Emergency Information

CCP maintains Emergency Information for each individual. The Emergency Information card consolidates relevant emergency, health and medical information and is readily available in an emergency. Emergency Information is updated by the participant's Home Representative/Guardian yearly or when a change is indicated.

Emergency Treatment

In the event that a medical emergency arises, CCP will call 911, followed by a call to the Home Representative/Guardian. Once EMS arrives, the individual will be assessed, and it will be determined by EMS on the scene if the individual needs to be transported to the nearest emergency room. Although a member of EMS may consult with the home representative/guardian over the phone, the decision to take the individual to the hospital is the responsibility of EMS on the scene. Should it be determined by EMS that the individual does not need to go to the emergency room, CCP requires that the home representative/guardian come to program immediately and take the individual home for the remainder of the day

Should a participant require emergency treatment at a hospital or other facility during day Program hours, a staff shall remain with the individual until the home representative/guardian arrives.

**Emergency Consent for Treatment Form**

Each adult participant's Home Representative/Guardian is requested to complete the Emergency Consent for Treatment form as part of the initial admissions Health Packet prior to their family member beginning in the Adult Program. The Emergency Consent for Treatment form is maintained in the participant's health office file, emergency binder and in the individual's file. Home Representatives/Guardians are notified that this form is in place for the duration of their family member's participation in the Children's Center Adult Program and can be rescinded in writing at any time.

Hospitalization/Serious Illness

Participants who have been hospitalized or have recuperated from a prolonged illness or injury need a doctor's note with a "Return to Program" date in order to return to the Program. The note should indicate the type of illness/injury, any physical limitations/restrictions and any pertinent information the nurse/staff needs to properly care for the individual.

Do not Resuscitate Orders (DNR)/ Practitioner Orders for Life-Sustaining Treatment (POLST) Protocols

Some Guardians may not wish to pursue life-saving medical protocols for their child/family member due to the lack of benefit to the individual's condition or quality of life that is likely to result from following these protocols. All Do Not Resuscitate (DNR) and Physician Orders for Life-Sustaining Treatment (POLST) orders will be thoroughly and carefully reviewed. DNR and POLST orders are written directives signed by the Guardian of a participant who, after consultation with the participant's physician and other advisors, makes decisions regarding life sustaining treatment. "Written Order" means a directive and protocol written by the participant's medical home (physician) to address a healthcare need or to provide medical service for a specific participant. "Medical Home" means a health care provider and that provider's practice site chosen by the participant's legal guardian for the provision of health care.

A guardian desiring to pursue a DNR or POLST order must submit a written order, which should be developed after a meeting with the legal guardian(s), the participant, if appropriate, and the participant's family health care provider. The written order shall include specific written emergency orders and shall specifically meet the goals for the participant. Community emergency medical services protocols must be clearly defined in the written order. The DNR or POLST order(s) will be reviewed whenever a change occurs in the participant's condition or **at least yearly**. The Medical Director, the Program Nurses, Program Executive Director and the local emergency medical service provider will receive the written DNR/POLST order.



The Program nurse and staff are responsible for providing an appropriate response to the DNR and/or POLST order. The Medical Director is responsible for instructing program staff in DNR and/or POLST orders. The Program nurse of Children's Center Programs will review the written orders with Program administrators.

The existence of a DNR or POLST written order and plan shall be placed in the participant's individualized health record file and in the participant's individual SNAP program.

First Aid Kits

Each health office, trip bag and transportation vehicle has a First Aid kit that includes at least the following items: antiseptic, rolled gauze bandages, sterile bandage, adhesive tape, scissors, Band-Aids and thermometer. Each program room has a First Aid Kit with CPR micro-shield, Vionex wipes, sting-kill wipes, gauze, gloves, disposable ice pack, Band-Aids, garbage bag and emergency procedure sheet. Adult Program Staff is encouraged to notify the program nurse when supplies need replacement.

Intercom Phones

There are two intercom phones located on the Nature Trail in the event a nurse needs to be called. One phone is behind Building 9 and the other is behind Building 7. The call line goes to Building 9 and Building 6 and 7 secretaries respectively. The secretary will send a nurse to the designated area on the Nature Trail.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HEALTH/MEDICAL-ILLNESS, CONTAGIOUS CONDITIONS, EMERGENCY CONDITIONS

Effective Date: 2/1/12; Revised: 4/15/19, Revised 12/21/20, 7/11/23

SCOPE & SUMMARY: This policy pertains to all participants enrolled in Children's Center Program (CCP) Adult Day Program.

POLICY: Children Center Programs has developed procedures for managing illness and contagious conditions of the participants.

PROCEDURES:

The Adult Program Health Guidelines (below) are shared and signed by each adult participant's Home Representative/Guardian before entry into the program and yearly thereafter as part of the Health Packet:

ALLERGIES: Many of our participants have a variety of food allergies and/or are on specialized diets. When sending in food items for a birthday or a special celebration, please send in **only** store-bought items that are clearly marked and all ingredients are listed.

BED BUGS: If found, the Home Representative/Guardian will be notified and requested to pick up their family member. The individual will be permitted back into program once the Home Representative/Guardian produces documentation from an exterminator that the home is clear of bed bugs or that the residence has been treated for bed bugs.

BLEEDING: Participants are not to come to the Adult Program if they have active bleeding (other than menstrual period). Home Representatives/Guardians will be called to pick up their family member if this occurs at the Adult Program.

CHICKEN POX: Participants with chicken pox shall be excluded from the Adult Program until all lesions have scabbed over. All crusty scabs need not have fallen off



COMMON COLD: Participants who have a combination of any of the following symptoms should be kept home until the severity of the symptoms subsides: runny nose, watery eyes, thick nasal discharge, sore throat and swollen glands, rash, and deep croupy cough with or without the manifestation of fever.

CONJUNCTIVITIS: (Pink Eye): If suspected, the Home Representative/Guardian will be notified and requested to pick up their family member. Participants may return to program after 24 hours with a doctor's note indicating treatment is in progress or when eyes are clear.

CONTAGIOUS CONDITION: If suspected, the participant will be excluded from the adult program until a return to program note is received from a physician

DIARRHEA: Participants are not to come to the adult program if they have diarrhea. Should diarrhea occur in the Adult Program, the Home Representative/Guardian will be notified and requested to pick up their family member. Participants should have **no** diarrhea for 24 hours before being sent back to the Adult Program.

EMERGENCY TREATMENT: In the event that a medical emergency arises, CC Programs will call 911. Followed by a call to the home representative/guardian. Once EMS arrives, the individual will be assessed, and it will be determined by EMS on the scene if the individual needs to be transported to the nearest emergency room. Although a member of EMS may consult with the home representative/guardian over the phone, the decision to take the individual to the hospital is the responsibility of EMS on the scene. Should it be determined by EMS that the individual does not need to go to the emergency room, CCP requires that the home representative/guardian come to Program immediately and take the individual home for the remainder of the Program day.

Should a participant require emergency treatment at a hospital or other facility during day Program hours, a staff shall remain with the individual until the caregiver of family member/guardian arrives.

EPI-PENS: Anyone requiring an Epi-Pen who is transported by CC Programs must carry it with him/her to and from the program daily. Should an individual arrive in the morning without their Epi-Pen the nurse will call and require that the guardian/home representative bring it to Program.

FEVER: Temperature of over 100 degrees is an indication of illness. Participants who have fevers upon awakening in the morning or who may have had a fever during the night should not be sent to the Adult Program. Participants should be fever free for at least 24 hours before being sent back to the Adult Program. Participants should be fever free for at least 24 hours before returning to the Program.



HOSPITALIZATION/SERIOUS ILLNESS: Participants who have been hospitalized or have recuperated from a prolonged illness or injury will need a doctor's note with a "Return to Program" date to return to the Program. The note should indicate the type of illness or injury, physical limitations, restrictions, and any pertinent information the nurse needs to properly care for the participant

IMPETIGO: If suspected, the Home Representative/Guardian will be notified and requested to pick up their family member. This contagious condition requires medical attention. The individual must be treated by a physician and will require a doctor's note upon return to the adult program. All lesions should be completely gone before returning to the adult program.

LICE: If suspected, the Home Representative/Guardian will be notified and requested to pick up their family member. In the event the participant has head lice, he/she will not be allowed to return to program until examined by the nurse after treatment. Additionally, the nurse may require a doctor's note stating that the participant has had the required treatment.

MEDICAL EVALUATION: If a nurse assesses a Program participant and determines that he/she needs to be evaluated by a doctor, it is required that a home representative/guardian or another approved adult come to the Program immediately to pick up the individual. If the nurse is unable to reach a home representative or emergency contact or if the home representative refuses to come or will be greatly delayed in coming, CCP will call 911 to transport the individual to the hospital for evaluation and treatment. In all situations, a doctor's clearance will be required before the individual can return to Program.

MEDICATION BEFORE PROGRAM: If you have given your family member medication before Program that is not given on a daily basis (i.e., Dimetapp, Benadryl, analgesics, behavior medications, etc. please communicate this to the Adult Program nurse by phone, to alert her/him to the potential for changes in the individual's behavior or when the next dose may be administered.

MEDICATION IN THE COMMUNITY: With few exceptions, nurses do not accompany participants into the community. When off-site, medications are not dispensed. Should an emergency arise when off-site, staff is instructed to call 911.

***Exceptions:** Those who have a **medical acuity** **AND** **rescue medications** will be accompanied by a nurse when off-site.

ORTHOPEDIC INJURIES: If a participant has an orthopedic injury, he/she will be excluded from program pending a "Return to Program" note from a physician outlining any activity limitations and the duration of those limitations.



PRIVATE DUTY NURSES (PDN): If your family member has a PDN who attends Program with him/her, a PDN must attend each time the individual is at Program. The Program is not able to make exceptions when a PDN is not available.

RASH: The nursing staff will use their discretion when rashes of unknown origin are observed. Depending on their assessment, the participant may be excluded from Program until a “Return to Program” note is received from a physician

RINGWORM: If suspected, the Home Representative/Guardian will be notified and requested to pick up their family member. Ringworm of the scalp and/or body requires treatment by a physician and requires a doctor's note stating the participant is under treatment and may return to the Program. Participants will not be readmitted to Program until a doctor's note is received.

SEIZURES: When on site during regular Program hours, our nursing staff will provide the general first aid associated with the treatment of seizure disorders. However, if the seizure or seizures, last more than five minutes or are followed by subsequent seizures and/or respiratory distress, or if the individual is injured, has diabetes, this is a first time seizure, or the seizure occurs in water, this condition is deemed to be a medical emergency necessitating an immediate call to “911” to obtain emergency medical services and transport to the nearest Emergency Department. If medication is administered to help stop a seizure, 911 will be called. This protocol is in line with general medical procedures and the National Institute of Health. Naturally, if your family member's physician recommends on the Seizure Orders form that “911” should be contacted at less than 5 minutes, our Program would follow that recommendation. 911 will be called and the individual transported to the nearest emergency room for any seizures that occur during transportation or in the community when a nurse is not present.

If a participant has not had a grand mal seizure in 3 years the Home Representative/Guardian will be called to pick up their family member or 911 will be called. The participant **will not** be transported home by Children Center Programs.

STREP THROAT: A participant with a diagnosed case of strep throat will require a doctor's note to return to the Program.

VOMITING: Participants **are not** to come to the Program if they are experiencing vomiting. They should be free of vomiting for 24 hours before returning to the Program.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HEALTH/MEDICAL-INDIVIDUAL MEDICAL RESTRICTIONS/SPECIAL INSTRUCTIONS

Effective Date: Effective Date: 2/1/12

SCOPE & SUMMARY: This policy pertains to all participants enrolled Children's Center Program (CCP) Adult Day Program

POLICY: Children Center Programs has developed procedures for maintaining current documentation of medical restrictions or special instructions within the individual file and on the emergency card, and will ensure that all personnel understand, follow, and are trained as needed in all medical restrictions, special instructions, and dietary needs associated with the individuals receiving services.

PROCEDURES:

Documenting Medical Restrictions or Special Instructions

During the interview process (before placement has been offered), the Individual/Home Representative/Guardian completes an information sheet which includes the following information: allergies, seizures, chronic medical issues, medications, special health care needs, self-care, eating textures, utensil use, feeding/special diet needs, preferred and non-preferred foods. In addition, dressing, communication, modifications, mobility transfers, locomotion, behavioral information and interests are included.

No later than five days before the individual's start date in the program, the Health Packet must be completed and signed by a Home Representative/Guardian and received by the Health Office for review.

- The Health Packet forms must be completed and signed by the Home Representative/Guardian. Forms include: Emergency Card, Health Office Information Form, Permission to Contact Participant's Physician, Emergency Consent Form and Adult Program Health Guidelines.



- The following forms (*if applicable to participant*) must be completed and signed by PHYSICIAN prior to start date. The Home Representative/Guardian must sign the permission statement on the same form prior to start date: Medication Orders, Suction Orders, Asthma Treatment Plan, Nebulizer Treatment Order, Gastrostomy Tube Feeding Order, and Seizure Order. Over-the-counter medications and PRN medication require a medication order. All physician's orders are good for **one year** or until there is a physician's change in medicine or required treatment. Any changes in medication order or treatment orders require a new, signed physician's order with home representative/guardian permission statement. No medication will be administered without a current, dated, signed physician's order.

Health Packets are sent to Home Representatives/Guardians in the spring of each year for updating and should be returned **within 60 days**. Failure to provide updated health packet information could result in suspension from the program until the required documents are received.

Once the Health Packet with medical restrictions and special instructions and dietary restrictions is received and reviewed by administration it is forwarded to the Health Office. The Adult Program nurse reviews the information and enters it into the SNAP computer program. SNAP is used to document ongoing health information for all Adult Participants who attend the Program and serves as the Medication Administration Record. The SNAP computerized program enables the nurse to list, document, and maintain confidentiality of each participant's individualized health information, home representative/guardian emergency contacts and phone numbers as well as, health history, health office visits, doctor's specific medication order and administrations, alerts, such as allergies, and confidential alerts, such as "do not release to" and conditions, such as hospitalizations, diseases, medication, etc.

In addition to the information entered into the SNAP program, the nurse keeps secured updated forms for adult participants such as Asthma Treatment Plans for adult participants with Asthma, and a file with updated health information, guardian permission to share information with staff members who need to know, guardian permission to contact participant's physician, medication orders with physician's signature and home representative's/guardian's signature to request that nursing staff administer medication to the individual, suction orders, nebulizer treatment orders, gastrostomy tube feeding/replacement orders, and seizure orders as needed. This information encompasses each participant's program health file. Health Office files are locked in a file cabinet in the participant's home building.



The Health Office staff utilizes the SNAP program to generate a current health record that is used as a reference in an emergency or should 911 be called. The nurse prints out a current copy of each adult participant's record, Emergency Consent Form and emergency card and keeps them in a binder locked in a cabinet in the Health Office in the event of an emergency and the computers are not available.

Personnel Understand, Follow and are Trained in Medical Restrictions, Special Instructions or Dietary and/or Texture Requirements ordered by the Physician of documented in the ISP.

Once the participant's health packet with medical restrictions and/or special instructions, and dietary needs is received in the program the following occurs:

- Health packet with medical restrictions and/or special instructions and/or dietary and texture requirements is reviewed by the program administrator or designee
- Health packet with medical restrictions and/or special instructions and/or dietary and texture requirements is reviewed by program nurse
- Nurse and administrator share medical restrictions and/or special instructions and/or dietary and texture requirements with appropriate direct care staff
- Program administrator and/or Program nurse perform periodic observations of adult participants within the Program with specific attention to medical restrictions and/or special instructions and/or dietary and texture requirements



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: COMMUNICABLE DISEASES

Effective Date: 10/2016

Revised: 5/2020

SCOPE & SUMMARY: This policy pertains to all Program participants, employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP). The policy and procedures within will be appropriately applied to certain situations where illness or suspected illness may arise. Department of Health, CDC, and Department of Developmental Disabilities guidance relevant to specific communicable illnesses, including, but not limited to, active tuberculosis, influenza, conjunctivitis, human immunodeficiency virus (HIV), viral Hepatitis and Coronavirus 19 (COVID-19), among others, will be sought in the event the identification or reporting of a communicable disease occurs.

All employees and participants associated with CCP Adult Day Habilitation Program will receive the necessary information regarding communicable diseases. This will at the minimum take place during orientation for new employees and ongoing training for existing employees with follow-up summary information.

Although CCP recognizes it is not a "school" nor a "child- care setting" valuable guidance can be located at: NEW JERSEY DEPARTMENT OF HEALTH COMMUNICABLE DISEASE SERVICE GENERAL GUIDELINES FOR THE CONTROL OF OUTBREAKS IN SCHOOL AND CHILD CARE SETTINGS.

<https://www.nj.gov/health/cd/topics/schoolhealth.shtml>

<https://healthapps.state.nj.us/forms/index.aspx#cds-33>

<https://healthapps.state.nj.us/forms/index.aspx#cds-38>



POLICY and PROCEDURE:

REPORTING and REVIEW: The reporting of a communicable disease in the Program will serve many purposes. Our immediate goal is to acknowledge our responsibility to service participants and their families and to create a safe and healthy environment in an atmosphere that reduces the risk of transmission of “ANY” infectious agent to anyone employed, who visits, or is a participant of CCP or its related companies. By so doing we may be able to control further spread of the disease.

A communicable disease can be transferred/transmitted from an infected person to another individual from organisms like bacteria, viruses, and parasites. This may result in an illness. Illness caused by an infectious disease is a common occurrence in humans.

Any communicable disease is to be immediately reported to the on-site Health Office. If a contagious illness occurs (as defined by the NJ Department of Health (NJDOH) <https://www.nj.gov/health/cd/topics/schoolhealth.shtml>), the Monmouth County Health Department will immediately be notified by phone (732-431-7456) and their directions will be followed. This includes all suspected or positive cases of COVID-19. CCP or its related companies will seek the Monmouth County Health Department’s input before sending a program-wide notification regarding a communicable disease.

CCP is required to submit an Unusual Incident Report (UIR) to the Division of Developmental Disabilities (DDD) should a participant have a confirmed reportable communicable disease, such as COVID-19, and/or a confirmed communicable disease that causes an operational impact to the program.

Information gained from an infectious disease investigation can help us and our public health agencies identify and eliminate sources of infection such as contaminated products, learn about emerging problems, identify carriers to mitigate their role in disease transmission, and implement new strategies for prevention within similar Programs.

During seasonal illnesses, such as influenza, CCP will expect to see sporadic cases within our Program. It is thus recommended by NJDOH, Programs as ours, monitor participants and staff and notify the Monmouth County Health Department for guidance.

Reporting in this case refers not only to the initial contagion notification, but also to the provision of routine updates on the status of the possible outbreak. We will remain in contact with the Monmouth County Health Department, as needed, regarding case numbers, control measures taken, and other pertinent information.

Employees and guardians of our participants who know they have or their family member has a communicable illness or who have a reasonable basis for believing that they have been exposed to a



communicable illness have an obligation to conduct themselves responsibly for their own protection and the protection of all others associated with CCP. It is the expectation that family representatives call the Health Office to discuss whether or not on-site attendance at the Program is possible.

Employees and participants with communicable illnesses will not and must not knowingly engage in any activity that creates a risk of transmission to others on our campus.

Participants who are eligible for the services of CCP will not be denied services because of a communicable disease. Decisions concerning the provision of services in an alternative method, other than on-site, will be discussed with the individual/home representatives and made on an individual basis consistent with written procedures, resources available, logistics and State and Federal guidelines.

CONFIDENTIALITY: CCP recognizes the importance of protecting the confidentiality and privacy of all persons suspected of having, or who have, a communicable illness. CCP will disclose sensitive medical information of employees and participants no further than is required or deemed necessary to ensure the health and safety of all other employees and participants of CCP in a manner consistent with applicable law.

UNIVERSAL PRECAUTIONS AND PERSONAL PROTECTIVE EQUIPMENT: (PPE):

Universal Precautions and the proper and ongoing use of PPE are the best possible approach to infection control established to prevent contact with potentially infectious materials or communicable diseases. One example is Bloodborne pathogens. These are pathogenic microorganisms that are present in human blood and can transmit from person to person when exposed to blood or bodily fluids of an infected individual. These pathogens include but are not limited to, human immunodeficiency virus (HIV), the hepatitis B virus (HBV), and hepatitis C virus (HCV). At the Program all human blood, bodily fluids, open wounds, etc. will be treated as infectious and thus universal precautions, training, and PPE are in order during nursing care. Maintenance, cleaning, and disposal of such will take place by Facilities Management under the guidance of OSHA requirements and regulations.

CCP will provide employees with the appropriate materials and processes to prevent and handle a possible exposure to bloodborne pathogens in the workplace. Bloodborne Pathogen training takes place on the day an employee begins work.

PERSONAL PROTECTIVE EQUIPMENT (PPE):

<https://www.youtube.com/watch?v=eVJbenwzR1s&t=8s>

PPE are protective coverings that are used to reduce risk of exposure to pathogens, communicable disease, and other potential infectious materials while providing services to the Participants.



Approved PPE at the Program includes but is not limited to the following: gloves, protective eye shields, face masks/coverings, gowns, and aprons. If any employee is confused or concerned whether the PPE they have is adequate/appropriate, they should contact the Health Office and Human Resources for clarification.

Training on the proper use, care, and disposal of PPE takes place for all employees initially during orientation and then when needed.

CLEANLINESS/HYGIENE: <https://www.youtube.com/watch?v=XnJ1wvIIcbs&t=16s>

Proper and consistent handwashing is the single most effective way to prevent infection and the spread of communicable diseases/viruses. Training of this occurs for all employees. An overview appears below:

1. Wet hands with running water and apply soap.
2. Rub hands together and scrub all surfaces including in between fingers and under fingernails.
3. Continue scrubbing for at least 20-30 seconds.
4. Rinse thoroughly.
5. Dry hands completely with a clean paper towel.
6. Use the paper towel to turn off faucet.

Washing our hands should occur at the minimum:

1. On arrival at the Program and when you arrive home after your day.
2. Before and after direct physical contact with each Participant.
3. After each activity, inside or outside.
4. After handling diapers and/or any bodily secretions.
5. After using the toilet, helping a Participant use the toilet or urinal.
6. Whenever hands are visibly soiled and immediately after gloves are worn.
7. Before eating, drinking or handling food
8. Before and after handling materials.
9. After sneezing, coughing or blowing nose.



MITIGATING THE PASSING OF COMMUNICABLE DISEASES:

To mitigate the passing along of communicable diseases to all employees, CCP recommends the following to employees:

1. Do not come to campus when feeling ill. Use the proper call-out process, contact your doctor, and follow proper CDC/your doctor protocol.
2. Be alert and aware of any early signs of illness. Report any problems to our Health Care Office.
3. Consistently clean and disinfect tables, doorknobs, chairs, toilet handles, sinks, activities, etc. after use.
4. Do not congregate with fellow co-workers during times of heightened awareness of disease. Wear the necessary and required PPE provided throughout the day.
5. Remove PPE properly and dispose of if warranted in closed containers.
6. All objects handled should be disinfected with the proper provided disinfected.
7. If using a cloth covered mask, wash and keep clean every day. Maintain a supply so they can be interchanged.
8. Contact facilities personnel when needed for supplies, cleaning up spills, replacing soap and other hygiene resources, etc.
9. If in doubt contact management for answers to your questions immediately.
10. Practice good personal hygiene daily.

https://www.nj.gov/health/cd/documents/topics/outbreaks/Guidelines%20for%20Outbreaks%20in%20School%20Settings_10.2018.pdf

<https://www.nj.gov/health/cd/topics/schoolhealth.shtml>

<https://nj.gov/humanservices/ddd/documents/covid19-congregate-day-program-reopening-requirements.pdf>

Children's Center



Programs, LLC

EMERGENCY PROCEDURES



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: EMERGENCY POLICY & EMERGENCY MANAGEMENT AND BUSINESS CONTINUITY

Effective Date: 1/12/13 REVISED DATE: March 2019

SCOPE AND SUMMARY: This Policy pertains to Children's Center Programs (CCP), Children's Center of Monmouth County (CCMCo), KinderGlide, Outreach, etc. herein referred to as The Company; and those employed by The Company located in Neptune, New Jersey.

The Company's goal is to make sure there is a consistent implementation of policy and practice to ensure and maintain the safety of participants, employees, visitors, and any one related to or visiting the Company or on site where contracted services are delivered; to essential business functions; to expedite the resumption of all services and business continuity in the aftermath of a given emergency.

PROCESS AND PROCEDURE:

DEFINITIONS:

Emergency: may include but not be limited to utility failure, fire, weather, intruder, hostage situation, bomb threat, terrorist threat, bio-chemical threat, or medical emergency.

Emergency Management Team (EMT):

- A. The Children's Center Programs Emergency Management Team may include the board of directors and will consist of the executive director(s) and program director(s). Additionally, the EMT may include a designee for the Children's Center Programs (i.e. Facilities Director)
- B. The EMT will have responsibility for communication with other staff in the event of an emergency.
- C. The EMT will have access to automated speaker system, 2-way radios and cell phones for emergencies.
- D. Every effort should be made for the EMT to assemble and/or communicate in order to plan a course of action.
- E. The chain of command process will be used for all communications pertaining to emergency. All directions and information will flow up and down the chain of command. The team must know who of its members is not available any given day.
- F. The EMT is responsible for reviewing all incident reports related to emergency responses.



EMERGENCY RESOURCES:

Emergency Handbook:

- A. The emergency plan will detail each type of emergency (fire, tornado, hurricane, flood, snow, ice, earthquake, power outage, bomb, intruder, hostage, suspicious packages, Chemical, radiation / nuclear, biosecurity, medical emergency, pandemic) as applicable to location.
- B. The emergency handbook will be available in each building and contain specific procedures for each emergency situation.
- C. The Company health and safety committee will review the Emergency Handbook annually and make recommendations for revision to the EMT.

Site Evacuation Plans/ Maps:

- A. Evacuation of each building/room will occur as detailed in the site evacuation plan and according to the evacuation map located in each room/building.
- B. The evacuation map shall be located with each service location at each exit. This map includes:
 - a. *Location floor plan*
 - b. *Location of pull stations*
 - c. *Location of fire extinguishers*
 - d. *Evacuations routes*
 - e. *Emergency numbers including fire, Police, First aid, and Poison control*
 - f. *External alternate location*
 - g. *External assembly point*
 - h. *CPR certified staff*
- C. The evacuation plan will include a list of Staff assignments for the location; internal assembly points; designated safe buildings information.
- D. Participants or other persons receiving services from a staff member at the time of the emergency evacuation it will be the responsibility of the staff member until the emergency drill is concluded.
- E. If an internal or external disaster precludes the use of the service location, the designated safe public building will be utilized for temporary shelter, as identified, in the evacuation plan for the location.
- F. The plan will be reviewed on a semi-annual basis.



Evacuation Kits:

- A. An emergency evacuation kit will be prepared for each location and room and it will include as appropriate:
 - a. *Emergency evacuation plan for the facility.*
 - b. *Emergency Forms for each individual receiving the service and for staff.*
 - c. *First aid supplies, gloves, water, Thick-it, wipes, diapers, batteries, flashlights, snacks, blankets, van keys, umbrella, and equipment unique to the location and/or individual receiving services.*
- B. This kit will be maintained in a designated location, available to any designated staff member or substituted, and checked quarterly by the designated staff.

Fire Extinguisher:

- A. Fire extinguishers are clearly labeled, referenced on the evacuation map and records are maintained indicating appropriate maintenance.

EMERGENCY RESPONSE: Delayed opening, early dismissal, emergency, closing, evacuation out of the building, shelter in place, lockdown (including staff or other people outside the building) or state of emergency.

Delayed Opening:

- A. The Company openings will be delayed 90 minutes after regular starting time unless otherwise noted. The emergency contact phone list will be utilized to notify staff and families.
- B. In the event the decision is made to close The Company after initially declaring a delayed opening, the emergency contact phone list will be re-initiated and the additional procedures under *emergency closing* will be followed.

Early Dismissal:

- A. Early dismissal will be decided by the Executive Director or designee EMT will be notified. Parents/Guardians/Home Representatives, family members, transportation sources, residential locations, and related people or locations will also be notified.
- B. Participants will not be released if home representative/guardian/parent is not able to be contacted



Emergency Closing:

- A. The executive director of designee will determine the status of location activities if an emergency closing is required. If an emergency closing is required, announcements will be made on local area TV and radio stations/websites, as identified in staff and family handbooks, on The Company website, through the emergency contact phone list and on voice message at The Company administrative offices. Certain services may be provided at the discretion of the executive director.
- B. The EMT is responsible for staff coverage and notification of the emergency situation to the staff and the residential facilities. During an emergency, staff is required to remain on duty until notified by a supervisor.

Shelter in Place:

- A. The executive director of designee will determine the need for shelter in place status in communication with local authorities. EMT will be notified. Parents/Guardians/Home Representatives, family members, transportation sources, residential locations, and related people or locations will also be notified.
- B. The EMT is responsible for staff coverage and notification of the emergency situation to the staff and the residential facilities. During an emergency, staff is required to remain on duty until notified by a supervisor.
- C. If necessary, an emergency volunteer corps of staff will be activated.

Lockdown:

- A. Any staff may initiate a lock down in the event of imminent danger to those present. The highest-ranking staff member on site will take charge of the lock down.
- B. A lock down is communicated to all present via the intercom using a preauthorized code.
- C. In the event of a lock down, any staff member who is able to should call 9-1-1.



Emergency Evacuation: (i.e. Fire, bomb threat, etc.)

- A. In the event the alarm sounds or if so directed, the evacuation protocol for the location will be initiated.
- B. If necessary, the executive director or designee will direct the evacuation of the property. Staff and participants will evacuate to nearby businesses within walking distance or will be transported to the designated safe public building for temporary shelter. Written agreements will be renewed annually for designated safe public buildings.

Medical Emergency:

- A. Medical emergencies will be addressed in accordance with agency standing orders and standard operating procedures
- B. Standing orders and standard operating procedures will be reviewed and revised annually and certified by the medical director. Copies of the standing orders and standard operating procedures will be available at each location.

State of Emergency:

- A. If municipal or state authorities take control of the situation their directives will be followed.
- B. In a state of emergency called by the governor, all day programs will be closed accordingly.
- C. EMT and staff will be identified as essential personnel with their name tags and a letter from the executive director authorizing road access for work purposes.

Business Continuity:

- A. It is the intent of the Children's Center Programs - Adult Day Program to restore critical business functions in a timely and efficient manner in the event of an emergency interruption to services. The organization will strive to protect the wellbeing of its participants, clients and employees, minimize loss of revenue and data, and maintain its public reputation.
- B. The EMT will be informed of all emergency situations and will assess the disaster/emergency situation.
- C. A list of contact information for Children's Center Programs' Emergency Management Team (EMT) will be distributed annually and updated as needed.
- D. A contact list of stakeholders who will need to be informed of the emergency, including but not limited to staff, families, board president and members, funders, and regulatory agencies will be maintained by The Company.



- E. A comprehensive list of insurance policies and appropriate contact information will be available to the EMT via the executive director or designees
- F. A list of pertinent vendors and contact information will be maintained by The Company
- G. A list of temporary facilities per center program will be maintained and copies of memos of understanding between the temporary facility and The Children's Center Programs as well as contact information will be available.
 - a. Consideration of engaging temporary facilities and length of possible off-site function will be determined by the EMT
 - b. If the disaster warrants total evacuation from the premise of The Company, the EMT will be informed. Business interruption and contingency will be evaluated.
- H. If the Company facility requires "shutdown," the EMT will follow the proper procedure as indicated on the emergency evacuation plan, unless otherwise directed by local authorities.
- I. Core Children's Center Programs functions and at least one alternative process for completing those functions will be identified. Core functions will be recovered in priority sequence as determined by the EMT.
 - a. The Company network and telephone system will be monitored and secured by the network administrator or consultant.
 - b. Back up tapes for The Company computer network system will be made available as needed if The Company server can be accessed (possibly remotely) or an alternative server is available (within The Company).
 - c. The Children Center Programs network personnel from other sites may be called in to support business recovery efforts.

Training

- A. Meetings and Trainings of the EMT will occur semi-annually and may include trainings of policy and procedure CPR, first aid, drills, water and gas shut offs, timer on lights, HVAC, accessing alarm systems, alerting the building, checking the location for stragglers during an evacuation, and maintenance of records (emergency cards, attendance records, calling 9-1-1, alerting administration, coordinating notifications of parents/guardians, family members, transportation sources, and residential locations).
- B. New staff members are trained on the Emergency Management Plan Evacuation Maps as part of new staff orientation. Existing staff will receive training annually.



- C. Each service location managed by the organization will hold a drill of emergency procedures, including evacuation, at least twice each month according to regulations of funding sources and The Company Operational Guide. These drills will be documented in the Emergency Drill and in the monthly report. Fifty percent of these drills may be designated as training opportunities for participating staff members.
- D. When services are delivered in sites of other than those managed by The Company, initial evaluation for delivery of series will include documentation of emergency management procedures consistent with this policy including evacuation, emergency contacts, and communication with guardians and family members.
 - a. Each staff member assigned to provide services in an alternate site will be expected to be aware of the evacuation procedures of the alternate site and participate as appropriate.

E. Fire Extinguishers

- a. Selected staff members are trained annually in fire extinguisher use as documented on the staff training check off list and or the continuing education form.

F. Emergency handbook

- a. All staff will be trained annually on the emergency handbook

G. Business continuity

- a. All administrative staff will receive annual training on the procedure. The appendices, including all lists of contact information, will be updated as needed and circulated to administrators as appropriate.
- b. At least one annual evacuation drill will include evacuating from the premise and a simulated business interruption tabletop discussion by the Children's Center Programs Emergency Management Team (EMT).



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: VISITORS

Effective Date: 7/1/15 revised 10/28/22

SCOPE & SUMMARY: This Policy pertains to all visitors who come to and intend to enter the Children's Center Program's (CCP) campus and/or buildings where CCP participants are in session.

POLICY: The Children's Center Adult Program has developed guidelines for safely managing visitors. This information is shared with families as part of the admissions folder and annually thereafter.

PROCEDURE:

Scheduled Visits:

1. Individual (Home Representatives/Guardians, Support Coordinator, etc.) contacts the Program to schedule a date/time to visit
2. Security is alerted to expect the person on campus (date/time/building to visit)
3. The individual signs in when he reaches the Adult Program building
4. The individual is escorted by a staff member to his on-site location.
5. For visits from Support Coordinators and others who are not friends/family of the individual, an Adult Program staff remains with/near the visitor throughout the duration of the visit.
6. For visits from friends or family, the visitor and individual are provided with a private area to visit if requested.
7. The visitor signs out before leaving campus

Unscheduled Visits:

1. While it is strongly recommended that visitors schedule appointments to visit to ensure availability of Adult Program staff, unannounced visits are permissible.
2. If someone visits the program without an appointment, steps 3-7 above are followed.
3. If there is no Adult Program staff available to escort the visitor, he is asked to wait until someone is available or to return at another date/time.

Those welcoming visitors (i.e., secretaries, supervisors, facilities staff) are aware of the policy.

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PERSONNEL

Pages 92 through 125 are left intentionally blank. They represent our Human Resource/Employee policies and procedures. These policies are confidential and generic to our agency. They are for internal use only. Any questions, please contact our Executive Director for more information. We begin

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QUALITY MANAGEMENT PLAN



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: QUALITY MANAGEMENT

Effective Date: September 2018

SCOPE & SUMMARY: This policy applies to all employees associated with Children's Center Programs (CCP) such as but not limited to Direct Support Personnel, Community Support, Transportation, Related Services, Volunteers, Interns, Consultants, etc. This policy and all others are subject to change and update as per CCP Management. The purpose of this policy is to establish a uniform guide of quality and continuous improvement of CCP's operations, practices, and services.

POLICY/PROCEDURE: Quality is an integral part of Children's Center Program's (CCP) Vision, Mission, and Core Values. These principles guide our actions to deliver Day Habilitation services that are safe, compliant, relevant, age appropriate, focused, activity, community, and evidence based. CCP's attention to a system of continuous improvement, voice of the customer, error abatement, employee and family satisfaction, training and development, process and service control, record keeping, and communication are essential for the achievement of our goals to be recognized and trusted by those who utilize of services. At CCP our commitment is to never compromise on the safety, compliance, and quality of our services. This requires everyone involved from Top Management to Direct Support to be engaged, aware, and understand their responsibilities and accountabilities. CCP through training, development, and a robust and focused recruitment process intends to empower its employees to take action and continuously improve while adding value to our service commitment in order to enhance the lives of participants while they are here.

At CCP our commitment to Quality is also summarized in our Core Elements Process. These elements portray our commitment for excellence and include fostering a focused, continuous improvement mind-set with the objective of developing and providing Direct Support Day Habilitation and its related services with zero errors. We intend to tirelessly strive for the trust and satisfaction from participants and their families. We intend to deliver on our commitment to continuous improvement by securing data, creating metrics, value added processes, setting goals, reaching and exceeding those goals while setting the foundation for a happier, safe, secure, and fulfilling life for our participants.



OUR QUALITY COMMITMENT:

Our commitment to Quality includes but is not limited to:

CCP will comply with relevant laws and regulations as well as internal requirements,

CCP will create an environment that continuously challenges employees to improve the quality management system.

CCP will strive to prevent quality incidents and eliminate errors through the review of daily results,

CCP will encourage participation and promotion of quality responsibilities amongst all employees through evidence-based models and standards, education, training and coaching, supervision, and effective communication.

At CCP, teamwork, engagement, ownership and support by everyone are vital for achieving our quality objectives. In this context, CCP is committed to providing the required leadership, management and resources to ensure that the Quality Policy is reviewed annually and communicated to employees.

At CCP's core, Quality is first and foremost about trust in our services and in our employees.

At CCP Quality is also about delivering what we promise in everything we do. Each and every employee has the power to influence Quality and trust and it is the task of leadership to create an environment so that they may do so willingly, with passion, and without apprehension.

To sustainably create value and to effectively and efficiently build trust, CCP will:

1. Guarantee service and Direct Support safety and full compliance by respecting our policies, principles and standards with full transparency,
2. Ensure and enhance evidence-based practices, community involvement, age appropriate activities, fairness and consistency to delight participants and meet the expectations of their families.
3. Listen to the Voice of Our Customers through a variety of proven strategies and methods of data collection and satisfaction directly from the Stakeholders.
4. Strive to create a means of focused communication between and among our families in an effort for them to develop also a bond of trust and ongoing feedback.
5. Strive for zero errors, in the form of no abuse, neglect, exploitation, harassment, etc. and create a safe, secure, and health Day Program.



6. Constantly look for opportunities to apply our continuous improvement approach to deliver the best, agreed upon Program for Adults with Disabilities.
7. Engages everybody's commitment across our complete value chain and at all levels of our organization to build the proper and health CCP culture and mindset.
8. Utilize the DMAIC model of Quality improvement when faced with challenges needing attention and improvement.
 - a. Define, Measure, Analyze, Improve, and Control
9. Maintain daily, weekly, and monthly metrics in an effort to create a baseline for analytics thus review and improvement.
10. Strive for a culture of employee education, development, engagement, appreciation, and open communication.
11. Create goals utilizing the SMART method (Specific, Measureable, Achievable, Realistic and Time Bound).

A separate Quality Management Blueprint will be available for review outlining additional details of Process and Continuous Improvement strategies.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: CUSTOMER/FAMILY SATISFACTION MEASURES

Effective Date: 08/2018

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP). This Policy pertains to all Home Representatives/Guardians associated with CCP.

POLICY: In keeping with our mission to continuously improve upon our service and performance, Children's Center Programs, LLC (CCP) believes strongly in stakeholder satisfaction (Customers/Families). CCP will make every effort to design, create, and implement metrics in an effort to manage and provide feedback to those we service. In accordance with the New Jersey Department of Human Services Division of Developmental Disabilities Supports Program Policies & Procedures Manual, May 2018, (15.3.3) on an annual basis CCP will report to the Division and Families evidence of our focus upon satisfying our customers.

PROCESS/PROCEDURE: In addition to a Scorecard of satisfaction measures aligned with the CMS Home & Community Based Services (HCBS) Quality Framework, measures of Internal and External Customer Satisfaction will include but not be limited to:

1. Internal and external customer/family/employee surveys on an 18-month cycle.
2. Participant access, service planning, delivery of services, safeguards, rights, responsibilities, outcomes and satisfaction.
3. Monthly metrics regarding:
 - a. Monitoring of Staff Absenteeism
 - b. Monitoring of Turnover
 - c. Monitoring of Community Engagement
 - d. Monitoring of Staff Training and Development
 - e. Monitoring of Unusual Incident Reports (UIRs)
 - f. Monitoring of Prevention Plans Developed for UIR's
 - g. Monitoring of Nursing Interventions by Building
 - h. Monitoring of Security/Safety



- i. Monitoring of Drug Testing
 - j. Monitoring of Family Tours of Program Held
 - k. Monitoring of Room Supervisor Meetings
 - l. Monitoring of Behavioral Support Plan Strategies
 - m. Monitoring of Helping Hands (Participant) Management
 - n. Monitoring of Suspensions, Discharges
 - o. Monitoring of Voluntary withdrawals from Program
 - p. Monitoring of Acceptance/admittance to the Program
 - q. Monitoring of Incidents of abuse, neglect, exploitation reported or observed
 - r. Monitoring of Hiring and Credentialing Process
 - s. Monitoring of Medicaid claims data
 - t. Monitoring of participant outcomes and goal attainment
 - u. Monitoring of Service Plans, assessed needs and revisions if needed.
- 4. Analytics in the form of trends, themes, averages will take place and be shared among staff and families if appropriate, e.g., family satisfaction surveys.
 - 5. Data derived from these metrics will be entered into the Quality Management Plan so that:
 - a. Goals can be developed for continuous improvement
 - b. Measures of “what is”, “what should be” and the delta between can be looked at in an effort to strategically improve and meet/exceed customer expectations.
 - 6. Families, Stakeholders will be notified of our efforts to listen to them and our availability throughout Program hours.
 - 7. Our Scorecard, minus any confidential information, will be made available to Stakeholders and Division Personnel upon request.

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REPORTING MEDICAID WASTE/FRAUD/ABUSE



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: REPORTING MEDICAID WASTE/FRAUD/ABUSE

Effective Date: May 2019

SCOPE & SUMMARY: This policy pertains to all employees of Children's Center Programs (CCP) and its related companies.

POLICY and PROCEDURE: The purpose of this policy is to establish a procedure for all employees in regard to the Deficit Reduction Act of 2005 and to provide detailed information about the federal and State laws on false claims; fraud, waste and abuse; and whistleblower protections to prevent and detect fraud, waste and abuse in Medicaid and other federally funded programs.

Section 6032 of the federal Deficit Reduction Act of 2005 (Public Law 109171) requires that since CCP receives Medicaid funding as a Day Habilitation Program for Adults with disabilities to take actions that will address any fraud, waste and abuse it is made aware of. CCP will run its Adult Program in compliance with the federal and state laws and regulations related to the Deficit Reduction Act, the federal False Claims Act, the federal Program Fraud Civil Remedies Act, New Jersey's Medical Assistance and Health Services Act, New Jersey's Health Care Claims Fraud Act, the New Jersey Conscientious Employee Protection Act, and the New Jersey False Claims Act.

As per the Department of Human Services examples of **Medicaid Fraud and Waste include:**

- Providing unnecessary services.
- Billing for medical services not actually performed.
- Billing for unnecessary services.
- Billing more than once for the same service.
- Billing separately for services that legitimately should be one billing.
- Dispensing generic drugs but billing for brand-name drugs.
- Giving or accepting something of value (kickbacks), such as cash, gifts, or services, in return for medical services.
- Falsifying cost reports or claims.



Examples of **Medicaid Abuse** include:

- When someone lies about their medical condition.
- When someone lies about their eligibility.
- When someone forges prescriptions.
- When someone loans their Medicaid card to others.

At CCP employees are encouraged to report as per the outline below when any person or entity improperly receives from or avoids payment to the Federal government--tax fraud excepted. In summary, employees need to be cognizant of someone who:

- a. Knowingly presenting, or causing to be presented to the Government a false claim for payment;
- b. Knowingly making, using, or causing to be made or used, a false record or statement to get a false claim paid or approved by the government;
- c. Conspiring to defraud the Government by getting a false claim allowed or paid;
- d. Falsely certifying the type or amount of property to be used by the Government;
- e. Certifying receipt of property on a document without completely knowing that the information is true;
- f. Knowingly buying Government property from an unauthorized officer of the Government, and;
- g. Knowingly making, using, or causing to be made or used a false record to avoid, or decrease an obligation to pay or transmit property to the Government.

Any individual or entity associated with CCP including parents, family members, guardians, employees, support personnel, etc. engaging in any of the seven categories of prohibited actions listed in 31 U.S.C. 3729(a), including the submission of false claims to federally-funded health care programs, shall be liable for a civil penalty which currently is not less than \$5,500 and not more than \$11,000 per false claim, plus three times the amount of damages sustained by the federal government.

According to DC 54 also the U.S. Attorney General may bring an action under this law. In addition, the law provides that any "whistleblower" may bring an action under this act on his own behalf and for the United States Government. These actions, which must be filed in U.S. District Court, are known as "qui tam" actions. The Government, after reviewing the complaint and supporting evidence, may decide either to take over the action, or decline to do so, in which case the whistleblower may conduct the action. If either the Government or the whistleblower is successful, the whistleblower is entitled to receive a percentage of the recovery. If prosecuted by

the federal government, these qui tam actions are generally handled by the various U.S. Attorney's Offices, or by the U.S. Justice Department.



Whistleblower Protections:

31 U.S.C. 3730(h) provides that any employee who is subject to retaliation or discrimination by an employer in the terms and conditions of employment because the employee lawfully sought to take action or assist in taking action under this act “shall be entitled to all relief necessary to make the employee whole.” This includes reinstatement with seniority restored to what it would have been without the retaliation or discrimination, double the amount of back pay, interest on back pay, and compensation for any special damages sustained as a result of the employer’s actions, including litigation costs and reasonable attorney’s fees.

Procedure for Reporting Fraud, Waste or Abuse:

If anyone associated with CCP’s Adult Day Programs feels that Medicaid waste, fraud and/or abuse is possibly occurring from those who utilize the Program, or with those employed by the Program the following process is to be followed.

1. If you are an employee at and believe that there is fraud, waste or abuse in Medicaid, Medicare or other health care program you can do one of the following in addition to the current procedures that you follow:

- a. You may report directly to the DDD Compliance Officer, Division of Developmental Disabilities, P.O. Box 726, Trenton, NJ 08625, Phone: 800-626-6077.
- b. You can report your concerns to your supervisor. Your supervisor will then report this up the chain of command to be forwarded to the DDD Compliance Officer for review and appropriate action. Your supervisor(s) will keep your name confidential if you wish.
- c. You may also call the toll-free NJ Fraud and Abuse Hotline at 1-888-9FRAUD5 (1-888-937-2835) and report any information about fraud, waste or abuse in Medicaid, DDD Community Care Waiver, NJ Family Care, General Assistance or any other program for which the Division of Medical Assistance and Health Services (DMAHS) is responsible in whole or in part. You can either speak to the hotline operator or leave a message if the operator does not answer. You are not obligated to give your name if you do not want to. You might also receive a reward if your call leads to a recovery.
- d. You may call the toll-free hotline established by the federal Office of Inspector General in the U.S. Department of Health and Human Services to report any fraud, waste or abuse involving Medicare or any other health care program involving only federal funds. That hotline number is 1-800-HHS-TIPS (1-800-447-8477). For more information about this hotline and about other ways to contact the Office of Inspector General, you can go to <http://oig.hhs.gov/hotline.html>.

2. If you report fraud, waste or abuse, you are protected as a “whistleblower” under a New Jersey State Laws from any punishment or other retaliation. This state law is known as the “Conscientious



Employee Protection Act” and is described in the notice issued by the New Jersey Department of Labor and Workforce Development that can be found at [http://www.state.nj.us/labor/AD-270\(11X17\).pdf](http://www.state.nj.us/labor/AD-270(11X17).pdf).

3. If you are a “whistleblower”, you can also file a lawsuit called a “qui tam action” in federal court under a federal law known as the “Federal False Claims Act”. You can also file such an action in either federal or State court under the New Jersey False Claims Act. These laws also protect you from punishment or other retaliation, and if you are successful, you might get a share of the recovery. These laws are described in more detail in section V.D. of Division Circular 54.

If additional information is needed to interpret this policy or any other, you may contact the Adult Program’s Executive Director or Compliance Officer or the following Websites

Websites for Obtaining Additional Information:

Deficit Reduction Act – Public Law 109-171 www.gpoaccess.gov/plaws/index.html (insert public law 109-171 in the quick search box)

New Jersey Statutes www.njleg.state.nj.us

U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, Deficit Reduction Act <http://www.cms.hhs.gov/DeficitReductionAct/>

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DANIELLE'S AND STEVEN KOMNINOS' LAW



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: LIFE THREATENING EMERGENCIES

Effective Date: DC#20A-8/1/05

Date Issued: DC #20A-8/3/05

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP). All employees associated with CCP Adult Day Habilitation Program will receive the necessary training regarding Danielle's Law. This will at the minimum take place during a new employee orientation program and the on-line training required by the Division of Developmental Disabilities (DDD).

POLICY and PROCEDURE: Life threatening emergencies shall be addressed according to DC20A and Danielle's Law.

All staff at the Children's Center of Monmouth County are required to call 911 in the event of a life-threatening emergency.

Failure to call 911 in the event of a life-threatening emergency may result in disciplinary action against the employee and monetary fines as per Danielle's Law.

Failure to call 911 may result in the loss of renewal of approval from DDD

PURPOSE: To establish guidelines and criteria for the reporting of life-threatening emergencies

ACTIONS/REPORTING/STAFF RESPONSIBILITIES

Reporting

1. All Children's Center staff are responsible for calling 911 immediately in the event of a life-threatening emergency
2. Examples of life-threatening emergencies:
 - a. Unconsciousness
 - b. Persistent chest pain or discomfort
 - c. Not breathing or having trouble breathing
 - d. No signs of circulation
 - e. Severe bleeding
 - f. High fever



- g. Seizures that are unusual or multiple, last more than 5 minutes, result in injury, or occur in someone who is diabetic or pregnant
3. The staff member need not call 911 if he or she is certain that another staff member has called
4. If the staff member is unsure whether a medical condition such as an elevated temperature, seizure or other condition is life-threatening, he or she should call 911
5. **DNR (Do Not Resuscitate)**
 - a. If the person suffering the life-threatening emergency has a DNR order, the staff member is still obligated to call 911. The DNR order should be provided to emergency staff responding to the call
6. When only one staff member is present during a life-threatening emergency, that staff person should call 911, contact the nurse, and if trained, provide assistance
7. The 911 call shall include:
 - a. The address/location of the emergency
 - b. The telephone number where the emergency is located
 - c. A description of the problem, including whether the person is conscious and/or breathing
 - d. The name of the staff member calling 911
8. Once the call is made, the staff member should stay on the line
9. The CCP Health Office keeps a record of every 911 call and every failure to make a 911 call in a life-threatening emergency
10. Every 911 call and every failure to make a 911 call in the event of a life-threatening emergency shall be reported as a UIR (Unusual Incident Report)

Staff Training

1. Training for calling 911 and reporting life-threatening emergencies are incorporated into the mandated training program for all staff as per Danielle's Law.
2. Staff will be trained to call 911 during life-threatening emergencies upon hire and then annually

Monitoring

1. If it is determined that a staff member has violated Danielle's Law by not calling 911 for a life-threatening emergency, the staff shall be liable to a civil penalty of \$5000 for the first offense, \$10,000 for the second offense, and \$25,000 for the third and each subsequent offense. The staff member may appeal the notice of violation



Process for 911 Call

1. Building nurse will contact building secretary to:
 - a. Request Secretary to call 911
 - b. Relay nature of emergency so secretary can inform the 911 operator
2. Building secretary will call 911 and tell the 911 operator:
 - a. Where she is calling from
 - b. Nature of emergency
 - c. Location of the building where emergency personnel should report
 - d. Note time that 911 was called
3. After 911 has been called, the Secretary will notify:
 - a. Nurse- Ext 2173
 - b. Nancy Staplar- Ext 2129
 - c. Joe Merola- Ext. 2190
 - d. Laura Walsh – Ext 2137
4. Nancy Staplar or her designee will send Maintenance personnel to the parking lot to direct the emergency personnel to the appropriate building
5. Building nurse will provide the following information to 911 personnel:
 - a. Medications individual receives in program and other medications
 - b. Physician's name, address and phone number
 - c. Emergency information
 - d. Current Participant Health Record from SNAP program and copy of Emergency card (front and back)
 - e. Nurse will contact parent/guardian
6. If individual is to be transported to the hospital, the following will occur:
 - a. A staff member will escort the emergency medical personnel and the individual to the hospital and remain with him/her until Home Representative/Guardian arrives
 - b. Nurse will request the name of the hospital where the individual will be taken
 - c. Nurse will contact the Home Representative/Guardian to let them know the nature of the emergency, inform them their family member was transported to the hospital, the name of the hospital, phone number of the hospital, and instruct them to meet the individual at the hospital
 - d. Program Director/Supervisor will contact the Support Coordinator to let them know the individual was transported to the hospital
 - e. Program Director/Supervisor will submit an Unusual Incident Report
 - f. Nurse will log emergency in SNAP program
7. If the emergency occurs when there is no nurse available, the supervisor in charge will follow the same procedure. The nurse will log the information into the SNAP program at a later date/time



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: ABUSE, NEGLECT, EXPLOITATION

Effective Date: DC# 15 – 2/14/2006

DC#14-10/12/2007

Komnino's Law- 5/1/2018 **Revised:** 5/1/18

SCOPE & SUMMARY: This policy pertains to all employees, volunteers, interns, related services, etc. employed and/or associated with Children's Center Programs, LLC (CCP). This also pertains to all visitors, vendors, etc. that enter the CCP Campus and its buildings. CCP will make every effort to protect all enrolled participants in its Program(s) regarding abuse, neglect, and/or exploitation.

POLICY & PROCEDURES: Abuse, neglect and exploitation (as defined in DC#14) are strictly prohibited. Any suspected or witnessed abuse, neglect or exploitation must be addressed per DC#14, #15, and Komnino's Law. A person who fails to report but has reason to believe such an act has been committed, is considered a disorderly person and if convicted, may be fined \$350 per day that the abuse, neglect or exploitation was not reported.

Staff receives training regarding reporting of abuse, neglect and exploitation as part of their initial training requirements and annually thereafter.

ADULT PROTECTIVE SERVICES

All Children's Center Adult Program staff is required to report any incidents of suspected or witnessed abuse, neglect, or exploitation of an adult to Adult Protective Services (APS) (county office of the individual) or to the Division of Developmental Disabilities (DDD) # 1-800-832-9173 (for those living in DDD licensed homes). If the report of abuse, neglect or exploitation involves a Children's Center Programs staff member, then DDD is contacted at 1-800-832-9173.

Staff is immune from liability from making a report of adult abuse, neglect, or exploitation in good faith. The individual who witnesses or suspects the abuse, neglect or exploitation is the person responsible for ensuring that APS or DDD is informed.



Following a report of Adult abuse/neglect/exploitation, a trained APS social worker will have a meeting with the adult. During this meeting, the adult is interviewed in private. Every effort is made to determine the competence of the adult. Other individuals or agencies that have knowledge of the situation may also be interviewed. When the investigation is complete a report is submitted by the APS supervisor, who will then consult with the social worker and determine if the adult is at risk of abuse, neglect or exploitation.

All information generated from the investigation is confidential.

INVESTIGATION

Unusual Incident Reports

All individuals have a right to a safe supportive environment. However, even in a safe supportive environment, adverse events may occur. In such occurrences, The Children's Center Adult Program expects all staff to take immediate steps to protect the individual, to ensure prompt medical attention, when needed, and to work to prevent future occurrences. In order to accomplish this, such occurrences must be reported as unusual incidents and be appropriately followed up.

If there is an observation, allegation or suspicion of abuse, neglect or exploitation, the staff should report it to an administrator who will initiate an Unusual Incident Report with DDD. In addition to reporting the allegation to Adult Protective Services and DDD, the Children's Center Adult Program will immediately initiate an independent, internal investigation unless otherwise authorized by DDD or Adult Protective Services

All unusual incident investigations shall be conducted and reported in accordance with Division Circular #14.

All unusual incidents must be reported within the timeframes contained in DC#14 and staff must cooperate in any investigation

In addition to the reporting requirements of DDD, all reports required by NJ laws shall be made to the appropriate government protective and law enforcement agencies (refer to DC#14-sections V.E and F)

Law enforcement authorities shall be advised of any suspected criminal activities and documented in the UIR (refer to DC#14-sections V.E and F)

All Unusual Incident Reports and related investigation reports shall be confidential and maintained in accordance with Division Circular #30.



Komninos' Law

Per Komninos' Law, notification in person or by phone within two hours must be made by the service provider (caller to be determined depending on the circumstances by Management) to an individual's family representative/guardian of all major, moderate, and minor physical injuries related to incidents or allegations of abuse, neglect or exploitation. Guardian/Family representative notification is also required for incidents or allegations involving abuse, neglect and exploitation even if there is no injury.

If staff is witness to such, they are to immediately contact either the Room Supervisor, Building Supervisor, Program Supervisor, Program Director. Whoever was contacted shall in turn immediately inform the Executive Director.

The witness of the abuse, neglect, and/or exploitation will be asked to be a part of an immediate investigation led by one or more of the aforementioned management employees as designated by the Executive Director or his/her designee.

The Executive Director or his/her designee will then contact the family representative/guardian within the two-hour window required by law. Should there become a necessity to leave a voice mail message all applicable HIPPA requirements will be followed along with requesting a return phone call as soon as possible.

If there is no guardian, a family member who requests notification may be notified, unless the individual prohibits the family member from receiving this information. If there is a legitimate reason why the notification was not provided within two hours, it must be provided within eight hours with a written explanation of the cause for the delay provided to the guardian or family member and to DHS.

Three phone (or in person) attempts within two hours must be made to reach someone. If a phone message is left, it must be HIPAA compliant. Follow-up communication can be electronic.

The nurses maintain a record of all phone contacts with families pertaining to injury in the SNAP program.

The Critical Incident Management Unit (CIMU) will conduct injury verification in person within 48 hours of all incidents/allegations that occur involving abuse, neglect and/or exploitation. A guardian and program staff may be requested to participate in any interviews that occur. It is expected that CC Programs staff will cooperate fully with any investigations

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HIPPA PROTECTED HEALTH INFORMATION



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: INDIVIDUAL RECORDS

Effective Date: 10/1/15 Revised: 11/30/17, 3/30/19, 10/30/20

SCOPE & SUMMARY: This Policy pertains to all Children's Center Programs, LLC (CCP) enrolled participants and participants who were enrolled but are no longer with CCP. CCP will ensure the utmost of confidentiality and access to any and all participant's records. Children Center Programs has developed procedures for maintaining this confidentiality and access to as well as the retention and destruction of them. The policy is in accordance with Division Circulars 11 and 30.

POLICY and PROCEDURE:

Individual Record Confidentiality and Access

Active participant's individual records are maintained in locked cabinets within Adult Program campus buildings.

Access to file review is limited to the following program staff: Administrative staff who maintains them, Executive Director, Program Director, Program Supervisor, the enrolled individual and/or Home Representatives/Guardian.

Individual files are maintained in a secure and confidential manner and access is limited to select management staff.

Direct support staff is provided with The *Health and Nutrition Needs* and the *Safety and Support Needs* sections of the ISP for each program participant with whom they work directly. The direct support staff is required to review those sections and to maintain the information in their rooms (in a locked cabinet) as a reference

Employees are not to share confidential information with anyone outside of the program or with others who work in the program who do not require that information

All Participant records are maintained for 10 years after the most recent exit from the Program or the death of the person.



After 10 years, the paper records will be discarded by supervised shredding. Electronic records will also be deleted

Individual records are considered confidential and can only be released under the following circumstances:

- An individual or the Home Representative/Legal Guardian shall receive a copy within 30 days of receipt of a valid written authorization or shall be advised, in writing, of the reason for denial.
- Records of an individual shall be provided to other persons upon receipt of a valid written authorization by the individual or Home Representative/Guardian
- Records can be released without authorization under the following circumstances:
 - Upon judicial order
 - As directed by the Office of the Attorney General
 - DDD, if directly related to the administration of services
 - If the individual or guardian provides a list, in writing, of those individuals who have access to the file
 - If an individual is missing or staff is assisting law enforcement in location of a suspect, fugitive or material witness, the following information can be released
 - Name
 - Address
 - SS number
 - Type of injury
 - Date/time of treatment
 - Date/time of death
 - Physical description including a photograph
 - Other significant personal data
 - To an agency authorized to investigate allegations of abuse or neglect, for example, Adult Protective Services
- Records of a deceased individual can be released to the administrator, executor, or the next of kin (if there is not administrator or executor)
- Client records cannot be released in response to a subpoena issued by an attorney



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: PROTECTED HEALTH INFORMATION

Effective Date: 08/2018

SCOPE & SUMMARY: This policy pertains to all employees (full-time/part-time), volunteers, related service personnel, community support personnel, transportation, interns, and anyone associated with participants enrolled in the Adult Day Program.

POLICY: Children's Center Programs CCP is committed to handling Protected Health Information (PHI) of those that attend the Adult Day Program as confidential and private. CCP will obtain satisfactory assurances that anyone who has received authorization to review and/or utilize PHI will appropriately safeguard the information and not share it with anyone unauthorized to utilize it according to and in compliance with all applicable laws and regulations, including but not limited to HIPAA (Health Insurance Portability and Accountability Act) , and New Jersey Law.

PROCESS/PROCEDURE: Any health or demographic information that identifies a CCP Adult Program participant is considered confidential and private as per HIPAA of 1996. These HIPAA Privacy regulations require CCP as well as its related associates, to follow proper protocol that ensures the confidentiality and security of protected health information (PHI) of our participants when it is transferred, received, handled, or shared. This will apply to all forms of PHI, including, but not limited to, paper, oral, electronic, etc. Furthermore, only the minimum health information necessary to maintain process of the adult participant's Individualized Service Plan (ISP) is to be used or shared unless it is a situation needed for life threatening emergency.

As per the Department of Health and Human Services' Protected Health Information review The Privacy Rule protects all "*individually identifiable health information*" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information "protected health information (PHI)." <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>



“Individually identifiable health information” is information, including demographic data, that relates to:

- the individual's past, present or future physical or mental health or condition,
- the provision of health care to the individual, or
- the past, present, or future payment for the provision of health care to the individual,
- and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number).

For a thorough and complete overview of Health Information Privacy please refer to:

<https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>

and Department of Human Services, Division of Developmental Disabilities

Division Circular 53: HIPAA PRIVACY PRACTICES POLICIES
Policies and Procedures

Administrative

<file:///I:/Policies%20and%20Procedures/HIPAA%20Division%20Circular%2053%20.pdf>

Division Circular 53A: HIPAA PRIVACY PRACTICES POLICIES
Disclosures Policies and Procedures

Uses and

[https://www.state.nj.us/humanservices/ddd/documents/ddd%20web%20current/CIRCULARS/DC53A.p
df](https://www.state.nj.us/humanservices/ddd/documents/ddd%20web%20current/CIRCULARS/DC53A.pdf)

Division Circular 53B: HIPAA PRIVACY PRACTICES POLICIES
Rights Policies and Procedures

Client

<file:///I:/Policies%20and%20Procedures/HIPAA%20Division%20Circular%20DC53B.pdf>

Each Direct Support Services employee, related services, support services, transportation services, etc. employee of CCP's Adult Day Program will enter into a Confidentiality of Information Agreement prior to working with Adult Program participants.

Each already employed as of this date Direct Support Services employee, related services, support services, transportation services, etc. employee of CCP's Adult Day Program will enter into a Confidentiality of Information Agreement in order to maintain their position here at CCP.

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HUMAN RIGHTS



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: RIGHTS OF INDIVIDUALS SERVED (Human Rights)

Effective Date: 7/1/15; Rev. 9/2022

SCOPE & SUMMARY: This Policy pertains to all participants who received services from Children's Center Programs (CCP) Adult Habilitation Day Program. The Policy also pertains to those employees who work with, transport, service, or support participants of CCP.

POLICY/PROCEDURE

Individuals who receive services from the Division of Developmental Disabilities (DDD) have certain rights.

These rights are outlined by the NJ Department of Human Services Division of Developmental Disabilities (see below). They are shared with program participants as part of the admissions folder that is reviewed prior to starting in the program

STAFF

All employees of CCP must review DDD's Rights of Individual's Served information. New employees will be provided these Rights during their Employee Orientation Process. Existing Employees will be given these Rights through a mailing during the year. CCP will maintain documentation that staff has reviewed the information and that it is reviewed annually.

PARTICIPANTS/FAMILIES

The Rights of Individuals Served information will be provided to each family before the individual begins in the program. The family will document receipt and understanding of this information.

This information will be sent home yearly for review with individuals.



RIGHTS OF INDIVIDUALS SERVED

DDD believes that it is important for family members to understand the rights of those receiving services through the division

I have the right to:

- exercise my rights as a citizen
- privacy and to be treated with dignity and respect
- be believed and to have the ability to make my own decisions
- live as I choose, free from judgment, interference, or threat
- protection from physical, verbal, psychological, or sexual abuse, neglect or punishment
- equal employment opportunities, to work in the community, and fair payment for my work
- own, rent, or lease property
- live and receive services/supports in the least restrictive environment and to be free from restraint
- express human sexuality and receive appropriate training and education
- marry and have children
- presumption of legal competency in guardianship proceedings
- be free from unnecessary and excessive medication
- privacy during treatment and care of my personal needs
- confidentiality and privacy of my information and medical records
- access my personal resources and be free from personal and financial misuse or abuse
- utilize my New Jersey Individualized Service Plan (NJISP) and budget to meet my needs with Waiver program guidelines
- decide how to choose my services or to have someone I choose to help me with decisions within the guidelines of the Waiver program
- identify and invite who I want to participate in my service plan meetings.
- a fair hearing if, for any reason, my Waiver services are denied, reduced, suspended or terminated. An initial appeal shall be made in writing to:

**Division of Medical Assistance and Health Services (DMAHS) Fair Hearing Unit
PO Box 712**

Trenton, NJ 08625-0726

When living in a community residence licensed by the New Jersey Department of Human Services Office of Licensing, I have the right to have a key to lock/unlock my home and bedroom door, to have visitors of my choosing, make and receive phone calls, make my own schedule and access food at any time, unless otherwise determined in a documented person-centered process that I am part of.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: INDIVIDUAL RIGHTS

Effective Date: 05/27/2019

SCOPE & SUMMARY: This policy pertains to all participants enrolled in Children's center Program (CCP) Adult Day Habilitation Program, their Home Representatives/Guardians, and other advocates for our adults with disabilities.

POLICY/PROCEDURE: Human Rights issues shall include, but are not limited to, those listed in the "Rights of the Developmentally Disabled" as set forth in N.J.S.A. 30:6D-1 et seq. Revised as per 2013 New Jersey Revised Statutes Title 30 - INSTITUTIONS AND AGENCIES
Section 30:6D-5 - Rights of person receiving services for developmentally disabled at facility.
Universal Citation: NJ Rev Stat § 30:6D-5 (2013) 30:6D-5 Rights of person receiving services for developmentally disabled at facility.

In summary, Individuals with developmental disabilities are entitled to exercise the same human and civil rights enjoyed by other citizens. These rights shall not be limited or modified unless the individual's disability limits the exercise of these rights. Staff shall make efforts to assure that the human and civil rights of individuals with developmental disabilities are protected and exercised.

Individuals receiving services from the Division (DDD), Division staff, provider agency staff, parents, guardians, or other advocates for individuals may make referrals to the Human Rights Committee (HRC) through the HRC Chairperson.

Restrictions of an individual's rights shall be documented in the client record.

All staff and contract providers shall advocate for and protect the rights of individuals with developmental disabilities in programs for which they are responsible. Staff and contract service providers shall utilize the structured form of the HRC as an assist in protecting the rights of individuals with developmental disabilities.

For additional information please refer to DC # 5 (NJAC 10:41A) and Appendix # 3: New Jersey Department of Human Services Division of Developmental Disabilities Personal Rights and 2013 New Jersey Revised Statutes

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Title 30 - INSTITUTIONS AND AGENCIES Section 30:6D-5 - Rights of person receiving services for developmentally disabled at facility.

Universal Citation: NJ Rev Stat § 30:6D-5 (2013) 30:6D-5 Rights of person receiving services for developmentally disabled at facility.

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BEHAVIORAL SUPPORTS



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: BEHAVIORAL SUPPORTS

Effective Date: 7/1/2013; Rev. 3/28/2019

SCOPE & SUMMARY: This Policy pertains to all Children's Center Programs, LLC (CCP) enrolled participants. CCP shall ensure that all its enrolled participant's behavioral needs are met through supportive practices in accordance with Division Circulars 34, 5, 14, 18, 19 and 20. These guidelines are provided to home representatives/guardians as part of the initial interview process and admissions folder. CCP will follow the guidelines also set forth as stated in Section 17.2 to 17.2.2.5 of the Supports Program Policy and Procedures Manual.

OVERVIEW/GENERAL GUIDELINES/PROCEDURES: Behavioral Supports is described in the May 2018 Supports Program and Policy Manual (The Manual) as:

Individual and/or group counseling, behavioral interventions, diagnostic evaluations or consultations related to the individual's developmental disability and necessary for the individual to acquire or maintain appropriate interactions with others. Intervention modalities must relate to an identified challenging behavioral need of the individual. Specific criteria for remediation of the behavior shall be established. The provider(s) shall be identified in the Service Plan and shall have the minimum qualification level necessary to achieve the specific criteria for remediation. Behavioral Supports includes a complete assessment of the challenging behavior(s), development of a structured behavioral modification plan, implementation of the plan, ongoing training and supervision of caregivers and behavioral aides, and periodic reassessment of the plan

CCP has developed a policy/procedure manual that includes, but is not limited to the procedures listed below: (see addendum 1 & 2 located in Executive Director's and/or Designee's Office)

- Behavior support philosophy/policy statement
- Procedures for creating and implementing behavior support plans
- Staff training in the implementation of behavior support plans
- Oversight of behavior support plans
- Auditing of behavior support plans
- Procedures for implementing personal control techniques
- Training in the use of personal control techniques and monitoring process
- Procedures for utilizing (not highly restrictive) mechanical restraints
- Individuals whose behavior cannot be safely stabilized



- Individuals with a history of acting out sexually
- Individuals who make threats or bring dangerous items from home

CCP has developed Guidelines for Behavioral Issues:**Philosophy**

Discipline is typically viewed within considerations of morality, right and wrong, fairness, and other abstract concepts that relate to the individual's awareness of his behavior within the social context. It is the view of CCP that individuals in the program do not display discipline problems in the sense of engaging in inappropriate behavior without regard to its social implications. When a 21-year-old individual with Autism hits another individual, the behavior is a reflection of the disability's condition, not a lack of moral understanding of his action.

Consequently, CCP encourages its staff not to view inappropriate behavior as "disciplinary problems" but rather as behavior, which needs to be managed and/or modified so as to increase the individual's likelihood to function more successfully within the community. Strategies such as reinforcement, use of the daily schedule, frequent breaks, assistance with communicating, opportunities to participate in varied activities, and choices offered throughout the day are an integral part of the Adult Program for all participants.

Behavior support is the responsibility of the Adult Program and the Interdisciplinary Team (IDT). The IDT consists of the individual, home representative/guardian, BCBA and/or NADD certified staff, the Support Coordinator, and the Program Director and/or Supervisor. Any behavioral issues which interfere with an individual's functioning in the program or with the safety of others are reviewed with the IDT as they arise. All individual Behavior Support Plans are signed by the IDT and are submitted to the Support Coordinator for inclusion in the individual's file.

When environmental modifications and basic strategies are ineffective in managing challenging behaviors, Level I or Level II Behavior Support Plans are implemented. Data is maintained to assess strategy and Behavior Support Plan effectiveness and adjustments are made as deemed necessary. While CC Programs is approved to write Level III Behavior Support Plans, with the approval of the Behavior Management and the Human Rights committees, none are currently utilized.



On occasion an individual may exhibit severe acting out, aggression, unsafe, sexually acting out or other behaviors that significantly interfere with the individual or others in the program. In those unique situations, the Program Director may suspend the individual from the program pending an IDT meeting to be held within five working days of the suspension. Should this situation arise, the home representative/guardian and Support Coordinator are notified. There are rare occasions when discharge from the program is warranted due to behavioral issues that CCP is not equipped to address however, additional discussion will occur as to appropriateness of the Program compared to others for the individual prior to any final recommendation.

Policy Statement

One of the goals of the Adult Program is for those participants who struggle behaviorally to learn more appropriate options for having their needs met. Praise, reinforcement of appropriate behaviors/absence of reinforcement of inappropriate behaviors, separation/breaks from the group, relaxation activities, and restoration of a disrupted environment are examples of the strategies used to support participants in the Adult Program.

Those who exhibit aggression towards others or themselves are assisted through the incident by staff removal of the other participants and items from the vicinity and, where necessary, provision of a mat or soft item for protection. Personal Control Techniques and Time-Out are not utilized as part of the regular program. In the event of a significant occurrence of self-injury or aggression towards others, Personal Control Techniques may be used and/or 911 may be called.

Equipment that restricts partial or total freedom of movement such as helmets, transport harnesses, and Posey mitts is currently not used in the program to address behavioral issues.

Behaviors such as frequent acting out, self-injury, sexually acting out behavior, aggression towards others, verbal threats, bringing dangerous items from home, and repeated property damage, which cannot be remediated with reasonable strategies, may result in the temporary or permanent discontinuation of the individual's placement in the program. While it is the intent of the Adult Program to encourage a successful experience for all participants, there may be occasions when the needs of an individual cannot be met in the program.

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DUPLICATION

Home Representatives/Guardians are expected to share all pertinent behavioral information that might impact the individual's success in the program in advance of the individual's start date in the program and/or if issues arise once the individual is enrolled in the program. Examples of such behaviors include but are not limited to the following: current or prior history of elopement, self-injurious behavior, verbal threats, aggression, sexually acting out behavior, and/or property destruction.

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FINANCIAL MANAGEMENT



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: FINANACIAL MANAGEMENT/SUSTAINABILITY

Effective Date: 05/31/2019

SCOPE & SUMMARY: This policy pertains to the agency known as Children's Center Programs, LLC, its Board of Directors and any other agency employee with fiduciary responsibility of the Program.

POLICY: Solvency measures a company's ability to meet its financial obligations. Short-term and long-term company solvency has always been and continues to be a primary goal of Children's Center Programs CCP. Our fiscal year begins on July 1 and ends on June 30 of every calendar year.

At CCP its Board of Directors along with its Executive Director/CEO will formulate and follow good financial practices and review operations on a periodic basis consistent with applicable state and federal laws and GAAP.

CCP's Executive Director/CEO shall develop with assistance of other management personnel if needed a general annual budget for the operation of the organization on a yearly basis. The Board of Directors will review the budget report and subsequent recommendations of the Executive Director. Adoption of the budget will follow the By-Laws of CCP accordingly.

The Executive Director/CEO and Board of Directors as a whole shall act as an Audit Committee to fulfill its oversight responsibilities with respect to the audit of the organization's books and financial records and ensure a system of internal controls that the organization has established and followed since its inception. Appropriate and applicable financial measurements and ratios will be utilized to measure fiscal sustainability.

The Board shall hire an independent external licensed public accounting and audit company to audit the financial records and make subsequent recommendations for fiduciary responsibility and sustainability accordingly.

The external auditors, at their discretion, shall interact with management to implement and monitor the internal control structure and to take steps to ensure that the possible risks of fraud or embezzlement are mitigated. They shall also ensure that proper federal and state tax filings are completed timely.

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CCP's auditors shall understand the organization's internal controls and recommend policies if needed to be put into place.

CCP's auditors along with management will periodically review the organization's insurance coverage and determine its adequacy.

CCP and its auditors shall identify and review any conflict of interest, violations of ethics, any legal matters that could impact the financial health of the company and institute and oversee any special investigatory work if and as needed. Any necessary actions that need to take place will be discussed and recommended accordingly.

CCP shall cooperate by providing the outside auditor(s) and any governmental entity access to financial and transactional books and records of the organization as are necessary to carry out the audit and/or any investigatory function.



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: FINANCIAL REPORTING NOTIFICATIONS

Effective Date: 05/31/2019

SCOPE & SUMMARY: This policy pertains to the management of Children's Center Program (CCP) and their/its fiscal responsibility. As per Section 14.2 of the March 2019 Support Program Policies and Procedures Manual or the Division of Developmental Disabilities (Division), the following requirements will be followed.

POLICY: CCP shall notify the Division within 5 business days of receiving a draft or final audit report that contains a qualified opinion or an exception to an unqualified opinion (e.g., going concern, scope limitation, disagreement with management, GAAP compliance).

CCP shall notify the Division within 5 business days of the occurrence of any event that it reasonably anticipates will materially impact the business, assets, liabilities, financial condition or prospects of CCP. This notice shall specify the nature and duration of the event and what action(s) CCP intends to take to maintain operations and service delivery.

CCP shall notify the Division within 5 business days of the occurrence of any default or event of default on any financial instrument or other obligation. This notice shall specify the nature and duration of the default and what action(s) CCP intends to take to remedy the default.

CCP shall notify the Division within 5 business days of the occurrence of any material change in the amounts available through insurance policies or self-insurance reserves to cover risk and liabilities that are typical to service providers of a similar size and scope in the industry. This notice shall specify the nature and duration of the change and what action(s) CCP intends to take to mitigate the risk.

CCP shall notify the Division within 5 business days of the occurrence of the filing, or threat or intent to file, of any actions, suits or proceedings, including audit and tax findings, against CCP that (a) relate to services provided to the Division pursuant to the manual cited above, (b) relate to tangible or intangible property, including real estate, necessary for the delivery of services to the Division, or (c) are reasonably likely to be determined adversely to CCP and, if so adversely determined, could reasonably be expected to have a material impact on operations and service delivery. This notice shall specify the nature of the occurrence and what action(s) CCP intends to take to mitigate the risk.

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: ORGANIZATIONAL GOVERNANCE

Children's Center Programs Organizational Governance (chart) is available upon request as a hard copy.

A Hyperlink of the Organizational Chart appears below

<https://drive.google.com/file/d/1qw0sH4PazdcUKMXa9-xXb78HBKC8s3yF/view?usp=sharing>

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HOME REPRESENTATIVE GUARDIAN COMMUNICATION



**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: COMMUNICATION WITH INDIVIDUALS, FAMILIES, and GUARDIANS

Effective Date: Rev. 7/1/2011 Rev. 3/ 28/2019 Rev 1/27/23

SCOPE & SUMMARY: CCP understands that effective communication begins with recognizing the importance of listening to one another. Skillful, honest, transparent, and accurate information between CCP and individuals, Home Representatives and Guardians paves the way for an accurate summary and resolution of issues and concerns. Collective and confidential dialogue enhances the care provided with the utmost focus on the Participants who deserve to enjoy a safe, secure, and responsible environment without fear of retaliation. The Participants, Home Representatives, and Guardians must feel comfortable communicating even the most sensitive, personal information with CCP without embarrassment or fear of reprisal.

CCP's process regarding communication with Home Representatives and Guardians is shared in writing with families as part of the admissions folder and annually thereafter.

The following is a summary of CCP's processes related to communication.

Abuse/Neglect/Exploitation: All staff members are trained in Danielle's Law, Komninos' Law, and Abuse Neglect, and Exploitation before being fully employed and annually thereafter. Following their annual education an assessment is given to staff to measure retention of information and a mastery score must be attained prior to continuing employment. As part of that training, staff members are directed to report actual or suspected abuse, neglect and/or exploitation to the DDD hotline and to a CCP Program Supervisor or the Executive Director. CCP's Policies and Procedures manual includes separate policies on Danielle's Law, Komnino's Law and Abuse, Neglect and Exploitation.

Whistleblower Law: The Conscientious Employee Protection Act AKA The "Whistleblower Act" is mailed to every staff member on a yearly basis as part of a packet of "yearly proactive strategies" to protect the Program and its Participants. Staff members are asked to read, understand, and agree with each. CCP adheres to NJ law which prohibits an agency from taking any retaliatory action against an employee, participant, or their Home Representative/ Guardian because they provide information, testify, or refuse to participate in illegal activity that is in violation of any law or act or is fraudulent, criminal, or incompatible with a clear mandate or policy. CCP's policy on The Whistleblower Law can be found in the Policies and Procedures Manual.



Notes and Correspondences: All notes from Home Representatives/Guardians are read daily by the Room Supervisors or their designees. Responses to specific questions from Home Representatives/Guardians are provided; however, daily notes (regarding activities and non-essential information) are not routinely provided by the Room Supervisors. Home Representatives/Guardians can follow CCP at www.ccprogramsap.com

Email: Room Supervisors provide Home Representatives/Guardians with their work email addresses. Emails are read by the Room Supervisors daily and a response is generally generated within 24 hours. Daily email communication (regarding activities and non-essential information) is not provided by the Room Supervisors. CCP maintains a website and Facebook page where general information and photos are shared.

Phone Calls

If a Home Representative/Guardian has a question regarding daily operations such as transportation, schedule changes, etc., it is recommended that the Building Secretaries be contacted rather than the Room Supervisors.

CCP asks Home Representatives/Guardians to be cognizant of the fact that the primary concern of Room Supervisor's and DSP's is supporting the Participants and assisting each other in the maintenance of a safe, secure, activity- centered environment. Therefore, unless it is an emergency, phone messages are typically returned during lunch time or before or after program hours.

General Communication:

Program-wide communication is shared with Home Representatives/Guardians through direct e-mail, print copy carried by the Participant, and/or via the website and Facebook Page. CCP encourages Home Representatives/Guardians to inform the program should a postal address, e-mail address, emergency number, or a telephone contact number change.

Specific individual care communication, depending on the nature of it, might be addressed by any number of staff including Room Supervisor, Building Supervisor, Nurse, etc. If concerns exist after the initial or subsequent communication with one of these staff members, the individual should reach out to the Program Supervisor. The Executive Director becomes involved should the matter remain unresolved. If an individual has a concern or perception of retaliation of any kind, the Executive Director should be contacted directly or anonymously so that the issue can be thoroughly investigated. Additionally, the use of the Stakeholder Complaint Form is an option if an individual chooses not to email or call.



Customer Satisfaction:

Every 12 to 18 months a Customer Satisfaction Survey is sent to families asking for anonymous responses to a series of questions and statements regarding the program's performance in a variety of operational areas. Each survey also has a section for open-ended comments by families. One of the areas of questions set forth pertains to rating CCP's communication and responsiveness to families. Results of the survey are shared with all Home Representatives/ Guardians through e-mail and/or are posted on the Website.

Reporting alleged Incidents:

CCP is required to report to DDD, families and Support Coordinators all incidents or suspicions of abuse, neglect or exploitation. Upon receipt of an Incident Report, DDD reviews the report and categorizes it. Depending on the type and severity of an alleged incident, an investigation may be assigned to either the Office of Program Integrity and Accountability's Office of Investigation or Critical Incident Management Unit. It is required that guardians be informed of the result of any investigations involving their family member.

STAKEHOLDER COMPLAINT FORM

Our Stakeholders (Families, Guardians, Participants) have reasonable expectations of care and services to be provided while associated with Children’s Center Programs, LLC. (CCP) CCP intends to make available a means whereby disagreements and differences in areas of delivery, ethics, professional conduct, etc. may be brought forward in an effort to discuss and remedy. CCP is committed to addressing situations when your expectations are not met in a timely, reasonable, professional, and consistent manner.

Our Room Supervisors, Program Supervisor, Program Director and Executive Director are all available to assist you when you feel there are areas of concern regarding your family member. You are welcome to call us and speak about your issues or ask any questions at (732) 922-0228. Ask for the Adult Day Program. You may also fill in and return this form to: Adult Program Director, Children's Center Programs, 1115 Green Grove Road, Neptune, NJ 07753.

We thank you for your time and assure you every effort will be made to remedy your concerns while also meeting the goals of the Adult Program and your family member's Individualized Service Plan. Please take a moment and fill in the information below. Please feel free to use the other side if you need more room.

Name: _____ Date: _____
(Last) (First) Middle)

Address: _____

Family Member Enrolled: _____

DETAILS Of YOUR CONCERN: (Please be as specific as possible with the following)

Who are you concerned about?

What is your specific concern?

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STAKEHOLDER COMPLAINT FORM

When did this concern develop/occur?

Where did this concern occur?

Other information you wish to share?

Signature of Family Member/Guardian

Date Received: _____ **Reviewed By:** _____

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**CHILDREN'S CENTER PROGRAMS, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: EXCHANGE OF PARENT/GUARDIAN CONTACT INFORMATION

Effective Date: Kominino's Law- 5/1/2018

SCOPE & SUMMARY: This policy pertains to all Family Representatives/Guardians of all men and women enrolled in the Children's Center Programs, Adult Day Habilitation Program.

POLICY: Per Stephen Komninos' Law, Family Representatives/Guardians are given the option to provide and obtain contact information from Family Representatives/Guardians of other program participants in order to share experiences.

Family Representatives/Guardians are offered, in writing, the opportunity to provide contact information (Guardian/Family member name and phone number) to be shared with other families who also provide contact information. Those who are not interested in participating indicate that in writing

Once the list of those interested in being part of the contact list is established, it is sent home to all on the list. The list is updated and sent home quarterly.

Upon written request, Family Representatives/Guardians have the opportunity to opt in or out at any time.

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HOME and COMMUNITY BASED SERVICES



**CCP, LLC
ADULT DAY PROGRAM
POLICY & STANDARD OPERATING PROCEDURE**

TITLE: HOME & COMMUNITY BASED SERVICES

Effective Date: 1/9/23

SCOPE & SUMMARY: The Home and Community Based Settings Final Rule (HCBS) is a federal policy that was announced by the Centers for Medicare and Medicaid Services (CMS). The Final Rule dictates where and how Medicaid Home and community-based services are provided. It ensures that people receiving services and supports through Medicaid's HCBS programs have full access to the benefits of community living and are able to receive services in the most integrated settings. HCBS applies to those enrolled in the Supports and Community Care Programs. It applies to those who live in provider managed residential settings and those who attend day services settings.

Those attending Children's Center Programs (CCP) day service are included in the requirements set forth by the HCBS Settings Rule. This policy is a summary of the primary aspects of HCBS that apply to the day program setting.

POLICY: CCP has developed, maintained, and implemented policies that align with HCBS. HCBS requirements and guidelines are shared with all CCP staff and families. Regular training and supervision related to HCBS is provided

PURPOSE: CCP is committed to adhering to the principles of HCBS which promote autonomy, independence, informed choice making and person-centered thinking. The goal is to ensure that the HCBS settings rule is consistently implemented in a manner that is meaningful to the individuals receiving services

Some of the basic principles of HCBS that are applied within CCP are as follows:

- Opportunities for community integration-Participants are provided with opportunities to engage in the community
- Informed Choice-Individual's choices and preferences are supported and honored
- Rights and Autonomy-Individuals are made aware of their rights and freedoms in a number of areas and are respected for the decisions they make
- Accessible Environment-The environment is physically accessible to all individuals. Individuals have the ability to move freely about and not be confined to any one area of the setting

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Examples of HCBS applications within CCP (please note that these examples are not inclusive):

- Individuals attending the program:
 - can choose their own schedules and activities
 - can determine their personal associations
 - can choose where, when and with whom they eat
 - are free to have visitors
 - can use personal phones to text/make phone calls
 - have freedom to use personal money
 - have access to sit where desired (within group, while eating, etc.)
 - are provided with a plain language review of their rights and responsibilities and the grievance policy