



Program:	MRCI Map Dr.	
Address:	15 Map Dr.	
	Mankato, MN 56001	
Date plan developed:	8/2014	Revised 7/2019

EACH PROGRAM MUST ENSURE THAT:

- A. People receiving services are provided with an orientation to the program abuse prevention plan. This orientation must be within 24 hours of admission or within 72 hours for individuals who would benefit from a later orientation.
- B. The license holder's governing body or the governing body's delegated representative shall review the plan at least annually using the assessment factors in the plan and any substantiated maltreatment findings that occurred since the last review period. The governing body or the governing body's delegated representative shall revise the plan, if necessary, to reflect the review results.
- C. A copy of the program abuse prevention plan must be posted in a prominent place in the facility and be available, upon request, to mandated reporters, people receiving services, and legal representatives.
- D. If the assessment indicates that the vulnerable adult does not need specific risk reduction measures in addition to those identified in the program abuse prevention plan, the individual abuse prevention plan must document this determination.
- E. In addition to the program abuse prevention plan, an individual abuse prevention plan must be developed for each new person receiving services. A review of the individual abuse prevention plan must be done as part of the review of the program plan. The persons receiving services must participate in the development of the individual abuse prevention plan to the best of their abilities. All abuse prevention plans must be reviewed at least annually by the interdisciplinary team.

POPULATION ASSESSMENT:

1. Age range of persons receiving services:
The MRCI Map Dr program areas are licensed to serve individuals 18 or older. The current range of ages is from 23 years to 82 years.
2. What specific measures has the program taken to minimize the risk of abuse to people as related to the age of people receiving services?
MRCI trains all staff annually in the Vulnerable Adult Act (VAA). The staff will receive special training related to age discrimination. Any MRCI staff having knowledge of an incident of suspected maltreatment of a vulnerable adult will make a report either internally or externally. The reporter shall follow the procedure outlined in the policy regarding reporting of suspected Maltreatment of Vulnerable Adults which complies with the procedures outlined in the Vulnerable Adults Act.
All MRCI staff are trained on Vulnerable Adult and Maltreatment Reporting through the MAARC (Minnesota Adult Abuse Reporting Center) system. This is done prior to working with individuals and annually thereafter.
3. Gender of persons receiving services:
There are currently males and females receiving services at the Map Dr. location.
4. What specific measures has the program taken to minimize the risk of abuse to people related to the gender of people receiving services?

The work areas are a mixed group of male and female individuals and staff. The program staff are mindful of who is working together, so there isn't any disrespectful interactions. When personal cares are needed, the same gender will help the individuals whenever possible. Staff receive training in the Mandt System. Respectful interactions in all aspects of someone's day at MRCI is an important component of the training.

5. Describe the range of mental functioning of persons the program plans to serve:

MRCI serves individuals who have a diagnosis of a developmental disability (based on the psychological report) or a related condition. MRCI serves individuals who have mental functioning abilities ranging from mild-moderate-severe-profound. MRCI Map Dr. is also licensed to serve people who are funded via the CADI and BI waivers, whose presenting disability may include mental health and/or physical disabilities.

6. What specific measures has the program taken to minimize the risk of abuse to people as related to the mental functioning of people receiving services?

Each client has individual plans (Individual Abuse Prevention Plan and Self-Management Assessment among others) which outline their abilities and support needs from staff.

Staff receive client specific training regarding the unique needs of each individual. This training could be communication, visual cues, positive behavior support, vocational skills, this list is not all inclusive.

MRCI trains all staff annually in the Vulnerable Adult Act (VAA). Any MRCI staff having knowledge of an incident of suspected maltreatment of a vulnerable adult will make a report either internally or externally. The reporter shall follow the procedure outlined in the policy regarding reporting of suspected maltreatment of individuals which complies with the procedures outlined in the VAA.

All MRCI staff are trained on Vulnerable Adult and Maltreatment Reporting through the MAARC (Minnesota Adult Abuse Reporting Center) system. This is done prior to working with individuals and annually thereafter.

7. Describe the range of physical and emotional health of persons the program plans to serve:

Individuals served range in their physical and emotional abilities from needing no assistance from staff to needing full assistance from staff to implement their supports and procedures. Staff are trained to help people with supports based on a wide range of physical and emotional needs including but not limited to: mild to profound mental retardation, ADHD, aperts, asthma, autism, blindness, cerebral palsy, congenital conditions at birth, cyclothymic disorder, DCD, deafness, dementia, depression, diabetes, Down's Syndrome, fetal alcohol syndrome, Fragile X syndrome, hearing loss, heart defects, hepatitis B, personality disorders, obesity, ODD, organic brain syndrome, osteoarthritis, PICA, polydipsia, post-traumatic stress disorder, Prader-Willi, Quadra paresis, RAD, respiratory disorder, San Fillipo syndrome, schizophrenia, schizoaffective disorder; substance abuse, seizures, spastic quadriplegia, stroke, TBI. These individuals are participating in one of four different licensed spaces at Map Dr.

8. What specific measure has the program taken to minimize the risk of abuse to people as related to the physical and emotional health of people receiving services served?

Regarding any physical concerns for individuals, our MRCI Map Drive site is barrier free. The building is all one level, the doorways in the front of the building have electronic openings and the hallways are wide for easy navigation. Our staff receive training on disability awareness. They learn the best practice approach to working with individuals with these impairments. Additionally, the Mandt system trains staff on a variety of related topics in this area. We review physical presence of another person, respectful interactions, healthy relationships, review the crises cycle to help someone return to a calm state of mind. Each person has their own IAPP and SMA to review specific individual plans to support them. MRCI contracts with Health Counseling Service to train and guide staff on issues relating to medications and any treatments a person may need.

MRCI trains all staff in the Vulnerable Adult Act (VAA) reporting through the MAARC (Minnesota Adult Abuse Reporting Center) system. This is done prior to working with individuals and annually thereafter. Any MRCI staff having knowledge of an incident of suspected maltreatment of a vulnerable adult will make a report either internally or externally. The reporter shall follow the procedure outlined in the policy regarding reporting of suspected maltreatment of individuals which complies with the procedures outlined in the VAA.

9. Describe the range of adaptive/maladaptive behavior(s) of persons the program plans to serve:

The types of maladaptive behaviors can range from: gestures, verbal aggression, physical aggression (hitting, biting, throwing objects), explosive impulsive disorder; inappropriate sexual discussion or touch; false reporting; eloping from the site; dementia; attention deficit disorders; self-injurious behaviors.

10. How will the program reduce the potential of abuse and/or harm to people related to the adaptive/maladaptive behavior(s) of the people receiving services served?

MRCI trains all staff working in licensed areas Mandt Training. This training teaches staff specific conceptual skill areas: Building Healthy Relationships, Building Healthy Communication & Healthy Conflict Resolution. These concepts are the foundation of client interaction expectations. When working with challenging behavior situations, staff apply a positive behavior support technique approach. The staff are also taught Medical Risks of Restraint, Assisting, and Separating & Restraining Techniques. Over the last year we have worked with county case managers to receive consulting supports through DHS Community Support Services. We have then revised specific programming for individuals so they are more successful at MRCI.

MRCI trains all staff annually in the Vulnerable Adult Act (VAA). Any MRCI staff having knowledge of an incident of suspected maltreatment of a vulnerable adult will make a report either internally or externally. The reporter shall follow the procedure outlined in the policy regarding reporting of suspected maltreatment of individuals which complies with the procedures outlined in the VAA.

All MRCI staff are trained on Vulnerable Adult and Maltreatment Reporting through the MAARC (Minnesota Adult Abuse Reporting Center) system. This is done prior to working with individuals and annually thereafter.

11. Describe the need for specialized programs of care for persons the program plans to serve:

Programming at Map Dr. focuses on teaching vocational skills, self-help skills, communication modes, social skills, cognitive and adaptive skills, domestic skills, community integration and leisure time programs. The objective of the programming is to promote the individuals' independence and to support them to have a day that is full of meaningful opportunities and activities. The programming is specifically designed to meet the needs and interests of the clients based on Person Centered programming indicating the differences of what is important to the individual versus what is important for the individual. Some individuals live at residences governed by the Department of Health which requires certain types of active treatment to be provided for each individual.

12. What specific measures has the program taken to minimize the risk of abuse to people as related to the need for specialized programs of care for people receiving services?

In order to reduce the potential of abuse and/or harm to clients served, specifically regarding specialized programs of care, all clients receive care from trained staff. Our staff have had a criminal background study completed and have been trained on MRCI's policies and procedures related to specialized programs of care. Team Leaders provide hands on training with staff and monitor regularly for staff competency. Team Leaders work closely with the residential staff, guardians and county case managers to develop procedures and train staff when clients have new diagnosis that require specific cares or treatments. MRCI contracts with Health Counseling Services. Their nursing staff train our MRCI staff in medication administration and any specific medical treatments. The staff have annual retraining. HCS is well versed in 245D and CARF regulations.

Any other form of specialized care is indicated on each individual's Coordinated Service and Support Plan (CSSP). The Case Manager is aware of all coordinated services and specialty care in continuation of the individual services. Team Leaders communicate with the individuals IDT of any changes in care of services and regularly report as decided by the team, but at least to review all services and outcomes.

13. Describe the need for specific staff training to meet individual service needs:

All MRCI staff are trained on the following: First Aid, CPR, Universal Precautions, Safe Lifting, Medication Administration, Fire Prevention, Mandt and other annual trainings listed in MRCI staff training documents. Each Map Dr. area has a specific orientation packet which outlines client specific training, and DHS required training: food preparation/handling, infection control, Emergency Procedures, HIPAA, and related OSHA training; including competency tests. Some staff receive defensive driving training. Staff are completing many of the trainings through the College of Direct Support. Additional specific training unique to the area is provided as needed. Within 48 hours of hire, MRCI staff are trained on Vulnerable Adult and Maltreatment Reporting and can take the steps to prevent abuse, take corrective action, and immediately report maltreatment as directed by MRCI policy and procedures which is regulated by licensing requirements of the Department of Human Services (DHS).

Specific medical training for staff at MRCI Map Dr. is based on client specified services which include but are not limited to administering medication and treatments such as oxygen, simple preparation of food (lunches are provided by residential provider and come prepared properly) and beverages as ordered by physicians, catheterization and sensory integration and range of motion exercises. Staff are trained on client specified allergies, seizure protocol, choking, and chronic medical conditions; are able to identify symptoms and prevent further symptoms taking corrective action; and reporting emergency situations to qualified professionals as indicated on the procedures. There is a team of Emergency Response Staff who have completed specific medical training to respond in an emergency situation.

Staff are trained on safe transfer of individuals. General lifting techniques and as needed, assistive devices such as the Easy-stander, Hoyer lift, the use of transfer belts and each individual's personal equipment such as wheelchairs (regular and electric), walkers, arm braces, leg braces, ted-socks. Some individuals have sensory items such as massagers, weighted blankets, blood sugar check, and toothbrushing.

14. What specific measures has the program taken to minimize the risk of abuse to people as related to the need for specific staff training designed to meet individual service needs? (Any substantiated maltreatment findings that occurred since the last review? June 2018-June 2019)

In order to reduce the potential of abuse and/or harm to clients served, specifically regarding the need for specific staff training, MRCI staff are trained and oriented in the items required by MN Statutes, Chapter 245D; and on the above responsibilities in a specific sequential order to maximize competency. Training and orientation requires staff to read and comprehend materials then to model specific therapies and treatments as specified. Staff perform on the job training with a mentor (lead staff). Staff perform the routine duties and are given feedback throughout their training hours and during direct meetings with their supervisor. Ongoing training and record retention is kept in working files and by the Human Resources staff.

All MRCI staff are trained on Vulnerable Adult and Maltreatment Reporting and can take the steps to prevent abuse, take corrective action, and immediately report maltreatment as directed by MRCI policy and procedures which are regulated by licensing requirements of Department of Human Services (DHS). The Internal Review Committee/Human Rights Committee reviews any emergency use of manual restraints reported. They follow state and federal guidelines required for reporting maltreatment and vulnerable adult issues.

Specific safety training pertaining to MRCI Map Dr. includes: safety drills for fires, tornadoes, evacuations due to things like gas leaks, intruders, etc. Map Dr. has a Walkie-Talkie Protocol that aids in communication with the transportation department. MRCI has a Safety Coordinator who works with staff at MRCI Map Dr. to ensure the building is up to regulatory code and procedural drills are being completed by staff.

From June 2018 through June 2019, there have not been any substantiated maltreatment findings that occurred at the Map Dr. site.

15. Describe any knowledge of previous abuse that is relevant to minimizing the risk of abuse to people receiving services: (Were there any revisions made to reflect review results.)

MRCI Map Dr. staff participates in the construction of an Individual Abuse Prevention Plan, and retains that for each client enrolled in the licensed program. Staff use this as a primary teaching tool for awareness of individual vulnerabilities to abuse/neglect as well as outlining actionable plans to minimize that abuse/neglect. Each MRCI site also retains all client related records of abuse that are relevant to minimizing the risk of abuse to clientele. As appropriate, some of this content is used as a primary teaching tool for awareness of individual vulnerabilities to abuse.

Since there weren't any previous abuse situations over the last year, no revisions made to this plan.

16. What specific measures has the program taken to minimize the risk of abuse to people as related to the knowledge of previous abuse?

By retaining all client related records of abuse that are relevant to minimizing the risk of abuse to clientele, and using this information as a teaching tool for staff awareness of individual vulnerabilities to previous abuse, MRCI takes all reasonable and expected steps to reduce the potential of abuse and/or harm to clientele enrolled in our day program services. We believe that by training clientele in self-awareness, self-advocacy, rights and responsibilities, that their ability to participate in their own safety management is improved.

PHYSICAL PLANT ASSESSMENT:

1. Describe the condition and design of the facility as it relates to safety for the people receiving services:

The Map Dr program is located in a barrier-free building constructed in 1979. It is one story, and meets all life, fire, and safety codes. Mechanical assists in doorways increase access to all individuals needing assistance. Each individual is oriented to moving to areas of safety or exit in case of emergency or fire. The DT&H areas are co-located in the building with a small CADI program and EASE (Adult Day Service Licensed Program). Only the main door by the receptionist is open throughout the day. However, visitors only have access to the front lobby area, as the rest of the doors to the program and office areas require a key card or staff to buzz visitors through to the space. The rest of the doors in the building are locked during the day. Visitors must come in to the front desk and sign in. Staff members wear an ID badge and have an electronic key card for identity and so they may enter the building as needed. Visitors will wear a visitor badge. Any individual subject to wandering or entering unsafe areas of the building remain under licensed staff supervision throughout the day. Individuals are supervised when in areas of the building that are shared with persons from other programs and visitors.

2. What specific measures has the program taken to minimize the risk of abuse to people as related to the condition and design of the facility in terms of safety for people receiving services?

MRCI Map Dr. regularly trains staff and clients in the safe use of tools, machinery and resources within the building. Regular emergency drills (i.e., fire, medical, intruder, etc.) are completed, monitored and critiqued for efficient performance.

In the case of an event that prevents staff and clients from re-entering the building. Residential staff will be contacted so they know about the situation and where to pick people up that day. Supervisors will take emergency kits, attendance logs, and residential/home phone numbers with them. Staff members will assist with evacuation as assigned.

3. Describe any areas of the facility that are difficult to supervise:

The warehouse is an area that may be difficult to supervise. There are staff driving forklifts and moving work product frequently. The warehouse is not an area that is regularly accessed by clients in licensed programs.

At times, the smoking area is difficult to supervise. Several individuals access this area at a variety of time periods.

4. What specific measures has the program taken to minimize the risk of abuse to people as related to the areas of the facility that are difficult to supervise?

When it is necessary for clients to go into the warehouse, staff accompany them. Workers in the warehouse contact DT&H staff if there are ever clients who are in the area unattended.

Individuals who are able to advocate for themselves are able to access the smoking area without staff present. If someone needs staff support, staff will be present during their smoke time to provide verbal redirection as needed.

ENVIRONMENTAL ASSESSMENT:

1. Describe the location of the facility including information about the neighborhood and community that the facility is located:

The MRCI Map Dr. is a licensed program is located on 10 acres of land in the industrial park in the south east corner of Mankato. Industry is light and traffic is becoming increasingly busy in front of the building on Stadium Road. A round-a-bout to the east side of the building has helped keep traffic moving on that side of the building. There are housing and apartment developments surrounding the program. Across the street is a storage unit facility. About five blocks away is Mankato State University.

Whenever areas of potential hazard are reported, appropriate action will be taken within 24 hours to correct the hazard. If more time is required, the hazard will be secured to prevent access by a vulnerable adult.

2. What specific measures has the program taken to minimize the risk of abuse to people as related to the location of the facility, including factors about the neighborhood and community?

MRCI Map Dr. has an emergency plan that all staff are trained on (according to their required need to understand and implement). All clients receive a hybrid version training of this plan to fully orient each person to the greatest degree, according to their cognitive ability. All of this training is designed to minimize the potential of harm to people providing and receiving services, as that relates to the program area at Map Dr.

3. Describe the type of grounds and terrain that surround the facility:

The front of the building is a large asphalt parking lot. There are concrete side walks leading up to the doors of the building. There is a sitting bench to use if someone is waiting for their ride. There are concrete patios on each side of the building. On the program side of the building, it has a fenced in area for leisure opportunities. On the cafeteria side of the building there are concrete patios and picnic table seating. In back of the building are several loading dock doors for the semi trucks to load

and unload work product. Also in the back there is room for parking the busses. There is a fence surrounding the bus parking area. It is locked late evening until early morning.

4. What specific measures has the program taken to minimize the risk of abuse to people as related to the type of grounds and terrain that surround the facility?

At orientation, all clientele receive training on the safe use of the grounds and the extensions thereof. MRCI has an emergency plan on staff actions to take in the case of an event related to the inappropriate accessing of those areas (e.g., lost client search protocols).

5. Describe the type of internal programming provided at the program:

MRCI Map Dr. provides programming in the following areas: skills to complete vocational tasks in-house and in the community; soft skills to be a valuable employee; personal cares such as ADLs; social skills; leisure experiences; and educational curriculum. There is a computer lab that all clients may access as needed.

6. What specific measures has the program taken to minimize the risk of abuse to people through the type of internal programming provided at the program?

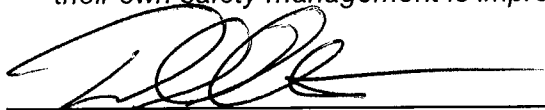
Staff are trained on each client's programming needs when they are first employed and every year after that. MRCI trains all staff annually in the Vulnerable Adult Act (VAA). Any MRCI staff having knowledge of an incident of suspected maltreatment of a vulnerable adult, will make a report either internally or externally. The reporter shall follow the procedure outlined in the policy regarding reporting of suspected maltreatment of clients which complies with the procedures outlined in the VAA.

7. Describe the program's staffing pattern:

MRCI Map Dr. provides the level of direct service support staff, supervision, assistance, and training necessary to ensure the health, safety, and protection of rights of each person; and to be able to implement the responsibilities assigned to the license holder in each person's coordinated service and support plan or identified in the coordinated service and support plan addendum, according to the requirements of chapter 245D. Each client has a staff ratio form completed by their service team and the required level of staffing is provided. The rule requires that a minimum staffing ratio of 1:10 is provided, unless the team agrees to a higher ratio; this would be documented in their Coordinated Service and Support Plan Addendum and staff ratio form.

8. What specific measures has the program taken to minimize the risk of abuse to people through the program's staffing pattern?

Providing the staffing patterns indicated on an individual basis by the DHS Service Need Ratio Form (as determined by the Service Team), adequately provides for proper supervision and supports for training. This staff ratio provides for the skill enhancement, program efficacy and for safety and adaptive skill building. MRCI trains all staff annually in the VAA. As a company, MRCI takes our responsibility to insulate our clientele from abuse and neglect very seriously. We also firmly believe that by training clientele in self-advocacy, rights and responsibilities, that their ability to participate in their own safety management is improved.



Duane Olenius, MRCI Board President

August 5, 2019

Date

The review of the plan used the assessment factors in the plan and any substantiated maltreatment findings that occurred since the last review. If necessary, the plan was revised to reflect the review results.

Legal Authority: Minn. Stat. § 245A.65, subd. 2