UCP ADULT PROGRAM
PARTICIPANT AND STAFF
HANDBOOK

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Available in alternate format upon request
Dear Program Participant,

This manual was developed to provide you with important information about UCP’s Adult Program, how it operates, the services available to you and your rights and responsibilities as a program participant. It is important to us, and to your success in the program, that you understand the information it contains. Therefore please let us know if at any time you have questions, difficulties, suggestions, or if you are interested in more information regarding the Adult Program.

Sincerely,

Glynda King
Adult Program Director

This manual is also used by UCP Staff and is provided to referring agencies and other stakeholders.

The mission of United Cerebral Palsy of Northwest Missouri is to positively affect the quality of life of persons with cerebral palsy and other developmental disabilities through the provision of direct services, community education and by empowering self-advocacy.

Our Vision: All individuals with developmental disabilities will have every opportunity to live life to the fullest.
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PROGRAM DESCRIPTION
UCP’s Adult Program is designed to assist adults with significant developmental disabilities in learning skills to maximize independence, participate in volunteer and recreational activities, and develop meaningful relationships.

SERVICES PROVIDED/PAYER SOURCE/REFERRAL SOURCE
UCP’s adult program offers Day Service with two different contracts.

Day Service 1-6 which is for individuals who require supervision and protective oversight.

Day Service 1-6 Behavior/Medical is for those individuals that require additional mobility supports as well as supervision and protective oversight.

Services are funded through the Department of Mental Health and Medicaid waivers

Most referrals originate from Senate Bill 40 Service Coordinators

DESCRIPTION OF SPECIFIC SERVICES

Skills Development: Through the personal planning process skills that will maximize the independence and improve the quality of life for the program participant are identified. Individual program plans are then developed to address each skill identified and are implemented by a Learning Consultant. This service is provided in the center and/or community, based on the needs, interests, and skill level of the program participant. Examples of center-based activities include life skills, self expression, computer, arts, and continuing education.

Life skills: Here at UCP, much of our life skill work revolves around the kitchen. Consumers learn how to thoroughly wipe off tables, fill the dishwasher, push chairs up to the tables, stack chairs to prepare the room for mopping, and how to re-fill consumables such as sweeteners. They make tea every morning for our break and lunch, and some are involved in learning how to do laundry. Cooking and baking is a huge part of our Life Skills program. We provide numerous opportunities to make snacks like pudding and Jell-o, and easy-to-make meals such as spaghetti.

Life Skills expand to many other areas such as watering plants, dusting and vacuuming, taking out trash, and personal hygiene activities.

Self expression: Here, program participants are offered a wide variety of activities which encourage movement and self expression to music. Karaoke gives consumers the chance to shine in the spotlight as well as to work on verbal skills, pronunciation, and voice volume. There’s something about a microphone that encourages the shyest people to speak up to hear their own voices!

Sign language is also taught in the multi-purpose room, and often, program participants learn to sign along to popular songs!

Computer: We have worked hard to ensure that every consumer that is interested in computers is able to access them here at UCP. Those that are computer literate are able to surf the Internet. Many consumers enjoy looking up their favorite music artists and watching their videos on-line. Every consumer who wishes to do so can have his/her own e-mail address. With staff’s help, it is easy to stay in touch with friends and family. For those consumers with the ability to read and write, we have several educational programs which work on increasing or maintaining those skills.

We also have many games/programs that encourage one-touch switch use. If someone is unable...
the picture changes. Most of these programs teach cause and effect. In addition to the computers available in the Computer Lab, we also utilize iPads. Consumers are able to access educational and entertaining apps with the ease of the touch screen. Technology is wonderful.........especially when it bridges the gap that limits computer use for some!

**Creative Expression:** In this area, consumers are provided the opportunity to express themselves through the arts. While working with a variety of mediums, consumers develop fine motor skills and eye/hand coordination. In the same room at any given time, you might find a consumer painting a seasonal art sheet with watercolors, someone else making a necklace by stringing beads, and another consumer transforming something simple like a shoebox into a beautiful container for treasures.

Program participants are also encouraged to stay connected with their past and celebrate the present by creating a scrapbook to be enjoyed with friends and relatives.

**Continuing Education:** Here, program participants are offered a wide variety of activities which encourage a desire to learn. Many of our consumers have either attended a local high school’s special education department or Helen Davis State School. Most have learned a great deal of useful skills over the years, and we work hard on helping each participant either increase, or at the very least maintain, the educational skills they have mastered. The old adage is most definitely true....Use it or lose it!

We have learned that when we find creative ways to make learning enjoyable, we see much more success. There is nothing more rewarding than being a part of helping consumers become more independent and watching that “light of knowledge” come into their eyes!

**Community Integration:** Here at UCP, we believe that belonging to the community in which you live means much more than just living there. It means being involved in the activities and events that interest you and giving back to that community through volunteerism. UCP’s Adult Program community integration activities provide program participants the opportunity to belong to their community through participation in a wide variety of recreational and volunteer activities.

Every day, program participants of the Adult Program can be found volunteering all over the St. Joseph community. The following are a few of the ways they give back to their community daily:

***Delivering Meals on Wheels
***Bagging food for Meals on Wheels at InterServ
***Completing mailings for Second Harvest Food Bank and United Way
***Picking up recyclable items from residents of local senior citizen’s housing units
***Cleaning books at the local libraries

In addition to volunteering, program participants also take part in a variety of community events, recreational activities, and other activities designed to help them stay physically active, learn new skills, and develop meaningful relationships.

**Socialization:** As part of participating in a program with their peers, and in the community in which they live, program participants have the opportunity to socialize and develop meaningful relationships.
Every consumer is added to a rotating schedule that is different each week day. There are three main activity sessions and a lunch session. In all sessions, each consumer is matched with a Learning Consultant in a group within their contract ratio. At the time of each new session, the consumer goes to a different room and works on different goals and activities. This keeps a weekly routine in place and yet gives each consumer a variety of experiences and staff member support every day.

ELIGIBILITY

Adults who are 17 years of age or older, who have a significant developmental disability, and who can benefit from skill development, socialization, and community integration are eligible to receive services through the Adult Program.

PROGRAM INFORMATION

Hours of Operation: Normal hours of operation for the Adult Program are from 8:30 a.m. to 2:30 p.m., Monday through Friday. Participants may choose to attend full time or on a part time schedule.

Attendance: Program participants are required to notify the Adult Program Director if they are unable to attend programming for any reason. Once at the Center participants with temperatures of 100 degrees or more (orally) or exhibit other physical symptoms of illness, will not be allowed to remain in the program. Participants showing clinical evidence of communicable disease will be separated from the group and the primary caregiver will be called to pick up the individual immediately. If the primary caregiver is unable to come themselves, they should make other arrangements for the participant to be picked up.
**Policy: Communicable Disease Policy**

**Purpose:** UCP is committed to providing a workplace environment free of health hazards including the risks posed by communicable disease. The purpose of this policy is to establish workplace practices, reporting requirements, and general preventative health requirements designed to help prevent and control the spread of communicable diseases at UCP.

**Procedure: Communicable Disease – CONSUMER**

**Immunization and Health Assessments**

Consumers of UCP programs may be required to provide record of immunizations and/or a physical assessment in accordance with contractual agreements and regulatory authorities.

**Universal Precautions and Work Place Practices**

UCP requires all staff to routinely implement the following

- Universal precautions to prevent exposure to disease-causing organisms. UCP will provide the necessary equipment and supplies to implement universal precautions as outlined in *UCP’s Exposure Control Plan*.

- Teach and monitor that consumers wash their hands at appropriate time: before eating, after toileting and as needed when hands are soiled.

**Illness Assessment and Management:**

Consumers will be observed for contagious diseases and other signs of illness on arrival and throughout each day. If communicable disease, illness or fever is suspected based on physical observation the consumer’s temperature will be taken.

Symptoms that require parental/guardian contact and the need for the consumer to be removed from the program include but are not limited to the following:

1. More than one (1) abnormally loose stool (*abnormal for the consumer)*;
2. Red or blue in the face or makes high-pitched croupy or whooping sounds after coughing;
3. Difficult or rapid breathing – especially important in infants under 6 months of age;
4. Yellowish skin or eyes;
5. Redness of eyelid lining or irritation, swelling, or any discharge of the eyes.
6. Unusual spots or rashes;
7. Sore throat or swallowing difficulty;
8. An infected skin patch – crusty, bright yellow, dry or gummy areas of the skin;
9. Unusually dark, tea-colored urine;
10. Gray or white stool;
11. Fever over one hundred degrees Fahrenheit (100°F);
12. Headache and stiff neck;
13. Vomiting (abnormal for the consumer);
14. A child is in the contagious period of a disease; or
15. Severe itching of the body or scalp or scratching of the scalp which may be symptoms of lice or scabies.

An ill consumer will be kept isolated, in a comfortable setting, apart from other consumers, and with an employee in close proximity to the ill consumer. Close proximity means that an employee is close enough to hear any sounds the consumer may make that indicates a need for assistance. Parent/legal guardian will be contacted and the consumer sent home.

Home-based instructors arriving at a consumer’s home who is exhibiting any of the above symptoms will leave the home and reschedule the visit for when the consumer is no longer exhibiting signs of illness.

Note: Any consumers exhibiting signs of illness at time of arrival will not be admitted to programming.

Categories of Potential Risk

Consumers with infectious diseases that can be transmissible in UCP program settings (such as, but not limited to, chicken pox, influenza and conjunctivitis) will be managed based on input from one or all of the following sources: (a) most current edition of the Missouri Department of Health and Senior Services document entitled: Prevention and Control of Communicable Diseases: A Guide for School Administrators, Nurses, Teachers, and Day Care Operators, (b) documents referenced in 19 CSR 20-20.030 and (c) in accordance with any specific guidelines/recommendations or requirements disseminated by the local county or city health department. Note: In some circumstances a medical release or physician’s statement may be required prior to the consumer’s return to UCP programming following the consumer’s absence due to a contagious illness.

A consumer infected with a blood borne pathogen such as hepatitis B virus (HBV), hepatitis C virus (HCV), or human immunodeficiency virus (HIV) poses no risk of transmission through casual contact to other persons in a UCP program setting. Consumers infected with one of these viruses shall be allowed to attend any UCP program.
without any restrictions which are based solely on the infection. UCP cannot require any medical evaluations or tests for such diseases.

**Exceptional Situations:** There are certain specific types of behaviors (for example, biting or scratching) or conditions (for example, frequent bleeding episodes or uncoverable, oozing skin lesions) which could potentially be associated with transmission of both blood borne and non-blood borne pathogens. No consumer, regardless of whether he or she is known to be infected with such pathogens, will be allowed to participate in a UCP program unless these behaviors or conditions are either absent or appropriately controlled in a way that avoids unnecessary exposure.

In these exceptional instances the following information will be documented and communicated to the Program Director, and when appropriate the Executive Director:

- all episodes of biting, and repeated instances of significant aggressive behavior,
- any consumer having episodes of bleeding or who has uncoverable, oozing skin lesions,
- any child with an illness characterized by a rash, and
- any instance in which the significant potential for disease transmission occurs.

In these exceptional instances, the Program Director, and when appropriate the Executive Director, may solicit input from a review committee to determine appropriateness of program placement. The review committee will be comprised of: 1) the parent(s)/guardian(s), 2) medical personnel (consumer’s physician) 3) Program Director, 4) Executive Director and/or designee. Local health department officials may be consulted and/or included as members of the review committee. If the consumer is identified as having a disability and being served through an Individualized Education Program, any change of placement would need to be effected through the Individualized Education Program (IEP) process. In the case of a consumer who is disabled, but not identified under the Individuals with Disabilities Education Act, any change of placement would need to be effected through a multidisciplinary team meeting.

Program Director will make every effort to have a decision/recommendation to present to the consumer and/or their legal representatives within 10 business days of initial concern.

It is the responsibility of the appropriate Program Director to implement the decision and/or recommendations of the review team. Consumers and their legal representatives who are not in agreement with the review team recommendations/decisions may file a grievance through UCP’s Grievance Policy.

**Reporting and Disease Outbreak Control**

Reporting and disease outbreak control measures will be implemented in accordance with state and local laws and Department of Health and Senior Services rules governing the control of communicable and other diseases dangerous to public health, and any applicable rules promulgated by the appropriate county or city health department.
Education
All consumers will receive age-appropriate information about the prevention and control of communicable diseases, to include the use of universal precautions, good hand washing techniques, etc.

Procedure: Communicable Disease – EMPLOYEE AND VOLUNTEER (For the purpose of this policy “volunteer” shall be defined as having frequent (regularly scheduled – at least once a week) and having direct contact with consumers.

Health Assessments
Employees may be required to complete a health assessment in accordance with contractual agreements and/or regulatory authorities. Note: These required health assessment are job-related and conducted on all employees or applicants for the positions indicated above in accordance with applicable Missouri Statute and Rules.

Universal Precautions and Work Place Practices
UCP requires all staff to routinely implement the following

Universal precautions to prevent exposure to disease-causing organisms. UCP will provide the necessary equipment and supplies to implement universal precautions as outlined in UCP’s Exposure Control Plan.

Illness Assessment and Management
Employees and volunteers should not report for work when ill and likely to transmit a communicable disease that might endanger the health or well-being of others in the workplace or when they have been diagnosed by a licensed physician as having a communicable disease.

If an employee or a volunteer arrives for work with symptoms of communicable disease, or develops symptoms during the work day, he or she should report to their supervisor.

If the supervisor verifies the suspicion of infectious disease, the employee will be directed to return home or to make an appointment with their physician which ever is most appropriate.

UCP may request a written statement from the employee’s physician stating they are free from communicable disease prior to returning to work. This statement will be kept in a confidential medical file.

Categories of Potential Risk
Employees with infectious diseases that can be transmissible in UCP program setting (such as, but not limited to, chicken pox, influenza and conjunctivitis) will be managed in accordance with input from one or all of following sources: (a) most current edition of the Missouri Department of Health and Senior Services document entitled: Prevention and Control of Communicable Diseases: A Guide for School Administrators, Nurses, Teachers, and Daycare
Operators (b)documents referenced in 19 CSR 20-20.030 and in accordance with any specific guidelines/recommendations or requirements promulgated by the local county or city health department. A medical release may be required of the employee in certain circumstances.

An employee infected with a blood borne pathogen such as hepatitis B virus (HBV), hepatitis C virus (HCV), or human immunodeficiency virus (HIV) poses no risk of transmission through casual contact to other persons in settings at UCP. Employees infected with one of these viruses shall be allowed to continue work without any restrictions which are based solely on the infection.

**Exceptional Situations:** There are certain specific conditions (for example, frequent bleeding episodes or uncoverable, oozing skin lesions) which could potentially be associated with transmission of both blood borne, and non-blood borne pathogens. No employee, regardless of whether he or she is known to be infected with such pathogens, should be allowed to continue work unless these conditions are either absent or appropriately controlled in a way that avoids unnecessary exposure.

The employee supervisor, and the Executive Director, when appropriate should be promptly informed of the following:

- any staff member who has recurrent episodes of bleeding or who has uncoverable, oozing skin lesions,
- any employee with an illness characterized by a rash,

any instance in which the significant potential for disease transmission occurs.

UCP may request a written statement from the employee’s physician stating they are free from communicable disease prior to returning to work. This statement will be kept in a confidential medical file.

**Reporting and Disease Outbreak Control**

Reporting and disease outbreak control measures will be implemented in accordance with state and local laws and Department of Health and Senior Services rules governing the control of communicable and other diseases dangerous to public health, and any applicable rules promulgated by the appropriate county or city health department.
Policy: Medication Management Policy

Purpose: UCP recognizes some consumers in UCP’s Children and Adult Program may require medication management for chronic or short-term conditions to enable them to successfully remain at, and participate in, UCP programs. The purpose of this policy is to establish administrative procedures for the storage and administration of medications at UCP.

Procedure:
I. Medication Orders and Labeling:
The Program Director or their designee shall not permit any consumer to be provided medical treatment or medications other than by written order of a licensed physician.

Up-to-date individual record of medications administered at UCP will be readily available for appropriate personnel. This information will include name of medication; the dosage, including strength or concentration; the frequency; instructions for use, including administration route; potential side effects; drug interactions and, for prescribed medications, the prescribing professional and phone number; dispensing pharmacy and contact information.

A dated copy of the physician’s order shall be on file for all prescription, nonprescription, and PRN medication to be administered at UCP.

In addition to the above, medication administered to consumers attending UCP’s Children’s Program shall only be given with the dated, written permission of a parent, stating the length of time the medication may be given.

Medications shall be properly and clearly labeled.

1. Prescription and nonprescription medication shall be in the container with current labeled with the consumer’s name, name of medication, instructions for administration, including the times and amounts for dosages.

II. Handling, Storage and Disposal of Medication
A. Parent, guardian or residential provider shall deliver all medications to be administered at UCP to the appropriate Program Director or their designee. Program Director or their designee shall regulate the receipt of medication to be administered at UCP in one, or a combination, of the following ways:
1. A supply of medication may be maintained at UCP.
2. Medications may be transported daily from the consumer’s residence.

B. Program Director or their designee shall regulate the safe storage of medications to be administered at UCP.
   1. Medication shall be returned to storage immediately after use.
   2. All medication shall be stored in a locked container.
   3. Medication needing refrigeration shall be kept in the refrigerator in a locked container separate from food.
   4. Internal and external medications shall be stored separately.

C. Safe Disposal of Medication
   1. Discontinued, outdated or deteriorated drugs shall immediately be returned to the consumer’s parent/legal guardian or residential provider and documented appropriately.
   2. Medication requiring the use of “sharps” shall be disposed of in accordance with UCP’s Exposure Control Plan.
   3. All contaminated medications shall be disposed by staff certified in approved medication administration program and one witness.

III. Administration and Documentation of Medication Use

A. Program Director or their designee shall regulate the administration of medication at UCP in the following ways:
   1. All medication administered at UCP will be administered by staff certified in approved medication administration program. Program Director will assure the availability of appropriately trained staff to meet the needs of the program.
   2. The Program Director or their designee must be notified when a consumer’s natural/adoptive parent or legal guardian chooses to administer medication to his/her own child/ward while at UCP. The Program Director or their designee must be aware of the type and dosage of medication being administered.
   3. In rare occasions when it is necessary to administer medication off-site, staff will transport the medication in a locked box. A copy of the consumer’s medication administration record will accompany the medication for documentation.

B. Program Director or their designee shall monitor the documentation of medication use in the following ways:
   1. A medication administration record (MAR) shall be maintained for each consumer who receives medication while at UCP.
   2. The date and time(s) of administration, the name of the individual giving the medication and the quantity of medication given shall be recorded promptly after administration. This form shall be filed in the consumer’s record after the medication is no longer necessary.
   3. Staff will document significant observations of the medication’s effectiveness, as appropriate, and any adverse reactions or other harmful effects, as well as any action taken.
IV. Maintenance of an Adequate Supply of Medications and Review of Orders

A. Parent/legal guardian or residential provider is responsible for securing physician’s orders and providing

B. UCP with medication to be administered at UCP.

Parent/legal guardian or residential provider is responsible for providing updated physician’s orders to
UCP anytime a medication is changed, discontinued or added. An updated list of possible side ef-
fects of every medication is required to accompany each physician’s orders.

C. Review of physician’s orders will occur at least annually by Program Director or their designee, as part
of UCP’s planning process.

D. Program Director or their designee will monitor medication at the beginning of each week assuring ade-
quate supply of medication available for each consumer.

V. Reporting of Errors in Administration

A. A medication error includes any error to administer medication as prescribed for a particular consum-
er, including failure to administer the medication
within appropriate time frames;
in the correct dosage;
in the accordance with accepted practice; and
to the correct consumer.

B. In the event of a medication error, the staff person making the error will complete an Event Report
form, notify all necessary parties, and submit completed form to Program Director or their designee.
If there is a question of potential harm to the consumer, the Program Director or their designee will
notify the consumer’s licensed prescriber.

C. All Event Report forms are reviewed by the appropriate Program Director and UCP’s Human Rights
Committee. Necessary steps are taken to ensure appropriate medication administration in the future.

VI. Response to Medication Emergencies

A. Medication emergencies shall be responded to in accordance to UCP’s Emergency Medical Procedure
maintained in UCP’s Emergency Management Plan.

A listing of emergency contact numbers (police, hospital, poison control center, etc.) will be maintained
by each phone in the organization for easy access by staff in the event of an emergency.

VII. Dissemination of Information and Advocacy Training

Upon request, consumers or their parent/legal guardians will be provided with information on
UCP’s Medication Monitoring and Management Policy;
Resources for advocacy and advocacy training to assist them in being actively involved in making
decisions related to the use of medication; and
Resources for training and education regarding medication.
VIII. Staff Training

A. Staff designated to administer medication at UCP will be certified in an approved medication administration program prior to administering medication at UCP.
HEAD LICE POLICY

We operate under a “no nit” policy, which means that any consumer who has live head lice and/or nits (lice eggs) will not receive services until they are free from these. Parents/house staff will be notified and asked to pick up their program participant if lice and/or nits are found. Each consumer will be re-screened before returning to the program. Information regarding prevention, treatment, and safe, effective control measures is available.

Holidays: The Adult Program is closed on the following days:

   New Year’s Day
   Dr. Martin Luther King’s Birthday
   President’s Day
   Good Friday
   Memorial Day
   Fourth of July
   Labor Day
   Thanksgiving and the day after
   Christmas and the day before or after Christmas

Snow Days: In the event of severe inclement weather, the Adult Program may close. You will also be called early that morning by Adult Program staff.

Lunch: Program participants are required to provide their own lunch. A microwave is available for cooking or heating food. A short break is offered during the morning. Participants may choose to bring a snack or purchase something from the vending machine to eat at that time.

Personal Items: It is important that personal belongings are kept in an orderly manner. Coats, boots, purses, and lunches should be put away in their proper places upon arrival. Names should be in a highly visible area on all items. UCP highly discourages consumers from bringing in personal items such as cd’s and books. UCP cannot be held responsible for the loss of any item brought to the program.

Telephone Usage: Several telephones are located throughout the programming area and are for business use only. Program participants should notify a staff person if they need to use the telephone. Personal and social calls are not allowed.

Safety: In the event of an emergency, staff will direct program participants as to where to go to reach safety. It is important that they remain calm, listen carefully, and follow instructions. Fire/emergency escape routes are posted throughout the building showing different ways to leave the building. For the safety of all individuals in the building routine safety drills are scheduled.
ADMISSIONS CRITERIA/ ORDER OF ACCEPTANCE

The Program Director is responsible for determining eligibility for the program and the order that individuals are accepted. The Adult Program may admit any individual that meets the following criteria:

* Individuals with an Intellectual/Developmental Disability
* Over the age of 16 years

It is possible that an individual may be deemed ineligible due to aggressive or disruptive behavior.

Once eligibility is determined services are started when funding is in place. If there is not an opening at the time of eligibility the order of acceptance is determined by the following **Process for Waiting List:**

- Services requested
- Frequency and intensity of service
- Location (center or community)
- Time of Service

Individuals will be served in the order of date they are eligible once the services requested could be met.

**Transition**

UCP’s Adult Program can help with transitions both into our Day Services or when an individual would like to transition to another service .(ie employment)

When transitioning into Day Services, we customize the transition based on the needs of the individual. A teacher, guardian, etc may attend with the individual until they feel comfortable in their new environment. This can even be done before funding is requested or secured to simply see if attendance is truly the desire of the individual.

When an individual wishes to transition out of Day Services, we can incorporate activities they can work on to help with the transition. We work closely with the entire team to help make the transition as seamless as possible.
ADULT PROGRAM CAPACITY

The Adult Program currently has a capacity of 65 for the total number of individuals served. Our program participants are given the choice of attending programming on a full or part-time basis. Because of the varied schedules, the adult program has a capacity of serving up to 60 individuals on any given day.

CONFLICT OF INTEREST

Persons served who are related to board members, donors, employees, or other individuals in positions of influence will not be given preference or advantage in service delivery.

EXIT CRITERIA

When an individual moves, is ready for a different type of service or no longer benefits from the Adult Program Services they exit the program. This is a team decision with the individual, their guardian, service coordinator and UCP Program Director.

OPEN DOOR POLICY

Program participants are welcomed and encouraged to visit with adult program staff at any time. The program director has an open door policy. Planned meetings are held once a year at a minimum. Program participants will meet with the Program Specialist within three months of their annual planning meeting. Here, they are given individualized attention. They are encouraged to evaluate the adult program at this time and to explain any details they would like to bring to the table at their personal planning meeting. They will once again meet in a more formal setting for their planning meeting. Here, UCP staff will present the information they have compiled over time about the individual and will support them as they advocate for themselves. Staff also meets with program participants monthly as they discuss their report compiled from the previous month’s data collection.
INTAKE

Once an individual applies for services from UCP’s Adult Program, background information is obtained. This information includes but is not limited to: school reports, psychological reports, medical reports, individual plans and any other pertinent information that would assist in providing services and supports to meet the individual’s needs.

As part of the intake process the individual and their family interviews the Adult Program Director. The Informational Manual and Policy & Procedures, which includes information on individual rights, services provided, staff qualifications, service capacity, potential conflict of interest, and approaches to risk versus choice, is reviewed with them and a copy is provided to them. A tour of the program is given and the opportunity to spend the day observing and participating is offered. For students graduating from Helen Davis State School spending up to a month in the program with a staff person from Helen Davis is an option as part of their transition from school to community services.

The Program Specialist interviews the individual and their family to learn about their interests, strengths, abilities, expectations and any other information that would be helpful in determining eligibility and the provision of services.

PERSONAL PLAN DEVELOPMENT

While the Service Coordinator from the Albany Regional Office or Progressive Community Services is responsible for writing the Personal Plan for each consumer in the Adult Program, the participant, their family and/or legal representative, and others identified as important to them, plays in integral part in the planning process. Prior to the planning process staff visits with the program participant, their family, and/or legal representative to determine who needs to be a part of the planning meeting. The Personal Plan is then developed with the input of those invited to the meeting. To assure the full participation of the participant in this process a variety of person centered tools are available.

A Personal Plan is then developed that:

- Identifies the individual’s strengths, abilities, interests, preferences, cultural background, and needs
- Takes into consideration where natural supports can be increased and dependence on paid supports decreased; areas of the participant's life where self sufficiency skills can be increased; where increased opportunities for making choices and having more control over their lives can be provided; opportunities where community participation can be increased; as well as health and safety risks.
- Establishes agreed upon outcomes that describe services and supports needed, who will provide those services and supports, timelines for services provision/implementation, and how services will be funded.

The Adult Program Specialist then develops the individual Training Plans for each outcome in which the Adult Program is identified as the service provider. These plans include the following:

- A description of the goal which defines the expected results of the service provided
- How the services will be delivered including how the design of the service meets the participants identified needs.
- Expected duration of the services and how the results will be evaluated
- How results will be evaluated

Assistive technology needs, cultural differences, and reasonable accommodations are addressed in the development of these plans.

These plans are reviewed and revised as appropriate.
ACCOMODATIONS AND ASSISTIVE TECHNOLOGY

Please make us aware of any accommodations or assistive technology needs you have to access our programs or building.

REQUESTS FOR ACCOMODATIONS

UCP reviews all identified requests for accommodations to determine whether any remedial actions are appropriate.

Identification
Opportunities to request, or identify need for, accommodation(s) are offered prior to, and throughout, the service delivery process. The following are just a few of the events during which requests might be made:
Orientation and Intake
Person-Centered Planning
Medical Treatment Authorization Form
Annual Family and Stakeholder Survey

Review and Decision
Each identified need or request for reasonable accommodation(s) will be reviewed by the individual’s planning team, which may include but not be limited to the person with a disability, the parent or guardian, UCP program staff, Program Director (as appropriate), and other stakeholder/providers as appropriate. When agreement to accommodation has been reached, the action steps will be listed in the individual’s program plan or may be documented in the form of a health plan. If however after considering all resources the team cannot reach agreement, the request will be referred to the Executive Director for review and final decision.

In the event it is determined that effective accommodation(s) cannot be made, the following steps will be completed:
• Referral information is provided to the individual, and/or their family to assist them in locating resources that can meet their needs.
• Executive Director documents decision and submits information to Access Coordinator.
• Access Coordinator reviews and includes information on denial of requests in the organizations self-assessment and accessibility plan as appropriate.
RISK VERSUS CHOICE

Individual choice is an integral part of the planning process and the services offered. Every effort will be made to honor individual choice. The agency acknowledges that with choice also comes risk. It will be the responsibility of the planning team which will include but not be limited to the individual, their family and/or legal representative, program staff, referral/funding representation, and any other individuals identified as being important to the individual, to assess the risk associated with the choice(s) made by the participant. Should the team determine that the risk to the safety of the participant, other program participants, staff, or the community as a whole is greater than the agency can assume, it will not be honored. However, every effort will be made to work with the participant to negotiate possible alternatives to honoring their original choice.

In the event that the team cannot come to consensus as to whether the risk associated with the participant’s choice(s) is too great for the agency to support, the matter will be forwarded to the Executive Director, who with the input of the Adult Program Director will make a decision.

Should the participant be in disagreement with the decision made the participant will be advised of their right to file an appeal and/or grievance.

STAFF ASSIGNMENT

When working with people matching them to staff they feel comfortable with and can work closely with is key to the satisfaction of the program participant and the success they experience. Once an individual is accepted as a program participant every effort will be made to match them with the Learning Consultant that can support them best. In the event a relationship does not develop or does not work for staff or the participant, every effort will be made to honor their decision to work with a different participant or staff person.

SERVICES

The growth and development in the personal lives of those persons receiving services overall enhances the persons quality of life. As part of the services provided and based on the desires of the program participant and the people important to them, opportunities to develop social relationships and community support networks will be provided in a way that make sense to the program participant. This area is a component of the personal planning process and will be addressed in that document with program plans implemented as appropriate. Services will target developing new skills and supports and ensure the maintenance of current skills and supports for the individual served.

UCP is involved in developing community resources based on the identified needs and desires of the person and/or families receiving services that expand the:

a. Variety of community life experiences.
b. Opportunities for community access.
c. Opportunities for community inclusion.
Through the planning process as the unique interest and needs of each individual is defined. Staff then works to identify the supports and resources, within the agency and in the community that can best meet their interest and needs. In the event a resource/support in not readily available/offered, UCP is committed to working with other community resources to make these resources/supports a reality.

Current partnerships within the community that have been developed to increase opportunities for community inclusion, community access, and a variety of community life experiences include:

- Partnership with Missouri Western State College
- United Way of Greater St. Joseph
- Local libraries and churches
- InterServ

**ADVOCACY SKILLS TRAINING**

The implementation of a formal advocacy skills program is completed for program participants when, through the planning process this area is indicated as a desire or need for the participant. However for all program participants and their families, information and support is offered on attending local conferences and/or self-advocacy group activities. For participants and families needing more information on these activities or financial support to allow them to participate, a referral is made to the Advocacy Services program to provide this service. Some examples of local efforts are the annual No More Stares Conference and Peoples First meetings and activities.

**SYSTEMS ADVOCACY**

Participating in systems activities is always encouraged so that the participant, their family, and/or legal representative understand how the systems they utilize operate. They also learn how to communicate satisfaction/dissatisfaction and to go about changing those systems when needed. Some examples of this include:

- Providing up to date information on legislative issues and information on legislative forums
- Orientation to the legislative process and the contact information for their legislator
- Support and information on writing letters and making telephone calls that gets action
- Support with applying for or getting benefits reinstated
- Providing information on appeals processes and support when following that process
SELF ADVOCACY ACTIVITIES

Program participants are encouraged and supported in participating in self-advocacy activities in both the center and in the community. In the center participants are encouraged daily in expressing their desires through choosing the activities they wish to participate in, the people they want to spend time with, and exploring new options and resources available to them. They are provided information and support that will help them understand processes and avenues for expressing satisfaction/dissatisfaction with agency services as well as those they receive outside the agency. Staff is always available to help strengthen the “voice” of the program participant and assure that others hear and act on what is important to them. Through a variety of person centered tools participants are encouraged to participate fully in their planning process including acting as facilitator or co-facilitator of the planning meeting.

In the community self-advocacy skills are always supported and encouraged as program participants interact with members of the community in which they are providing a service, whether it be a voluntary or paid position. The expression of what is important to them in these environments and how negotiate to get what is important to them is encouraged and always modeled for them.

All program participants and their families are encouraged and provided the information and support they need to attend local conferences and/or self-advocacy group activities. For participants and families needing more information on these activities or financial support to allow them to participate, a referral is made to the Advocacy Services program to provide this service.

Sometimes just the presence of an individual at a community event can make a statement of their rights and value as a member of the community. Program participants are always encouraged and supported in participating in community events. Some examples of opportunities participants have chosen to take part of in the past include: United Way Campaign Report Luncheons, Olympic Torch Run supporters, National Day of Prayer, etc

Opportunities to enhance advocacy skills are addressed. Individuals and families are encouraged to participate in activities and training that will enhance their advocacy skills. This is accomplished in the following ways:
-Individuals and families are provided with information about community advocacy groups, trainings, and system advocacy opportunities through flyers and the agency newsletter.

CONFIDENTIALITY

All records compiled in the course of providing services are confidential. Any disclosures of information concerning the program participant or family served shall be made only with the written authorization of the individual or his/her legal guardian, unless otherwise permitted by law.
At admission, participants and/or guardians are asked to sign a form that they’ve been given a notice of privacy practice which describes how confidential information about them may be used and disclosed.

If services are provided to identified criminal offenders, information is provided to the person served concerning the relationship between the criminal justice entity and UCP. A detailed history of the person’s criminal history will be maintained, as required by state and/or local government authorities. Services will be coordinated with other systems as needed and/or required, and confidentiality is maintained.

**INDIVIDUAL CASE RECORDS**

A single case record is maintained for each person admitted to the program. Case records are confidential and are kept in individual folders marked with the consumer’s name. The Adult Program Director, Learning Consultants, Records Secretary, and Executive Director have access to these files. Other staff wishing to utilize the files should contact the Program Director. Case records should be signed out/in on the Access to Records Log. Individuals and/or their parents can go through their records with the Program Director or another staff person, approved by him/her.

A table of contents is affixed to each client file and a “sample file” is available as a guide and is kept in the Program Director’s office. Non-active case records are kept in storage areas. All files are to remain in the office when not in use. The Program Director is responsible for the control of case records and for implementing and maintaining case record policies and procedures. Location of “checked out” client files are limited to the program area, the office, storage room (when in-active), and the conference room, as needed for meetings. Individual files are not allowed to be removed to other areas at any time except in case of an emergency.

Individual case records are maintained on a current basis; clinical information is recorded within 30 days following discharge. Daily records and worksheets are maintained in the service area for each current month and then transferred to the consumer’s file.

Statements of professional judgment and reports of services to an individual are to be signed by the person qualified by professional competency and official position. The case record confirms that the individual has actually received services recommended and planned at the time stated. Such assurances are in the form of the signature of the staff person rendering the service and the client.

**EXIT SUMMARY**

An exit summary is developed each time an individual leaves a service or the program. The report summarizes the results of the services received by the individual and makes recommendations for future services to continue the achievement of the individual’s life goals. A follow up contact is made with the individual or guardian to solicit information.
on the person's satisfaction with the services they received and if there was anything that could have been done differently.

If an individual leaves the adult program and is admitted to another program either locally or out of the area, they are welcome to take copies of all their files and compiled information with them. The files can be faxed, sent by mail, or sent with the program participants themselves. A release of information form must be kept in their discharge file. With written permission, a phone call may be made to the next agency to reduce disruption to services. The two programs will try to work cooperatively to develop a seamless continuum of services and to reduce all barriers to access.

**RIGHT TO OFFER COMPLAINTS**

Individuals and guardians have the right to offer complaints. Staff should respond to any complaints that are offered in an appropriate manner in a timely fashion. An informal complaint differs from a formal complaint in the way it is processed but both contribute to the overall complaint process. Offering a complaint (informal or formal) will not result in retaliation or barriers to services. Complaints are documented and kept in the director’s office. A review of formal complaints is conducted annually and may determine trends, areas needing performance improvement and actions to be taken.

An informal complaint is done through discussion (written or verbal) and should always be attempted before moving into the formal complaint process. If you have a complaint or concern, you should talk to the staff involved and/or the program director. All individuals have a responsibility to take action at an early stage to address and resolve matters promptly.

Formal Complaint: If an individual or guardian feels that their concern was not resolved at the informal complaint level, they have a right to file a formal complaint and follow the grievance procedure below.

**GRIEVANCE PROCEDURE**

A copy of this procedure will be made available to all persons served, parent/guardian, and stakeholders on an annual basis either through orientation/contract or through annual review/survey. **UCP does not permit retaliation of any kind for complaints received by staff, family members or stakeholders.**

If a person served or parent/guardian has a grievance, there are two options for settlement of the grievance: internal and external procedure.

a. **Internal Grievance Procedure**

   If a person served or parent/guardian has a grievance, the internal procedure for settlement of said grievance shall occur as follows:

   1) The person served or parent/guardian talks with the staff member involved, and the staff mem-
3) The individual is responsible for presenting the grievance to the executive director (either written or oral). The executive director is responsible for providing written notification regarding the actions to be taken to address the complaint within two weeks of receipt.

4) If the individual is not satisfied with the response from the executive director regarding the resolution of the complaint, they may appeal. The individual is responsible for submission of a written appeal to the executive committee of the UCP Board of Directors within 10 days of receipt of the written notification regarding the actions to be taken to address the complaint from the executive director. The executive committee of the UCP board of directors is responsible for providing written notification regarding actions to be taken to address the complaint within 30 days of receipt.

*A client advocate may be brought in at any time by the parent/guardian.

b. External Grievance

If the person served or parent/guardian has a grievance and would rather go through an external procedure, or they were not satisfied with the internal procedure, the following process would occur:

1. The individual or parent/guardian talks with a person from the referral or funding source that is responsible for the individual receiving services or another advocacy resource.

2. The person from the referral or advocacy source is responsible to present the grievance to the Program Director (either with or without the parent – parent’s choice). The Program Director attempts to achieve a satisfactory solution. If the grievance cannot be settled within two weeks, then:

3. The person from the referral or advocacy source is responsible to present the grievance to the Executive Director (either written or oral) and either with or without the individual. The executive director is responsible for providing written notification regarding the actions to be taken to address the complaint within two weeks of receipt.

4. If the individual is not satisfied with the response from the executive director regarding the resolution of the complaint, they may appeal. The individual or person from the referral or advocacy source is responsible for submission of a written appeal to the executive committee of the UCP Board of Directors within 10 days of receipt of the written notification regarding the actions to be taken to address the complaint from the executive director. The executive committee of the UCP board of directors is responsible for providing written notification regarding actions to be taken to address the complaint within 30 days of receipt.

*A client advocate may be brought in at any time by the parent/guardian.
POSITIVE BEHAVIOR SUPPORTS

UCP IS A RESTRAINT FREE/SECLUSION FREE FACILITY

UCP is committed to providing a safe and positive learning environment that increases connection with others, nurtures self-regulation, and promotes resiliency. In pursuit of this goal, UCP recognizes that some consumers will require support with challenging behavior(s) they may present at UCP or in a community setting. UCP further recognizes and adheres to the belief that most challenging behavior can be decreased or eliminated through the use of positive behavior supports.

Use of Preventative Approaches:

1. UCP team members will build positive relationships by:
   A. Showing respect and consideration to all
   B. Maintaining composure in interactions with others
   C. Examining our own attitudes toward challenging behavior
   D. Developing and supporting meaningful professional relationships with consumers
   E. Focusing attention on actions needed to problem solve, rather than focusing on the problem itself
   F. Understand every person is in charge of his/her behavior. We can’t force change

Remember…

• Positive Behavior Support is the redesign of environments, not the redesign of individuals
2. **UCP team members will create a supportive environment by:**

A. Embracing all agency policies and procedures as they are designed to promote a safe healthy community for everyone

B. Monitoring physical space and resources for evolving needs of consumers

C. Developing, implementing and communicating reliable schedules and routines

D. Supporting smooth transitions

E. Providing opportunities for everyone to contribute

F. Designing and supporting activities that promote unity, engagement, movement and playfulness

G. Noticing and encouraging kindness, helpfulness, unique strengths and contributions

H. Providing choice and options

I. Providing assistive technology and support

J. Giving directions that are clear and consistent

K. Clearly defining expectations, limits and consequences

**Managing Crisis Situations (if necessary)**

If a consumer’s behavior escalates to the point that there is significant likelihood that without intervention, the behavior will lead to harm to the consumer or to others, staff will immediately do the following:

1. Utilize any strategies included in the consumer’s plan that address such behavior

2. Assure the safety of any other consumers in the immediate vicinity / Remain present with the consumer

3. Maintain a firm, calm and reassuring tone or voice when addressing consumer

4. Use de-escalation techniques as appropriate as trained through PBS, MANDT, or Tools of Choice

**Restrictions of Consumer Rights**

Any attempt to alter a consumers behavior will be coupled with earnest protection of the person’s constitutional, statutory and human right. However, if restrictions of rights is unavoidable, the Program Director or their designee will assure the decision is made in accordance with the behavior planning process and after all other options have been exhausted. Informed consent will be obtained from responsible parties prior to authorization. A plan to reinstate consumer’s rights as soon as possible will be developed, the effectiveness of the restricted methods will be monitored, and staff will be trained in the restrictions prescribed in the plan.
HOME AND COMMUNITY BASED SERVICES (HCBS)

What does this mean to you?

As a participant in UCP’s Adult Program, you are receiving Medicaid Home and Community Based waiver services. You have the right to make choices about your life. You may make decisions about how, when and where you get your services. You may come and go when and where you want. You should have the choice to work and be involved in your community.

UCP’s Objectives:

1. UCP will make sure you have choice and full access to be part of your community.
2. UCP’s Handbook is a document that explains how your services will be carried out. UCP will make sure your services meet the HCBS requirements.

HCBS requirements:

Policy 801: ACCESS TO THE COMMUNITY (42 CFR 441.301(4)(i))

The setting is integrated in and supports full access to the greater community and engagement in community life.

(42 CFR 441.301(4)(i))

Which means…

UCP will make sure you have choices about community activities and volunteer opportunities that give you full access to your community. If you want to go to an event, staff will help you see if you have enough money and transportation. UCP will help you find community activities and volunteer opportunities, etc. and provide options for you to choose from. You will be encouraged to volunteer and go to community activities.

Policy 802: EMPLOYMENT (42 CFR 441.301(4)(i))

The setting provides the opportunity to seek employment and work in competitive integrated settings.

(42 CFR 441.301(4)(i))

Which means…

If you want a job, you may talk with UCP and/or ask for a meeting to talk about your employment options. Your planning team will help you with your employment service options.
Policy 803: MONEY MANAGEMENT/PERSONAL RESOURCES (42 CFR 441.301(4)(i))

The setting supports control of personal resources
(42 CFR 441.301(4)(i))

Which means...

You shall control your money used for community activities. Your funds will only be used for you.

Policy 804: COMMUNITY RESOURCES (42 CFR 441.301(4)(i))

The setting supports individuals to receive services in the community to the same degree of access as persons not receiving Medicaid HCB services.
(42 CFR 441.301(4)(i))

Which means…

UCP will talk to you about what you like and your choices in accessing services in your community; such as, medical, social and recreational activities, or those services that apply.

Policy 805: CHOICE OF SETTINGS 42 CFR 441.301(4)(i))

The setting is selected by the individual from among setting options including non-disability specific settings.
(42 CFR 441.301(4)(i))

Which means…

UCP will work with you to learn about your likes and dislikes. This means you have a choice of where you live, work and the things you do in your community, including doing things with people who do not have disabilities.
Policy 806: RESTRICTIONS/MODIFICATIONS (42 CFR 441.301(4)(i))

The setting options identified for an individual are supported by an assessed need and documented in the person centered service plans based on the individual’s needs and preferences.

(42 CFR 441.301(4)(i))

Which means…

You will not have your rights limited, unless it’s in your individual support plan. Any limits must be approved by you, your guardian, and your team. It must also be reviewed by the Due Process committee.

Policy 807: PRIVACY (42 CFR 441.301(4)(i))

The setting ensures the individual’s rights of privacy

(42 CFR 441.301(4)(i))

Which means…

You have a right to privacy. Staff will always knock before entering the restroom. Extra effort will be made to ensure privacy in bathrooms except when assistance is needed and documented in the ISP.

Policy 808: CODE OF CONDUCT (42 CFR 441.301(4)(i))

The setting ensures the individual’s rights of dignity and respect.

(42 CFR 441.301(4)(i))

Which means…

UCP and all staff will treat you with dignity and respect. You should be treated the way you want. You should be talked to in a nice manner and helped in a positive way.
Policy 809: GREIVANCE POLICY (42 CFR 441.301(4)(i))

The setting ensures freedom from coercion and/or restraint

(42 CFR 441.301(4)(i))

Which means…

You can talk to staff any time you are unhappy with your services, and UCP will try to fix the issue. UCP will help you contact your guardian or your support coordinator if needed. If the issues have not been fixed, you and/or your guardian can file a verbal or written complaint. UCP will have the Division’s Constituent Services Office phone number so you or your guardian/family can call with a complaint. You do not have to give your name.

Policy 810: FREEDOM OF CHOICE (42 CFR 441.301(4)(i))

The setting optimizes, but does not regiment, individual initiative, autonomy and independence in making life choices.

(42 CFR 441.301(4)(i))

Which means…

UCP will make sure you have choices in your life. You will make choices about how you spend your free time. You can choose who you interact with, what activities you participate in and where they are located.

Policy 811: VISITORS (42 CFR 441.301(4)(i))

The setting optimizes autonomy and independence in making choices regarding with whom the individual interacts.

(42 CFR 441.301(4)(i))

Which means…

You may invite family and friends to visit you at UCP. Visitors have to sign in at the front desk and can visit with you in the commons area.
Policy 812: SERVICES AND SUPPORTS (42 CFR 441.301(4)(i))

The setting facilitates choice regarding services
and supports and who provides them.
(42 CFR 441.301(4)(i))

Which means…

You get to choose your services and provide input on your preferences of who provides them. UCP will ask you about what you want or which staff is the best fit and you will have fair access to your preferred staff as available or appropriate. UCP will offer options so you and your guardian may make a choice.

MY VOICE
MY CHOICE
Missouri law gives individuals who receive mental health services the following rights without limitation:

(1) To humane care and treatment;

(2) To the extent that the facilities, equipment and personnel are available, to medical care and treatment in accordance with the highest standards accepted in medical practice;

(3) To safe and sanitary housing;

(4) To not participate in non-therapeutic labor;

(5) To attend or not attend religious services;

(6) To receive prompt evaluation and care, treatment, habilitation or rehabilitation about which the individual is informed insofar that person is capable of understanding;

(7) To be treated with dignity as a human being;

(8) To not be the subject of experimental research without prior written and informed consent or that of a parent, if the person is a minor, or guardian; except that no involuntary committed person shall be subject to experimental research, except as provided by statute;

(9) To decide not to participate or to withdraw from any research at any time for any reason;

(10) To have access to consultation with a private physician at the individual’s expense;

(11) To be evaluated, treated or habilitated in the least restrictive environment;

(12) To not be subjected to any hazardous treatment or surgical procedure unless the individual’s parent, if the person is a minor, or guardian consents; or unless such treatment or surgical procedure is ordered by a court of competent jurisdiction;

(13) In the case of hazardous treatment or irreversible surgical procedures, to have, upon request, an impartial review prior to implementation, except in case of emergency procedures required for the preservation of life;

(14) To a nourishing, well-balanced and varied diet;

(15) To be free from verbal and physical abuse.
You may also direct your grievance or complaint to:
Department of Mental Health
P.O. Box 687, Jefferson City, MO 65102
800-364-9687 or 573-751-4122

Deaf or Hard of Hearing individuals may call the above numbers or the Office of Deaf Services:
573-751-7033

I, ______________________ acknowledge receipt of and understanding of the UCP HCB Services
Handbook and understand my “rights” as a participant of HCB Services.

_______________________________________________________
Participant Signature

_______________________________________________________
Participant Name (Please Print)

_______________________________________________________
If Applicable: Guardian Signature

_______________________________________________________
Date
CLIENT RIGHTS

A person receiving Missouri Department of Mental Health services shall be entitled to the following rights without limitation:

***To be treated with respect and dignity as a human being;

***To have the same legal rights and responsibilities as any other person unless otherwise limited by law;

***To have the right to due process review when any limitation to rights is proposed or is alleged to have taken place;

***To receive services regardless of gender, race, creed, marital status, national origin, disability or age;

***To be free from physical, verbal, mental and sexual abuse and neglect;
***To receive appropriate humane and high quality services and supports as determined by the person’s support team, which may include, but not be limited to, the person, parents, guardian or authorized representative;

***To receive these services and supports in the most integrated setting appropriate for the person’s particular needs;

***To have access to rules, policies and procedures pertaining to services and supports;

***To have access to personal records;

***To have personal records maintained confidentially;

***To have services, supports and personal records explained so that they are easily understood;
***To be free from humiliation, retaliation, and financial or other exploitation;

***To have privacy;

***To have access or referral to legal entities for appropriate representation;

***To have access to information pertinent to the person served in sufficient time to facilitate his or her decision making;

***To have informed consent or refusal or expression of choice regarding:
Service delivery
Release of information
Concurrent services
Composition of the Service delivery team
Involvement in Research projects

***To have access to self-help and advocacy support services;
You have the right not to be abused or neglected. Abuse can be physical, verbal, mental, sexual or financial. Neglect is not getting the things you need to be healthy and safe. If you think you are being abused, neglected, or your rights taken away, you, your parents, your guardian, or any other person you choose can contact Albany Regional Center or UCP for help. You can also call the clients rights monitor in Jefferson City at 1-800-364-9687 or TT: 573-526-1201 for help.

People who work for the regional center or UCP must report any abuse or neglect that they see or that people report to them.

REFERRAL PROCEDURE

When a service referral is made inside or outside the organization, pertinent information is recorded and contained in the individual’s file.

Records of persons who have been referred to other agencies for additional or concurrent services shall contain at a minimum the following information:
1. Place, date and reason for referral
2. Contact person
   Report of outcome

Access or referral to advocacy and self-help support services

Families are provided with information about community advocacy groups, trainings and system advocacy opportunities through flyers, newsletter and one on one conversation. Families are also referred to agencies and organizations that promote self-advocacy such as Midland Empire Resources for Independent Living (MERIL).
CORE VALUES

Current Review: 04/26/17

The following values represent the beliefs and guiding principles, which the Board of Directors and employees of United Cerebral Palsy of Northwest Missouri hold in common and agree to put in action as a part of their employment and affiliation with the organization. These core values will be present and serve as a guide as we work with persons receiving services from UCP, their families, fellow coworkers, members of the Board of Directors, and the community as a whole.

We firmly believe in:

· **Integrity and Honesty** To have integrity implies that you adhere to a strict code of ethics and your actions are free from corrupt influence or motive. To be honest is to be truthful and sincere. We agree that integrity and honesty go hand in hand and that both lead to trust, which is critical to perform the work of this organization. With both honesty and integrity present we can be sure that we are striving to do what is right at all times.

· **Teamwork** Teamwork is defined as the process whereby groups of people work together to reach a common goal, to solve a particular problem, or to achieve a specified set of results. We believe that teamwork is key to everyone succeeding. It helps staff grow professionally and provide the best services possible. We believe that when people work together with open communication and the sharing of knowledge, great things can be accomplished.

· **Respect** Respect is showing people consideration and appreciation. In essence it is treating people the way you want to be treated. We agree that showing respect is crucial for successful, productive working relationships and creates an atmosphere where everyone can develop to his/her full potential.

· **Best Services / Practices** We agree that we must provide the best services to people with developmental disabilities and their families within the resources available to us as an organization. In order to do this we also agree that our services must demonstrate best practice, as defined by the industry and include, but not be limited to services being consumer and family directed, outcome oriented, and innovative

· **Consumer Oriented** To be consumer oriented we must focus on the needs of those who come to this organization for services and take our direction from them. We recognize that each individual comes with different needs, concerns, and desires; and the services we offer, and the way in which they are delivered, must reflect those differences.

· **Quality** If something has quality it has a high degree of excellence. We agree that in everything we do we must do it with the highest degree of excellence.
In establishing these codes of ethical conduct UCP recognizes its responsibilities to set high standards of performance, professionalism, and ethical conduct for its board of directors, employees, and volunteers. These codes are to serve as a basis for guiding their daily decisions and actions, and the way in which UCP conducts business.

**Code of Ethical Conduct - It shall be the responsibility of UCP employees and volunteers to:**

- Acknowledge and respect the value and uniqueness of all individuals.

- Support an atmosphere where the input of persons receiving services and their families is encouraged and respected, and where services are designed around their needs and responsive to their expectations, decisions, and choices.

- Assure their words and actions always demonstrate respect for persons receiving services, their families, fellow co-workers, the board of directors, and the community as a whole.

- Be a person of their word, practicing honesty in all situations and with all people they come in contact with as part of their employment or affiliation with UCP.

- Give no less than their best to assure that people receiving services and their families receive the best services possible within the resources available to UCP.

- Value and support the benefits of teamwork and do their best to be a good member of the team working to assure the success of people who receive services and their families.

- Participate in opportunities presented to them to learn more about best practice in the area in which they work. Their performance on the job will demonstrate the implementation of those practices.

- Be a person of integrity refraining from doing anything that might bring harm to the reputation of UCP or have the appearance of professional misconduct.

- Maintain the confidentiality of information acquired in the course of their work except when authorized or otherwise legally obligated to disclose. Confidential information acquired in the course will not be used for personal advantage.

- Be a responsible steward of UCP's resources.

- Recognize that UCP is supported by the community, and that they have an obligation to that community to never knowingly mislead or misinform the public or misrepresent UCP.

- Assure that all community education and marketing activities respect the dignity and privacy rights of those who receive services.

- Support the decisions of management and that while they may state their position, as an employee of UCP, they will respect and follow the final decision of management.

- Act with honesty and integrity, reporting any actual or apparent conflicts of interest in personal and professional relationships.
• No employee or volunteer will accept gifts of material value, favors, or remuneration for personal gain from any individual, client agency, corporation, or organization that does business with UCP. No employee or volunteer will attempt to influence decisions of any funding source through donations of cash, promises of special consideration, or suggestions of any valuable contributions.

• Conform to all applicable laws and legal regulations.

• Report known or suspected violations of this Code in accordance with all applicable policies and procedures

**ACCREDITATION:**

United Cerebral Palsy of Northwest Missouri is accredited by CARF (The Accreditation Commission) in the following areas:

- Child and Youth Services
- Community Employment Services: Job Development and Employment Supports
- Community Integration

UCP of Northwest Missouri responds to requests from the public for information relevant to its accredited services and programs. The agency answers specific questions about the performance of its services and programs. Information is listed in brochures on how to contact the agency.
ADULT PROGRAM STAFF
Director of Adult Services
Glynda King - Bachelor of Science in Psychology; began working in the Adult Program in December 2002; past experience as an Activities Director

Program Specialist
Tabitha Salsberry-Bachelor of Social Work; began working in the Adult Program August 2012; currently oversees all aspects of the individual’s annual plan

Learning Consultant II
Jon Corkins - Bachelor of Science degree in Business Administration; began working in the Adult Program in January 1995; and currently coordinates all community integration activities.
Amy McIntosh- Bachelor of Science in Elementary Education; began working in the Adult Program in June 2005; and currently has various administrative duties.

Learning Consultant I
Cathy Barton-began working in the Adult Program December 2017
Paula Beattie-began working in the Adult Program April 2014
Alexa Blue-began working in the Adult Program May 2017
Heather Collings-began working in the Adult Program January 2016
Carleen Combs-began working in the Adult Program September 2011
Kathy Conway-began working in the Adult Program November 2014
Sheila Davis - began working in the Adult Program September 2005
Tracy Elder-began working in the Adult Program May 2013
Cheryl Fulton- began working in the Adult Program August 2009
LaShelle Jones-began working in the Adult Program March 2010
Jami Lake-began working in the Adult Program February 2012
Paula Medley-began working in the Adult Program May 2015
Melissa Mullins-began working in the Adult Program February 2017
Lorrie Norris-began working in the Adult Program November 2014
Darion Roberts-began working in the Adult Program May 2016
Sheila Shipley- began working in the Adult Program November 2009
Jenny Snow-began working in the Adult Program July 2017
Tayler Stewart-began working in the Adult Program September 2016
Shannon Sutton-began working in the Adult Program November 2014
Alli Wilson- began working in the Adult Program November 2010
Tisha Worley-began working in the Adult Program September 2016

Learning Consultant I – Substitutes
Susan Bunse- began working in the Adult Program January 2012
Sherri Evans-began working in the Adult Program January 2017
Rachel McIntosh – began working in the Adult Program June 2005
Tim Moore-began working in the Adult Program August 2014
Carolyn Sutton-began working in the Adult Program April 2014
Required Training:
The following is a list of required training for all adult program staff:

***Avoiding Abuse and Neglect
***Positive Behavior Support
***CPR, First Aid and AED
***Blood borne Pathogens/UCP Exposure Control Plan
***Emergency Preparedness
***Correct Event Reporting
***Policy and Procedure Review
***Confidentiality: HIPPA Privacy Rule
***Transportation training is provided for any staff who transports consumers in the community.

***UCP believes in Continuing Education and sends staff to additional training that is beneficial to the support they provide to consumers.

***UCP also has an all day staff training once a year to promote team building and training to enhance their skills in the area of supporting individuals with disabilities.

***Staff designated to administer medication at UCP will be certified in an approved medication administration program prior to administering medication at UCP.

MINIMUM REQUIREMENTS OF STAFF

DIRECTOR OF ADULT SERVICES
Bachelor's degree in social service or related field, and minimum of three years related experience working with people with developmental disabilities.

PROGRAM SPECIALIST
Associate’s degree in social service or related field, and minimum of two years related experience working with people with developmental disabilities.

LEARNING CONSULTANT II
Bachelor's degree in social service field and one year of pertinent experience working with people with developmental disabilities (experience may be substituted for education)

LEARNING CONSULTANT I
High school diploma or equivalent; pertinent experience working with people with developmental disabilities is preferred.