

Health & Safety Policies and Practices

Updated: January 1st, 2012

AREA: Administrative Policies and Practices

SUBJECT: Policy on Administrative Direction

Policy:

The Chief Executive Office, also called Executive Director, shall maintain primary responsibility for the administrative direction of the organization. In his/her absence, he/she shall designate a qualified individual to assume this responsibility.

Purpose:

To assure proper administrative direction of the organization at all times and provide for emergency situation, each program is provided with access to administrative decision making on a twenty-four (24) hour, seven (7) day basis to assist personnel in the care, treatment and training of supported individuals and provide direction and guidance to management staff. Such arrangements rely on competent professional staff to provide support, continuity and decision making when needed during the “off hours” of evenings, weekends and holidays. Administrators or appointed designee(s) are called upon to assist during those time segments when deemed necessary. The individual in charge is accountable for designating correct procedure in emergency problems and marshalling resources necessary to correct the problems. The individual in charge must be familiar with the policies of the agency and be able to represent the organization.

Procedures:

1. The Chief Executive Officer, also called Executive Director, shall be responsible for administrative direction of the organization.
2. In the absence of the Chief Executive Officer, the Executive Administrator shall assume this responsibility.
3. In his/her absence, other administrative personnel would be requested to assume responsibility.

AREA: Administrative Policies and Practices

SUBJECT: Use of Agency Property

Policy:

It shall be the policy of LIFE, Inc. that the use of any agency associated property shall be allowed only in reference to the cause of providing for the needs of those clients otherwise served by the agency.

Purpose:

This policy is designed to clarify that all property, either owned, rented or leased by the agency shall only be utilized by staff within the framework of providing services to clients. Staff are charged with the responsibility of maintaining in good working order, to the extent possible, said property. In addition, staff shall attempt to assure that said property is safeguarded against destruction, damage, misuse and theft.

Procedures:

1. Any and all equipment made available to staff is provided in order to facilitate the cause of providing services to clients of this agency. All such equipment, unless specifically approved by the Administrator, shall only be so utilized.
2. Telephones within the group home are available primarily for agency business use only. Any necessary or emergency phone calls made, of a personal nature, must be logged in. Personal calls made that result in long distance charges, shall be paid for by the person making said calls. Incoming personal calls made to staff, should likewise be only of the absolutely necessary or emergency type and therefore, short in duration.
3. All property (i.e.; that is found within the residencies and agency vehicles) shall be safeguarded by staff at all times. Doors to the residences shall be locked whenever no one is present and the agency's vehicles shall be locked when not in use while off group home property.
4. Any property found to be damaged, broken, destroyed or otherwise unusable shall be reported to either the Manager or the agency's Human Resources Department. Any property found to have been damaged by improper use or any property not utilized in the manner previously set forth, shall subject relevant staff to possible disciplinary action up to and including immediate discharge. In addition, if deemed appropriate by the Administrator, payment for damages, including the recovery of insurance policy deductible payments, shall be considered.
5. Use of agency computer and related hardware, software and network, shall include all matters covered above. In addition, staff are requested to comply with all guidelines noted on "Acceptable Use Computer Policy" sign off.

AREA: Administrative Policies and Practices

SUBJECT: Staff Meetings

Policy:

It is the policy of LIFE, Inc. for the staff at all programs to meet on a regular basis.

Purpose:

To allow staff to discuss such matters as support plans for individuals, specific problems and goals. To discuss matters of importance of the day-to-day operation of the program and how improvements, if needed, can be implemented.

Procedures:

1. Staff will meet with their Manager to discuss any matters of importance pertaining to themselves, supported individuals or the program.
2. These meetings shall be documented with notes.
3. Additional staff meetings will be called as necessitated.
4. Attendance at staff meetings is mandatory for all staff.

AREA: Administrative Policies and Procedures

SUBJECT: Staff Rendering Services Within Other Facilities

Purpose:

This policy is designed to address the administrative and liability issues relating to staff members rendering services in specifically designated work sites.

Policy:

It is the policy of LIFE, Inc. that any staff member hired to provide supportive services shall only render such services in designated sites. Therefore, unless otherwise approved by Administration, LIFE, Inc. staff who are “on the clock” should not provide support to clients in a facility that employs staff who are likewise charged with the responsibility of providing services (i.e., hospitals, day programs, schools).

Clientele receiving services at such sites should be left at and/or picked up at a designated location, such as an entrance or reception area.

AREA: Administrative Policies and Practices

SUBJECT: Driver's License

Policy:

All program staff whose job duties include transporting supported individuals will be required (unless specifically waived administratively) to possess a valid and current driver's license and in addition, shall maintain license in good standing relative to driving record.

Purpose:

To assist in providing assurance that all drivers who are transporting clients of agency programs are fully licensed to do so.

Procedure:

1. Depending upon position applied for, applicants will be informed if driver's license is a required qualification.
2. For those positions that do require a driver's license, it will be necessary that license and driving record be verified. Inability to obtain license, or to maintain license (suspended, revoked, or be disqualified from agency drivers insurance, etc.) could be reason to disqualify employee from further employment. Whenever possible and when deemed appropriate by the agency, every effort will be made to arrange for an alternative employment situation, where driving is not required.
3. Employees who are required to maintain a driver's license must inform their respective Manager if they have their license suspended, revoked, expire or otherwise lose their privilege to drive, in accordance with the law. From that point on the employee will obviously not be allowed to drive agency vehicles. Whenever possible and deemed appropriate by the agency, every effort will be made to arrange for an alternative employment situation, where driving is not required.

AREA: Health and Safety
SUBJECT: Staff/Client Relationships and Activities

Policy:

It is the policy of LIFE, Inc. that the management of conduct between staff and clients will ensure treatment of clients with respect and dignity.

Purpose:

To require a democratic style of interaction between staff and supported individuals.

Procedure:

Staff are required to treat clients with respect and dignity at all times. Primarily a democratic style of interaction is employed by staff in order to promote choice, decision making, growth and independence for the clients.

The clients are encouraged to make choices whenever possible as appropriate to their living situation and level of independence. Client conduct to be allowed and not allowed will be developed for each facility. To the extent possible clients will be included in the formulation of these standards.

All staff will be trained and monitored on an ongoing basis regarding their interactive style with clients. Failure to treat clients in the manner described may result in disciplinary action up to and including termination.

The agency prohibits the development and existence of un-appropriate personal relationships between supported individuals and employees of LIFE, Inc. This policy is designed to stress the importance of maintaining the professionalism of the supporter/supported relationship and not allow for individuals being taken advantage of in any way.

AREA: Health and Safety

SUBJECT: Procedures for Dealing with Injuries, Accidents and Illness

Policy:

It is the policy of LIFE, Inc. that all staff shall be afforded professional training support, enabling them to deal with a wide range of issues relative to injuries, accidents and illnesses. When confronted with such circumstances, it is our expectation that staff will utilize training in various first aid procedures toward the common goal of providing for the resident's safety and well being. The following guidelines should therefore be utilized to accomplish the desired results:

1. All life threatening and other serious situations should be dealt with by:
 - A. Rendering whatever emergency first aid procedure staff have been trained to provide as needed (do not exceed training parameters).
 - B. Call 911, either simultaneously with first aid rendered or immediately thereafter (depending upon circumstances), if resident does not respond to first aid.
 - C. Program Manager should be provided particulars regarding significant situations where it would be appropriate for them to know immediately and/or in the event that additional staffing is required to deal with a particular circumstance.
2. All other illness, injuries, accidents and the like are to be dealt with in the following manner:
 - A. Take vital signs to aid in the assessment of the condition.
 - B. Assessment should be written and recorded.
 - C. Follow established protocol and/or instructions to treat symptoms indicated by assessment.
 - D. Contact Manager if desired results of treatment are not obtained.

The Manager for each program will serve as the screener for the above noted and any other calls that become necessary from staff. In the event that the Manager is not available, staff can call one of the agency's registered nurses or agency Administrator.

AREA: Health & Safety

SUBJECT: Water Safety

Policy:

It is the policy of LIFE, Inc. that persons supported in the agency operated residential and affiliated programs only participate in swimming and/or other water related activities when doing so under direct supervision. This policy shall be implemented so long as persons are involved in activities sponsored by the agency and/or when support individuals are invited to participate in private functions through agency employees.

Purpose:

To assist in assuring the relative safety of persons for whom the agency is entrusted to provide services for.

Procedure:

Ideally, direct supervision will be supported by certified water safety personnel wherever possible. Individual assessments of swimming abilities will be conducted, with the assistance of qualified personnel whenever possible, in order to further determine what depth of water is safe for each person. In carrying out this policy, it is intended that direct supervision shall include a reasonable assessment by staff as to their capabilities to rescue a swimmer at all times, should it become necessary. Unless a certified water safety person is available, swimming and/or other water related activities should take place while staff is immediately available and prepared to enter the water if circumstances dictate.

AREA: Health & Safety

SUBJECT: Transportation Safety

Policy:

It is the policy of LIFE, Inc. that all persons transported in the agency provided vehicles are required to wear available seatbelts, harness devices, etc., whenever the vehicle is in motion.

Purpose:

To assist in providing assurance that all supported individuals transported in agency provided and private vehicles are provided the protection available as a result of use of appropriate belt, harness, etc.

Procedure:

1. Whenever an agency provided vehicle is to be utilized, all persons are required to wear appropriate belt, harness, etc.
2. In the event that a non-agency provided vehicle is utilized, all client passengers are required to wear available belt, harness, etc. Although recommended that drivers (and non-client passengers) of private vehicles utilize belts, harness, etc., it is beyond the agency's jurisdiction to require this.

AREA: Health & Safety

SUBJECT: Smoking Policy

Policy:

It is the policy of LIFE, Inc. that allowable smoking on part of supported individuals and/or staff will be confined to designated areas and that all other environmental areas will be kept smoke free.

Purpose:

To provide health and safety measures geared towards assuring that whatever allowable smoking takes place, the secondary effect upon others is minimized.

Procedure:

1. Smoking is to take place only in designated areas. Managers will determine those areas for their respective programs.
2. Smoking and eating are not permitted in agency vehicles.
3. While at community based functions, smoking is only allowed in the event that a designated area is available that allows a reasonable distance to exist between smoking and nonsmoking areas. On duty staff would only be allowed to smoke under this circumstance in compliance with agency break policy (see personnel policy supplemental section) since smoking in designated area would naturally result in their being separated from support responsibilities.

AREA: Health & Safety

SUBJECT: Grievance Procedures

Policy:

It is the policy of LIFE, Inc. that a grievance procedure is made available to clients and/or participants or their advocates as part of the overall effort to protect and assure the rights of those receiving services within all community residences and other programs operated by this agency.

Procedures:

1. Whenever a client, participant or their advocate has a concern or complaint regarding any aspect of services provided by an agency program, staff person or other agent, the matter is question should be discussed with the Manager or any other person in a position to rectify the situation.
2. In the event that client, participant or their advocate believes that a right has been violated and is not immediately corrected, a Client Grievance Report form should be presented to the Manager, an Agency Administrator or the Chairperson of LIFE, Inc.'s Human Rights Committee.
3. Any grievance filed will be acted upon immediately by the agency Administrator (or designee) along with the Chairperson of the Human Rights Committee. A response in writing will be provided within five (5) days outlining a summary of investigation, steps taken to resolve the grievance and a conclusion of findings.
4. In order to address the varying communication needs of supported individuals, the grievance procedure shall be explained to each person in the method most likely to be understood by that person. By law, in certain cases (those deemed incompetent), the explanation shall be to a person's legal guardian.
5. A person filing a grievance shall have the right to appeal the response provided to the Director of the Division of Developmental Disabilities and beyond, to the RI Superior Court.

AREA: Health & Safety

SUBJECT: Emergency Procedures – Plans for Fire

Policy:

Every residence and non-residence area must be prepared to deal with the occurrence of unexpected fire in a manner that ensures the safety of all individuals in the vicinity and the speedy reporting, control and extinguishing of the fire.

Purpose:

Emergency procedures for fire are necessary to save lives, prevent injury and minimize property damage.

Procedure:

1. The program Manager or other employee in charge will establish the optimal route or routes of egress to be taken by residents and staff from the area in the event that fire should so necessitate. This information will be posted and reviewed with each employee.
2. The program Manager or other employee in charge will establish a plan of action to be taken by staff to safely remove residents and employees from the area in the event that fire should so necessitate. This plan of action should include, but not be limited to; the specific client evacuation procedures outlined in the policy entitled “Evacuation of Residents”.
3. A major fire is defined as a fire in which life and/or property is endangered. A minor fire is defined as one that occurs in or is confined to a small area such as a waste paper basket and can be extinguished easily with a fire extinguisher.
4. In the occurrence of a major fire, the person in charge is to coordinate immediately the authorized plan of action involving prescribed route(s) of egress if appropriate, actions of personnel movement of residents and use of fire extinguishers.
5. As soon as possible, when the onset of a fire is detected, the person in charge or an employee nearby is to call the local fire department and report the fire.
6. In the event of a minor fire, employees are to take immediate measures, using a fire extinguisher if needed, to limit and quell the fire. The fire department is to be immediately notified of the situation whether the fire is extinguished or not.

AREA: Health & Safety

SUBJECT: Evacuation of Residents

Policy:

Evacuation drills shall include actual evacuation of residents to safe areas during at least 1 drill each quarter on each shift. There shall be special provisions for the evacuation of the physically handicapped, if and when individuals of that description reside in the home.

Purpose:

Periodic actual evacuation drills of residents will better maintain employee sensitivity to the possible need for emergency action and foster skill in providing it.

Procedure:

Not less than annually, the house Manager will provide for actual evacuation according to the following procedures, submitting a written report to the Administrator with a copy to remain in the house. All accidents shall be investigated and corrective action shall be taken.

1. Have ambulatory clients form a chain and follow the leader to a safe area.
2. During the evacuation, caution the clients not to break rank; proceed in an orderly fashion to the evacuation area.
3. Bedridden clients are transferred to mattresses which can be dragged along the floor facilitating evacuation or blankets can be used which are more flexible.
4. Use fire escapes only as a last resort.
5. The person in charge is responsible for a final check of client's rooms, bathrooms and secluded areas of the home, which should be checked for clients when evacuating. DO NOT OPEN HOT DOORS.
6. If it is necessary to enter a smoke filled room, use a damp cloth over nose and mouth and keep face close to the floor.
7. An accurate resident count should be made immediately, if at all possible, or as soon thereafter as circumstances will permit.
8. Shut doors and windows where convenient also turn off all open flames.
9. Employees should stay with the residents at the evacuation area to calm and reassure them and allay their fears.

AREA: Health & Safety

SUBJECT: Emergency Preparation and Procedures

Policy:

It is the policy of LIFE, Inc. to be prepared for any and all emergencies including severe weather and other natural disaster occurrences.

Purpose:

A plan shall be in place to provide for the care and support needs of those individuals the agency supports on a twenty four hour basis.

Emergency Supplies:

1. Emergency supplies, including food and drinking water that can be stored without refrigeration, must be kept on hand at all times. Supplies should be able to sustain the household for at least three (3) days.
2. Supply items should be individually dated as to expiration and rotated with replacements prior to that date. Once replenished, items are available for household use.
3. Program Manager should conduct and document inventory of supplies at least quarterly. At that time, arrangements can be made to replenish any items scheduled to expire within the next quarter.
4. In the event that any emergency supply items are used, Manager should be notified and items replaced within forty eight (48) hours.

Environmental Preparation:

1. In the event of severe weather forecast, Manager should examine yard area of home and remove any loose furniture and other items that could be uplifted in strong wind.
2. Maintenance staff should be contacted for assistance as needed including the placement of plywood on larger windows.
3. Manager should assist maintenance staff in regular inspection of windows to assure they remain in good and working order.
4. Candles, propane heaters and other flammable items are prohibited from use in group homes. Their use is strongly recommended against in supported individual's apartments.

Staffing:

1. Program Manager and Area Directors should be in contact with one another once a report of severe weather is available to discuss staffing needs and arrangements for severe weather.
2. Regular staffing patterns shall be maintained during severe weather and other emergencies to the extent possible. All support staff should be prepared to remain at work until replacement staff are able to arrive. In certain situations,

where severe weather may isolate a home, additional staffing will be approved and/or staff invited to arrive early to assist in emergencies.

3. All clients and staff are to remain indoor during severe weather activity and day program activities will generally be cancelled. Staff for those programs may be transferred to residential sites to assist in emergencies. Any recreational activities and other optional events will also be cancelled.
4. Staff should assist supported individuals to the safest areas of the home. They should be familiar with the operation of emergency generators (where available). Should it become necessary to evacuate, staff would be expected to accompany supported individuals to another location.
5. The Program Manager will attempt to ensure that a primary care physician or on-call is available should the need for one arise.
6. Should severe weather present itself as snow or ice, staff should do the following:
 - A. Periodically (every ½ hour to every hour, depending on severity of storm) sweep or otherwise clear and spread ice melt or similar product on necessary walkways, stairs and emergency exits.
 - B. Keep agency vehicles (window areas) clear and move them to allow driveway/parking areas to be plowed.

AREA: Health & Safety

SUBJECT: Opportunity for Religious Freedom

Policy:

LIFE, Inc. believes that all clients should have every opportunity to attend religious services of their faith and that religion is a necessary essential to the spiritual growth of the clients. Attendance at services should be encouraged rather than forced and every effort shall be made to aid clients in seeking and attending their preferred house of worship.

Procedures:

1. Clients have their choice of religious services from any available faith in the local area and are encouraged to attend.
2. Transportation to the services may be:
 - A. On public transportation, with or without assistance, as appropriate.
 - B. Provided by the agency.
 - C. Arranged through the religious group of their affiliation.
3. The above suggestions also apply to religious activities other than attendance at weekly services.
4. Attendance in community houses of worship is a part of the normalization process and will be treated as such and as one of the services offered by the community to be enjoyed by its clients.

AREA: Administrative Policies and Procedures

SUBJECT: Governance

Policy:

This agency, as a nonprofit organization, shall be governed by a Board of Trustees, which shall maintain oversight responsibilities for the accomplishment of the organization's legally stated mission and purposes.

Purpose:

LIFE, Inc., as a publicly supported nonprofit and tax exempt organization, is chartered to accomplish a specific charitable cause: to support individuals with developmental disabilities to become as capable as possible by increasing their independence while participating as integrated members of society through inclusion within the community. This support shall be rendered by providing services of an individual's choosing and/or agreement as specified within their individualized support plan and to their families.

Procedures:

1. The agency shall have a written Policy and Procedures Manual which shall be implemented in all programs, reviewed and updated as necessary.
2. The agency shall have an organized governing Board responsible for the oversight of the agency's management and operations. This shall include approving major program changes and financial decisions as recommended by the Executive Director.
3. The Board shall include persons who represent the greater community, including consumer and family participation. Efforts shall be made to recruit members who represent the cultural diversity of the community. At least $\frac{1}{4}$ of the Board slots shall be set aside for consumers (supported individuals and/or family members).
4. The organization shall have written by laws as required by law which establishes the Board, membership in the corporation and the relationship between the Executive Director, the Board and the community. These by laws shall specify the responsibilities of the Board and outline the method used to evaluate the performance of the Executive Director.
5. The Board shall ensure that the agency complies with all applicable components of the Americans with Disabilities Act and other applicable State and Federal law.
6. The Board shall ensure that the agency complies with all requirements of the State and Federal Government for managed care.
7. By laws shall stipulate at least four (4) regular meetings of the Board each year and shall describe qualifications for membership, forum for meetings and require recording of minutes.
8. The Board shall adapt an annual budget, receive written reports of income and expenditures (by program) and receive a copy of the agency's annual audit.
9. The Board shall receive regular reports as to the agency's progress with established goals and in accomplishing its mission. Included in these progress reports, the Board will receive and participate in the annual evaluation of the organization.

AREA: Administrative Policies and Procedures

SUBJECT: Human Rights Committee

Policy:

There shall be an established Human Rights Committee which meets regularly and independently promotes a variety of concepts relative to rights of supported individuals.

Purpose:

To assist in the agency's philosophy, intent and to assure the human rights of individuals supported by the agency.

Procedures:

1. The agency shall assist in developing a Human Rights Committee comprised of family members of persons with disabilities, advocates, volunteers and individuals who have experience or training in behavioral treatment and members of the community at large.
2. The agency shall utilize the Committee to develop strategies for promoting human rights and to review, approve and monitor the outcomes of interventions contained within individual plans which might infringe upon a person's liberty and/or that involve risks to the person that include behavioral treatment, psychotropic medications and other procedures to address maladaptive behaviors.
3. Grievances filed with the agency shall be presented to the chair of the Human Rights Committee who shall assist in the resolution of said grievance.
4. The Committee shall provide input into the agency's policies pertaining to human rights including staff interventions on behavioral programming.
5. Members of the Human Rights Committee shall receive training in the areas of human rights and their role as a Committee as well as the role of the state Office of Quality Assurance with respect to monitoring and/or investigating human rights violations.
6. The Chairperson of the Committee shall be notified of circumstances involving an alleged violation of a supported individual's human rights.
7. The Chairperson of the Committee shall be informed of any investigation and shall receive a copy of any final investigation report from the agency and/or the Office of Quality Assurance. This report shall include any action taken by the agency in response, designed to protect that person or other individuals supported by the agency from further violations of rights in a similar manner.
8. The Human Rights Committee shall be responsible for establishing written guidelines describing the role and responsibilities of the Committee.
9. The Committee shall develop procedures for selecting a Chairperson, vice-chair and other necessary officers and shall establish procedures to replace outgoing members and officers.
10. The Human Rights Committee shall meet at least every two months and shall maintain records of their decisions.

AREA: Health and Safety

SUBJECT: Prohibition of Corporal Punishment, Abuse, Neglect or Mistreatment of Clients

Policy:

Corporal punishment and abuse of clients either by intentional or unintentional action is prohibited. Abuse includes a wide area of unacceptable employee behaviors, for example; unwarranted physical force in dealing with clients or deliberate and unwarranted withdrawals or withholding of a necessary service or substance. Abuse can also be perpetrated by one client toward another, in which case the victimized client must be afforded measures of protection and prevention.

Purpose:

Prohibition of corporal punishment and abuse is essential to better safeguard client's well being. This policy is intended to ensure that clients will not be subjected to physical, verbal, sexual, psychological or any other form of abuse.

Procedure:

1. The management of client behavior will take place with written policy.
2. This policy prohibits the abuse, neglect or mistreatment of clients.
3. Definition:
 - A. Abuse means inappropriate physical contact which harms or is likely to harm a client and shall mean and include any form of sexual misconduct.
 - B. Mistreatment means the inappropriate use of medications, isolation or unnecessary use of physical or chemical restraint which harms or is likely to harm a client.
 - C. Neglect means the intentional failure to provide treatment and services necessary to maintain the health and safety of a client.
4. Any person who has reason to believe that a client has been abused, neglected or mistreated has an individual responsibility to report that to the Office of Quality Assurance within 24 hours or by the end of the next business day. Failure to report abuse, neglect or mistreatment is a misdemeanor, punishable by law.
5. If any report is made of suspected client abuse, an authority learning of such report, specifically the Administrator, Social Worker or Program Manager will immediately respond to take action to protect the client from further potential abuse as deemed necessary.
6. If a reasonable determination that abuse may have occurred is made, he will immediately ensure the safety of any client(s) involved, summoning appropriate medical attention if needed and notify the family and/or legal guardian as deemed appropriate, presenting the relevant facts.
7. Any resultant disciplinary action will emerge from consideration of mandatory personnel procedures, the substance of all reports from police investigations and from employees and the judgment of LIFE, Inc. administrative authorities.

8. When abuse is directed by one client towards another, the appropriate authority learning of such abuse, specifically the Program Manager, will immediately assess the situation and determine the facts involved.
9. The investigating employee will take every precaution to ensure that safety and well being of any client(s) subject to the abuse of any other client(s) particularly altering personnel is so warranted.
10. The Administrator, Program Manager and appropriate staff share the responsibility, as needed, for systemically responding to potential or overt threats to client well being made by other clients, ensuring in each instance. .
 - A. Investigation of causes.
 - B. Observation and monitoring to avoid recurrence.
 - C. Development of specific plans of care to correct inappropriate client behavior which threatens other clients.

Mandatory Reporting in Rhode Island

All adults mandated reporters:

- * 40-11-6: If there is cause to suspect that a child is abused or neglected or if a child under the age of 12 years is suffering from any sexually transmitted disease the incident must be reported to the police and the Department for Children, Youth and Families.
- * 42-66-8: If there is reasonable cause to believe that a person 60 years or older has been abused, neglected, exploited or abandoned, a report must be made to the Department of Elderly Affairs.
- * 11-5-12: Awareness of the abuse or neglect of adults with severe impairments, mental, physical or both, must be reported to the police.

Hospital Staff, mandated reporters:

- * 11-47-48: Any treatment of a bullet wound, gunshot wound, powder burn or any other injury arising from or caused by the discharge of a gun, pistol or other firearm shall be reported to the police.

Department for Children, Youth and Families: 1-800-742-4453

Department for Elderly Affairs: 1-800-322-2880

AREA: Health and Safety

SUBJECT: Emergency Medical Care Permits

Policy:

Written consent of the resident, if competent or his/her guardian shall be required on an emergency medical care permit.

Purpose:

To assure that the resident will receive proper medical treatment in an emergency situation.

Procedures:

1. If a client is a minor, then an emergency medical care permit will be sent to the resident's parents and/or legal guardian for signature to allow the facility to act in their place in an emergency situation.
2. The signed emergency medical care permit will be in effect from the date of signature for a two year period. The permit will be filed in the client's record in the medical section.

AREA: Administrative Policies and Practices

SUBJECT: Communication Between Parents/Legal Guardian/Interested Next of Kin

Policy:

It is the policy of LIFE, Inc. that there will be open and honest communication between parents/legal guardian/interested next of kin and the agency pertaining to the clients.

Procedures:

1. Parents/legal guardian/interested next of kin will be informed in writing of any team review to be held pertaining to the client(s). Also, if parents/legal guardian/interested next of kin are unable to attend but request summary of the review, one will be provided.
2. A copy of the home's policy regarding resident rights and responsibilities will be sent to the parents/legal guardian/interested next of kin, upon request, displaying those rights and responsibilities that were explained to him/her.
3. An emergency medical care permit will be sent to the parents/legal guardian if the resident is a minor or if he/she had been declared incompetent by a court of law.
4. Legal guardians will be informed that they have a right to question any decisions made regarding the person, although the final say in specific clinical decisions would generally be made by clinicians especially in emergency and/or life threatening situations.
5. As part of the individual's annual review (IPP) process, information will be provided that includes the role and responsibilities of the LIFE, Inc. sponsored Human Rights Committee.

AREA: Health & Safety

SUBJECT: Human Rights

Policy:

In the interest of safeguarding the basic human rights of individuals supported by the agency, it is the policy of LIFE, Inc. to develop and enforce practices which enhance and promote those rights.

Procedures:

The agency maintains policies and procedures which are intended to provide protection to supported individuals in areas that include:

- Financial exploitation
- Staff client relationships
- Grievance procedures
- Opportunities for religious freedom
- Prohibition of corporal punishment, abuse, neglect, mistreatment
- Behavioral intervention procedures including restraints
- Participation in research
- Informed consent
- Confidentiality
- Human Rights Committee role
- Participation in annual review planning
- Sexuality

In addition to the above, the agency utilizes the Professional Core Team review process which allows ongoing review of all recommendations from clinicians to be scrutinized by other professionals. This check and balance practice attempts to ensure that all supports are multi-disciplinary in their development and holistic in their nature. Supported individuals or their guardians are provided with a comprehensive list of their rights as part of the annual meeting process and documentation (see attached).

On an annual basis, consumers or guardians are informed of the existence of the LIFE, Inc. sponsored Human Rights Committee, including its roles and responsibilities relative to protecting basic human rights. Each supported individual shall be supplied with the name and telephone number of the Chairperson of the LIFE, Inc. sponsored Human Rights Committee.

AREA: Administrative Policies and Practices

SUBJECT: Staff Training

Policy:

It is the policy of LIFE, Inc. to determine the specific training needs for all employees and to provide and/or require that training.

Purpose:

To establish the training needs for the array of positions held within the agency in an attempt to assure that all employees receive comprehensive training pertaining to their position.

Procedures:

- All employees shall receive a copy of their respective job description and be oriented relative to the expectations contained within. This orientation shall include information as to how their role and responsibilities participate in the overall teamwork process of supporting individuals with developmental disabilities.
- Orientation training for all staff includes the confidentiality of information under HIPAA and other statutes; detecting, preventing and necessary reporting procedures relative to abuse, neglect, mistreatment or other human rights violations.
- Orientation training includes information relative to the existence of the LIFE, Inc. sponsored Human Rights Committee and Rhode Island's Office of Quality Assurance and the respective role of those entities.
- Orientation training includes being informed about the agency's mission, philosophy and purpose which includes the goals of service quality and service accomplishments.
- Orientation training includes an overview of the Americans with Disabilities Act and Rhode Island's system of managed care. In addition to the above, staff working directly with clients will receive additional training in areas that include: teaching skills and strategies to assist supported individuals to learn, as well as procedures in providing basic first aid and other health related issues, crisis prevention and intervention techniques, dealing with emergency situations and environmental and workplace safety measures.

AREA: Administrative Policies and Practices

SUBJECT: Consumer Satisfaction

Policy:

It is the policy of LIFE, Inc. to regularly assess the satisfaction of the consumers (or their guardians) relative to the supports we provide to them.

Purpose:

To assist in the evaluation of our support provisions and to help provide direction to us in constantly upgrading our efforts in order to maintain our reputation as a “cutting edge” agency with ongoing concern for providing consumer centered supports.

Procedures:

- Upon admission to an agency sponsored residence or other support offering, individuals or their guardians will be apprised of their choice to receive any and all of the supports they are seeking from either LIFE, Inc. or any other alternative provider.
- During the course of the agency rendering supports to an individual, they or their guardians are encouraged to maintain an open communication with the agency relative to their ongoing satisfaction with agency supports. Included in this process is the opportunity to file a grievance relative to matters of concern on the part of the supported individual.
- Throughout their acceptance of supports, individuals or their guardians will be reminded of the option they maintain to transfer supports to another provider should they ever be dissatisfied with agency supports.
- On at least an annual basis, the agency shall more formally assess consumer satisfaction through the use of the P.A.L. Satisfaction Indicator Survey tool.
- Any and all information obtained through the above process, would be utilized in the agency’s regular self evaluation of its programs and supports. Adjustments and updates of support provisions result from this process.

AREA: Health & Safety

SUBJECT: Financial Exploitation

Policy:

It is the policy of LIFE, Inc. that all personal account funds made available to program participants and residents for which assistance is necessary in handling, should be completely and accurately accounted for in order to ensure that no employee of the organization is able to financially exploit and/or misuse those funds.

Procedures:

See related policies governing:

- Account Maintenance
- Personal Funds Management

In addition to the above, it is the policy of LIFE, Inc. that no employee of the agency shall be named as a beneficiary on any insurance policy covering a program participant.

AREA: Individual Finances

SUBJECT: Account Maintenance

Policy:

A written accounting is maintained and available to individuals (or guardians if applicable) on an ongoing basis for each supported individual who has requested “complete” assistance in managing their personal funds.

Purpose:

A sound and consistent approach to individual personal funds management is essential in the safeguarding of personal funds and other assets.

Procedures:

- All funds received by, or on behalf of a supported individual who is receiving complete assistance with funds management, will be directed to the Program Manager for deposit in ledger kept for each individual. This ledger shall contain necessary detail including source, amount and date entered into account.
- Requests for disbursement of funds generally originate from the individual (or applicable guardian) or is spent through ongoing activities participated in. Records of all disbursements, including weekly budget amounts, are recorded in ledger. Manager remains responsible for the oversight of all expenditures and most will be (except for some activity expenditures) verified by receipt. The ledger shall contain necessary detail including item(s) purchased, amount and date recorded.
- Monthly balances are maintained by completion of the Individual Accountability Report. This report includes a total of ledger balances, checkbook and savings balances, cash on hand in personal needs account and un-ledgered receipts.
- Quarterly statements of account balances will be provided to individuals (or applicable guardians) upon request. At any other time, accounting records are available for inspection and review.
- Program managers and assistant managers shall be responsible for the safe keeping of supported individual’s funds that until dispensed shall be kept locked away. As such, they shall accept responsibility for replacement of missing funds in most cases.

AREA: Individual Finances

SUBJECT: Personal Funds Management

Policy:

It is the policy of LIFE, Inc. that supported individuals will be provided choice of how their personal funds and assets are to be managed. This decision will be documented in written form.

Purpose:

To provide choices and options relative to how a supported individual's personal finances might be handled and accounted for.

Procedures:

- Upon commencement of residential support by the agency, the individual (or guardian if applicable) shall be offered the options contained on the Personal Funds Accountability Options form relating to the handling of personal funds.
- At any time while supported, the individual, or guardian if applicable, may decide to make a change in how personal funds are to be handled.
- The current choice selected will be documented on the Personal Funds Accountability form and maintained in the individual's record.
- Should the individual (or applicable guardian) decide upon complete assistance, then specific procedures (see attached) will be in place to assure ongoing knowledge, disclosure and accountability.

AREA: Health & Safety

SUBJECT: Lifting

POLICY: It is the policy of L.I.F.E., Inc that the primary means of lifting shall be accomplished with the use of mechanical lifting devices.

PURPOSE: Mechanical lifting devices are used in most situations involving the necessity of lifting individuals supported by the agency. The primary benefit in the use of these devices is to more safely lift supported individuals and to minimize the occurrence of employees being injured by manually lifting supported individuals.

PROCEDURES:

- 1) Employees involved in the day-to-day support shall be trained in how best to perform manual lifting on rare occasions when it may become necessary.
- 2) Employees shall be provided in-service instruction and training in the use of mechanical lifting devices that are available to be used in most lifting situations.
- 3) Equipment shall be kept in good working order, maintained as recommended by manufacturer.
- 4) Employees are requested to notify management personnel whenever mechanical lifting devices are not working properly.