



Operations Manual

2025

**P.O. Box 647
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Pathfinderinc.org
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General Information

Mission Statement

Pathfinder, Inc. is dedicated to the development and implementation of individually designed strategies that enable people with developmental disabilities to pursue total access to community life.

Philosophy

A basic concept of Pathfinder, Inc. is that all people, regardless of individual differences and intellectual abilities, have an inalienable right to programs and services which are consistent with their needs and help them to achieve their maximum potential.

Pathfinder, Inc. seeks to provide the best possible programs and services for individuals with developmental disabilities to expand their growth opportunities. Pathfinder's focus always remains on helping to enrich the quality of life for the people we serve.

Underlying these concepts are the beliefs that: all human beings have intrinsic worth regardless of intellectual ability; that all human beings have potential for development; and that, with few exceptions, every human being has both the ability and the duty to contribute something of value to his fellow man.

Service Goals

The service goals developed in light of this philosophy are:

- To help the individual with developmental disabilities become or remain self-sufficient by seeking to develop personal, social, academic and problem solving skills necessary to function independently in society.
- To protect children and adults who cannot protect themselves from abuse, neglect and exploitation and to help families stay together by providing day programs for individuals with developmental disabilities.
- To arrange for appropriate placement and services that provide the least restrictive environment and which is in the individual's best interest.

Strategic Integrated Planning

Statement

Pathfinder, Inc. is dedicated to maintaining and enhancing services to the individuals we serve through organized and long range plans. All levels of key stakeholders, staff, and board members are included in the integrated strategic planning process. The written Pathfinder Strategic Plan sets goals, priorities, and is implemented and shared with individuals, key stakeholders, all levels of staff, and the Pathfinder Board. Every year the Pathfinder Strategic Plan is updated with new and revised goals based upon the current projected finances, expectations, and capabilities of the organization.

Pathfinder, Inc. Board Input

The Pathfinder, Inc. Board reviews, makes recommendations, and approves the strategic plan annually. The Pathfinder Board is dedicated to ensuring our continued service in efficient, effective, and inclusive methods.

Individual Persons Served and Other Stakeholders

Individual persons served and other stakeholders have input to the strategic planning of the organization by participating in yearly satisfaction surveys and offering input through the program and organizational planning process. Pathfinder, Inc. maintains an Open Door Policy to acquire and include suggestions from individuals and families by their participation in the program and services planning for the individual served. Key stakeholders are given opportunities to provide input through yearly satisfaction and input surveys, participation in monthly board meetings and other areas of the organization that offers the opportunity for input.

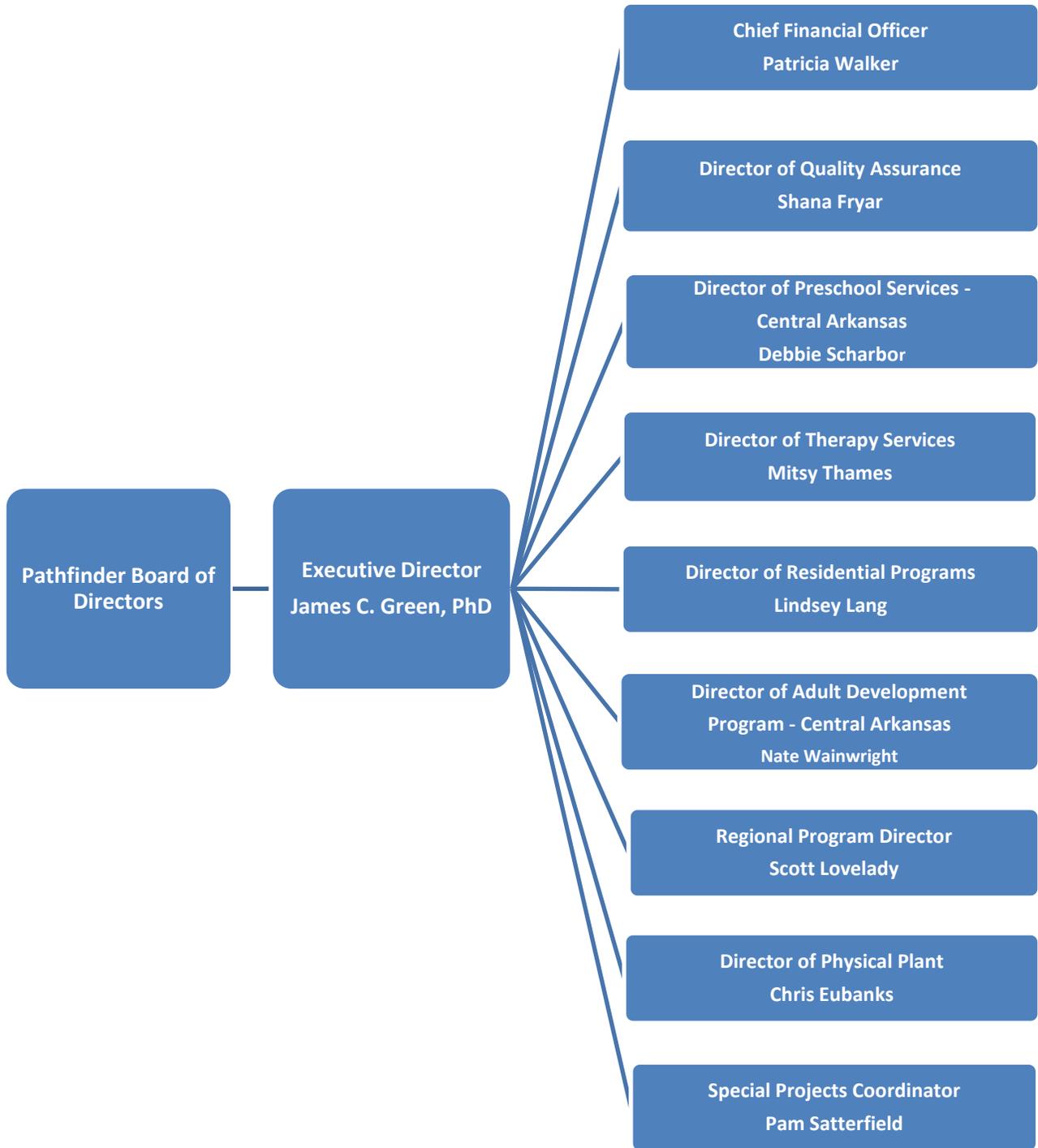
Employee Input

The Executive Director is to conduct meetings yearly with department heads in order to strategically plan to meet and/or expand each department's service needs for the year. Employees' input on regular anonymous satisfaction surveys are considered and included as feasibility and finances allow. Goals and objectives for the agency are incorporated as appropriate in the employee evaluation process. Pathfinder, Inc. also maintains an open door policy to acquire and include any and all suggestions from employees in our planning and development.

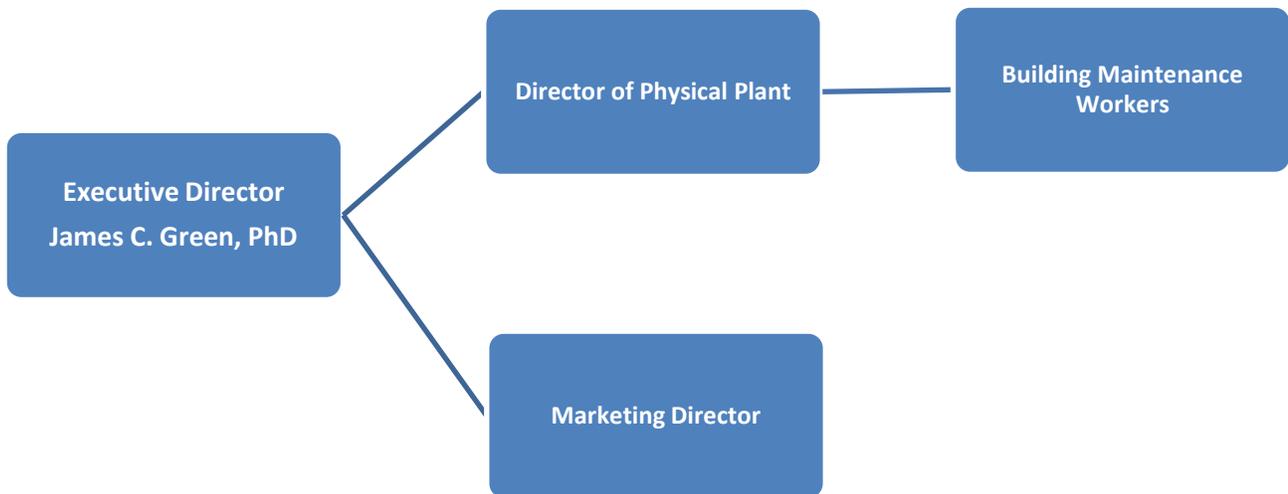
Competitive Environment

Pathfinder, Inc. maintains a relationship with other providers of similar services through membership in several provider associations. Pathfinder participates in a number of provider associations and related groups such as the Arkansas Health Care Association, Developmental Disabilities Provider Association, and the Arkansas Transit Association. Our strategic planning considers at all times the financial threats, opportunities, service needs and current capabilities of our service population. Pathfinder's goal is to meet the service needs of individuals with developmental disabilities in the state of Arkansas. Pathfinder maintains relationships with external stakeholders, state and local regulatory bodies, legislative entities, parent groups, and advocacy organizations to maximize capabilities and opportunities to expand and meet the service needs of our target population.

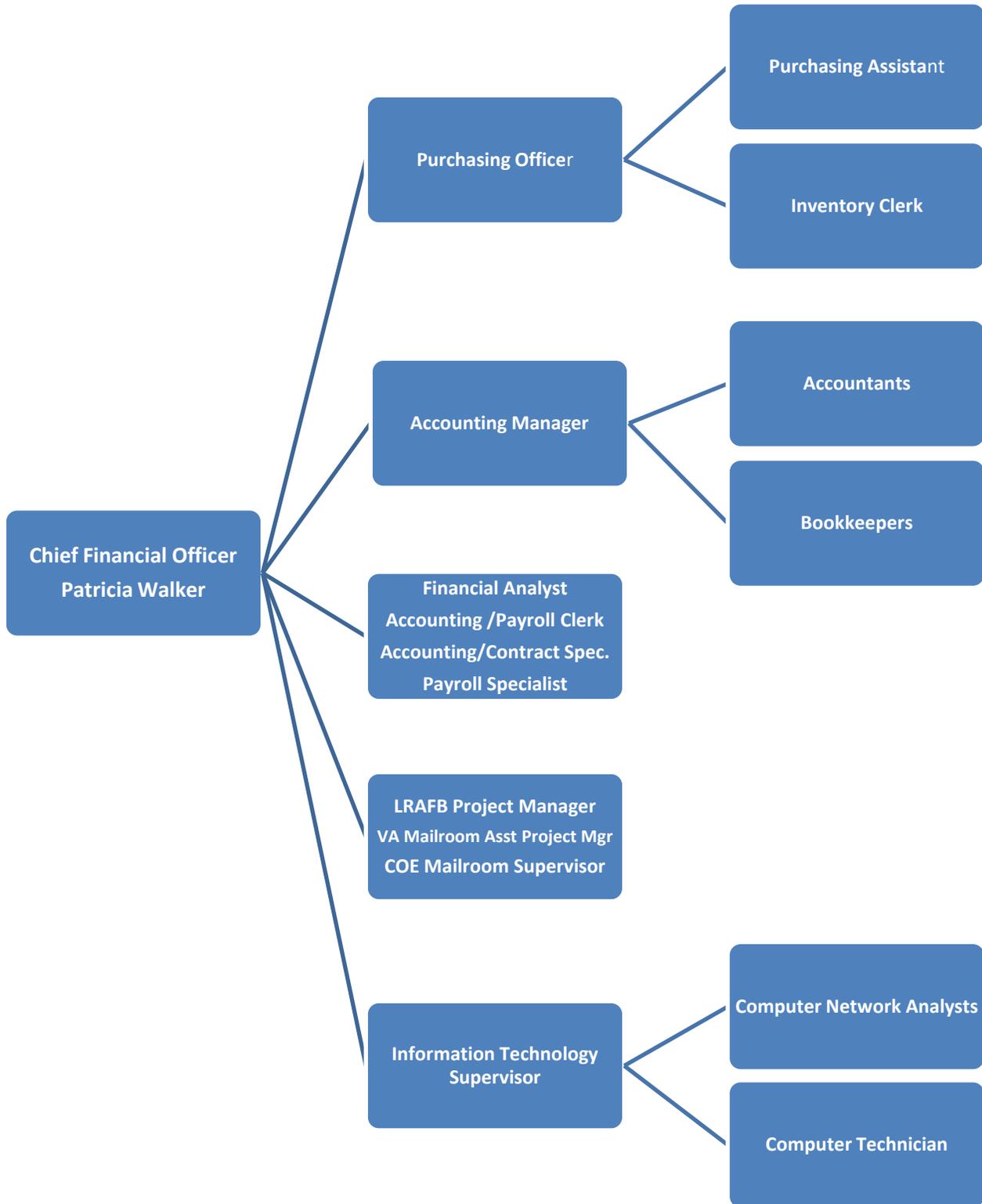
Administration Organizational Chart



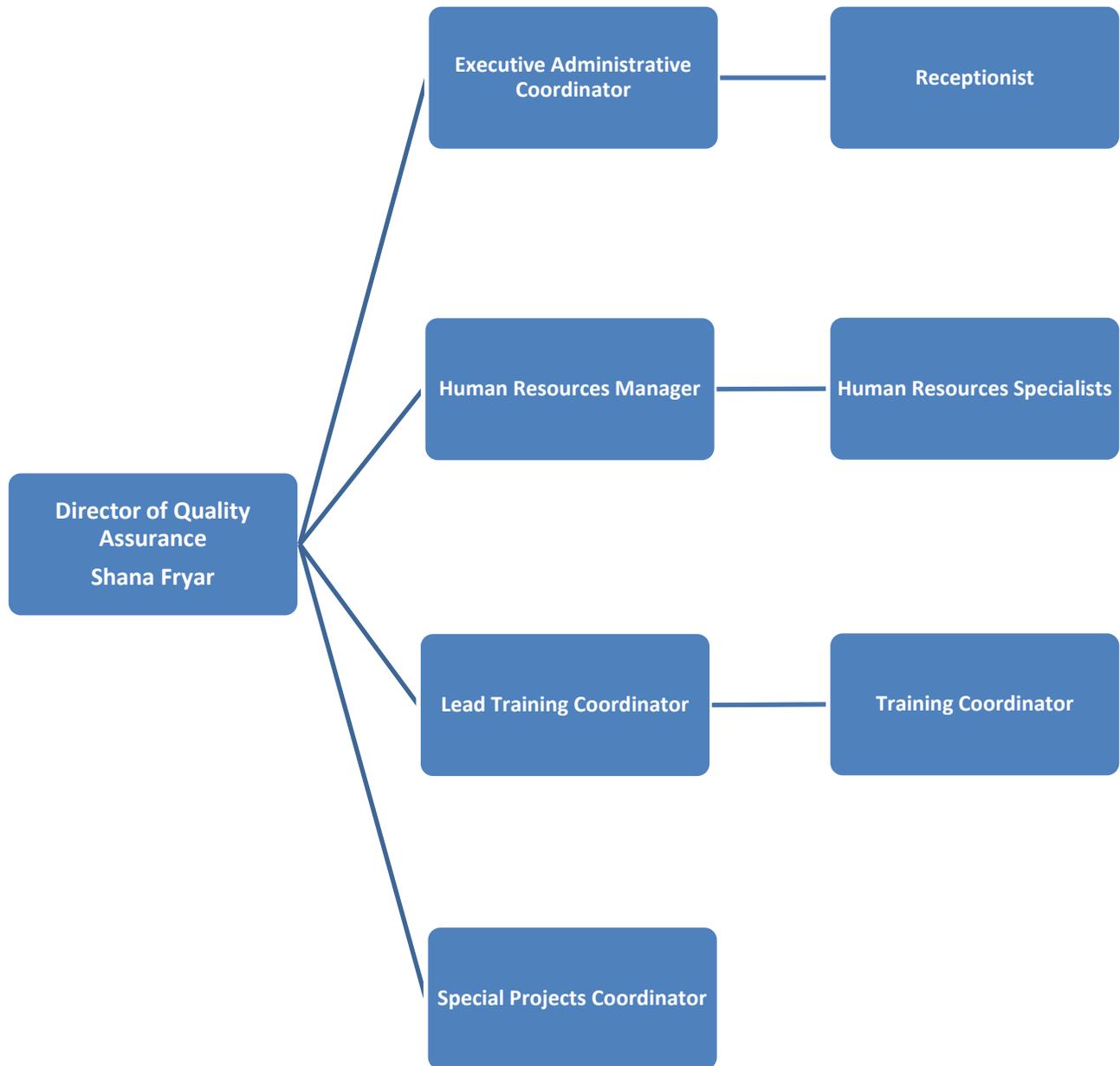
Physical Plant and Marketing



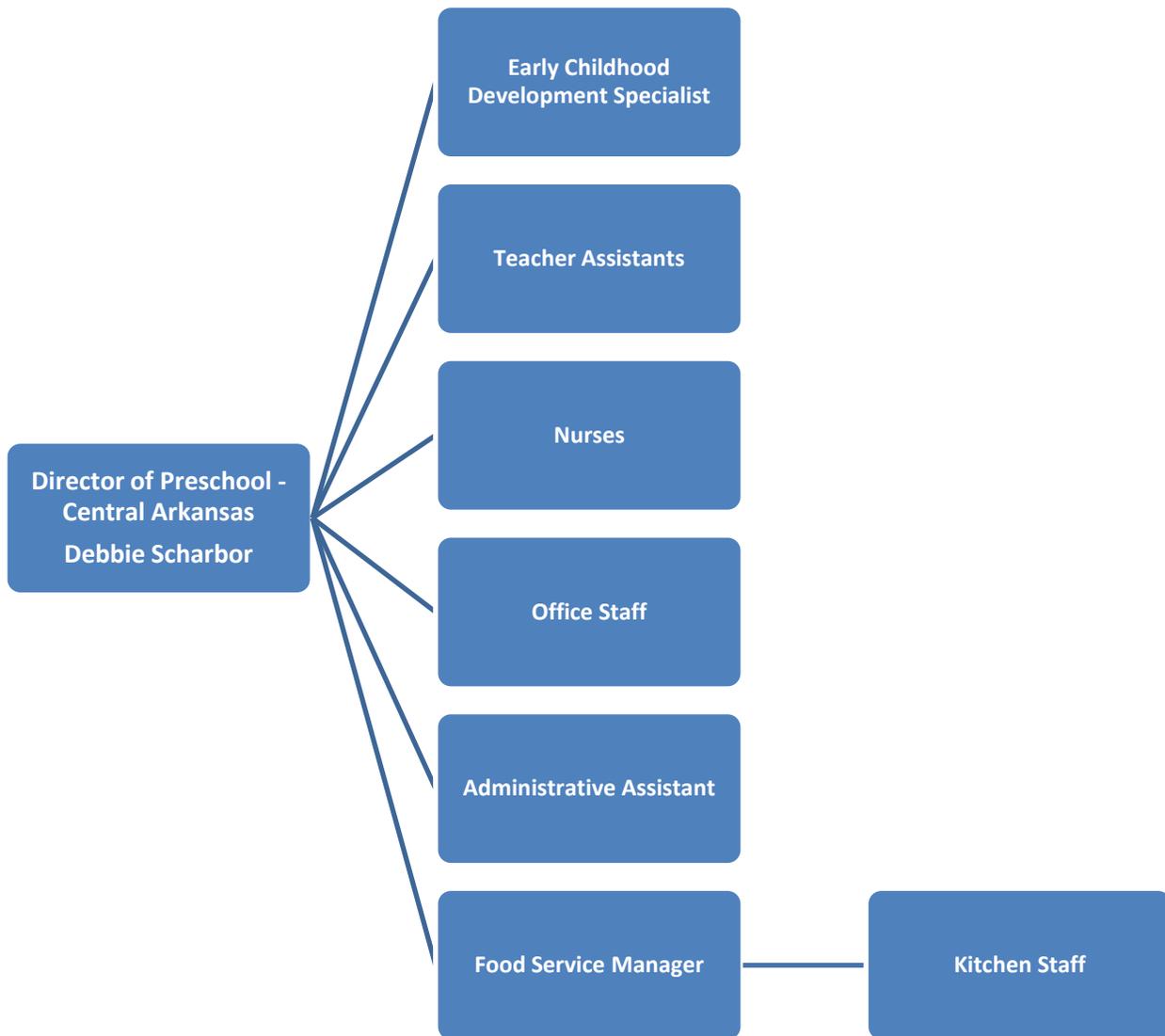
Finance and Information Technology



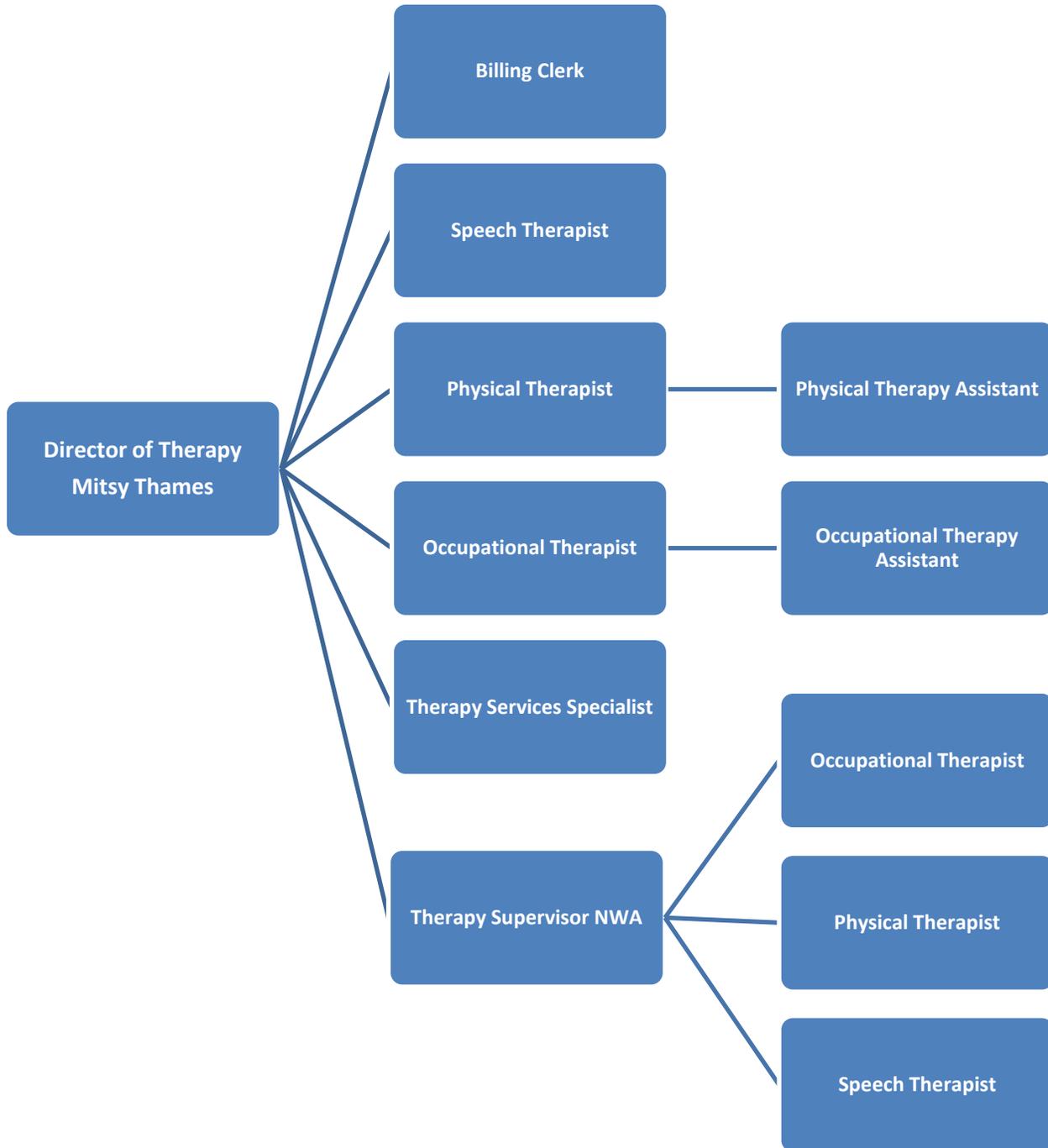
Administration, Training, and Human Resources



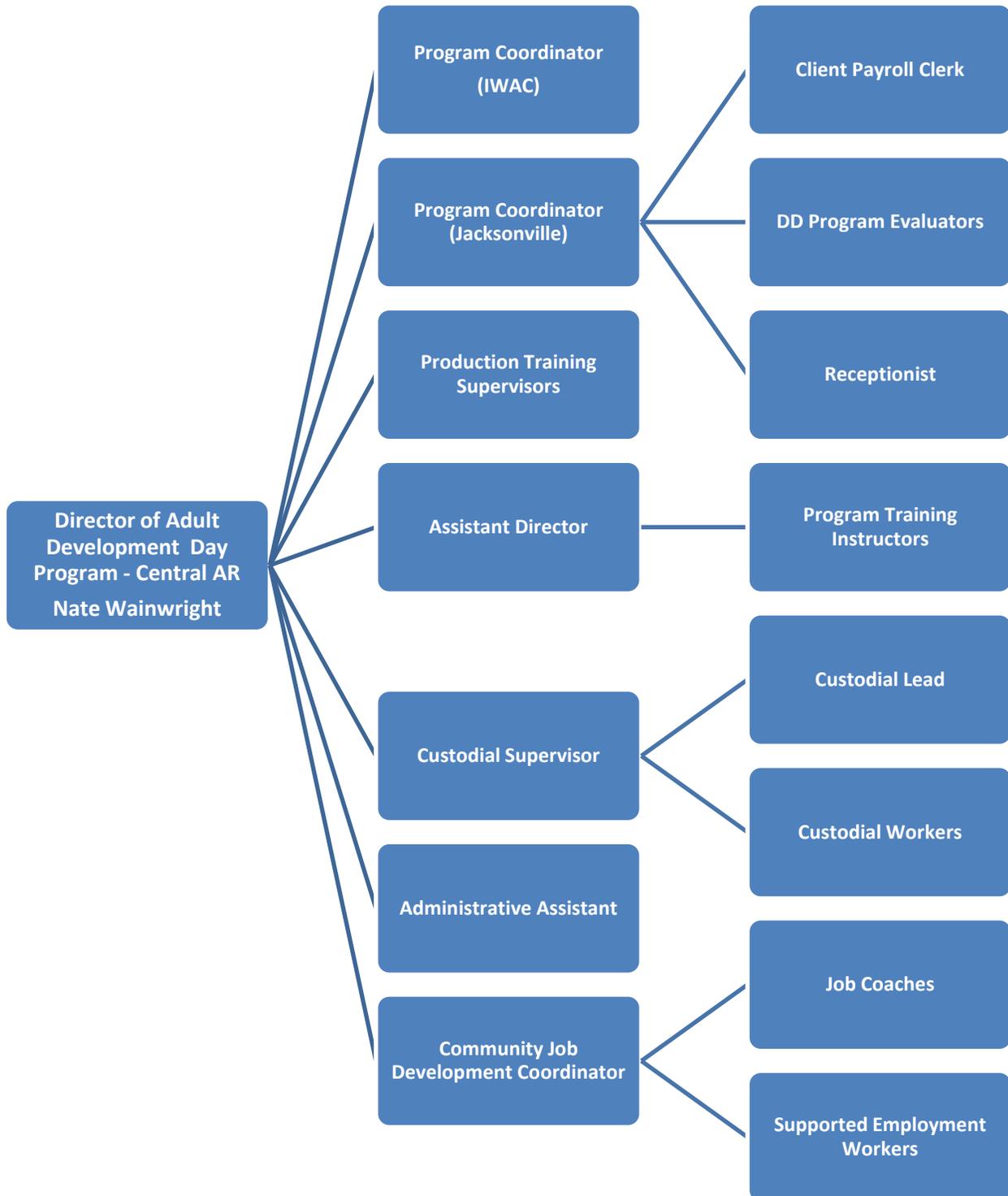
Early Intervention Day Treatment



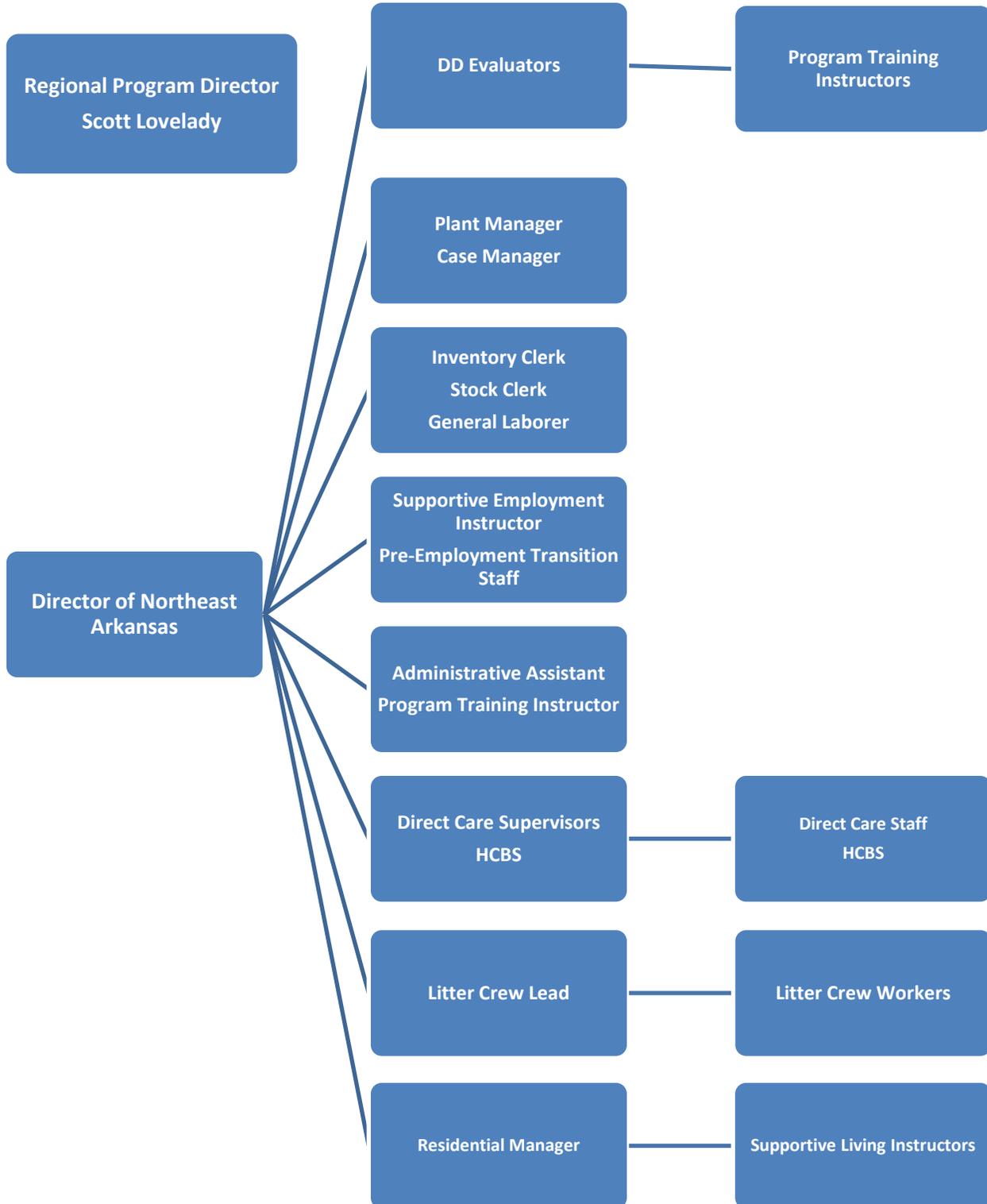
Therapy Services



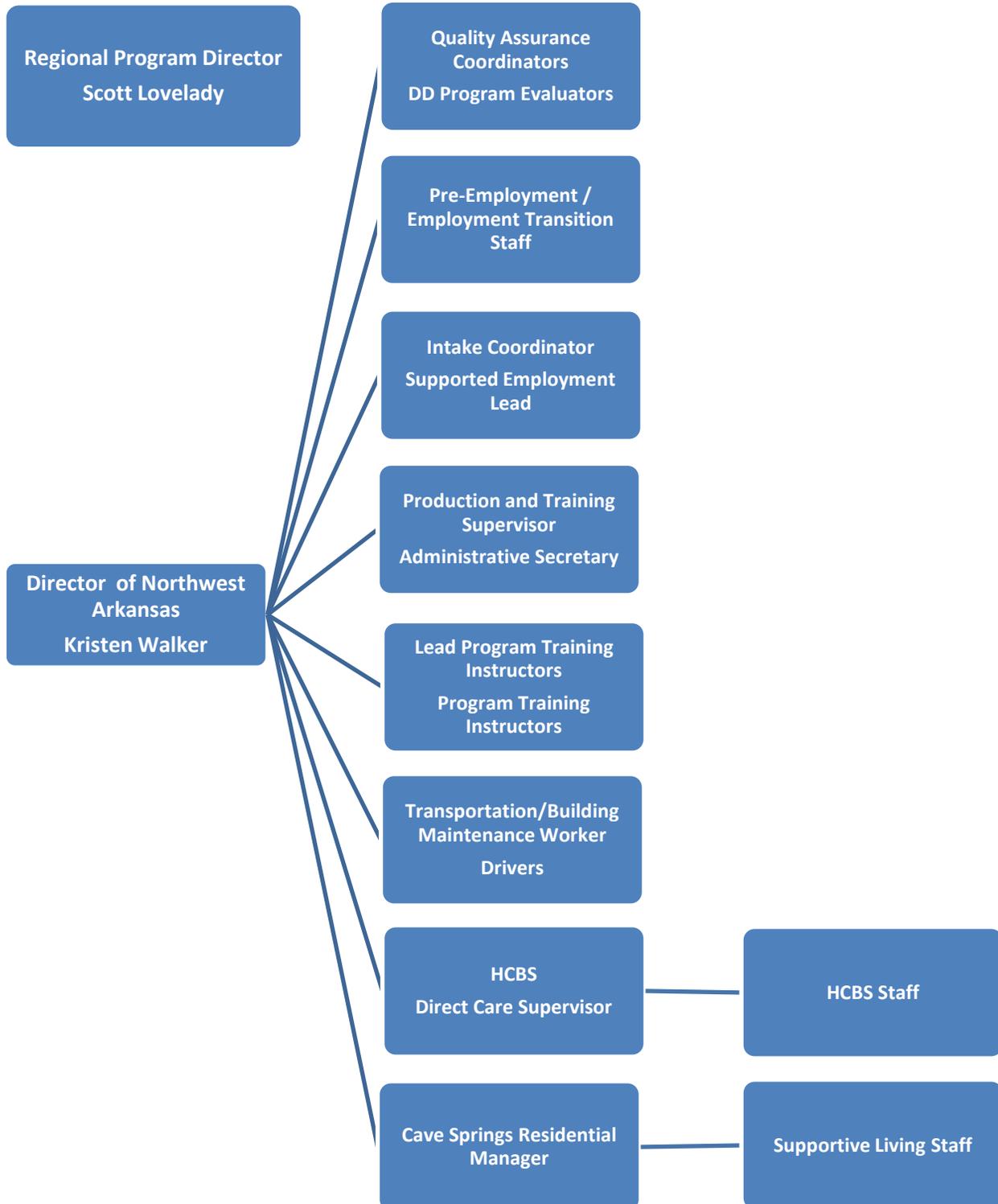
Adult Developmental Day Treatment Program - Central Arkansas



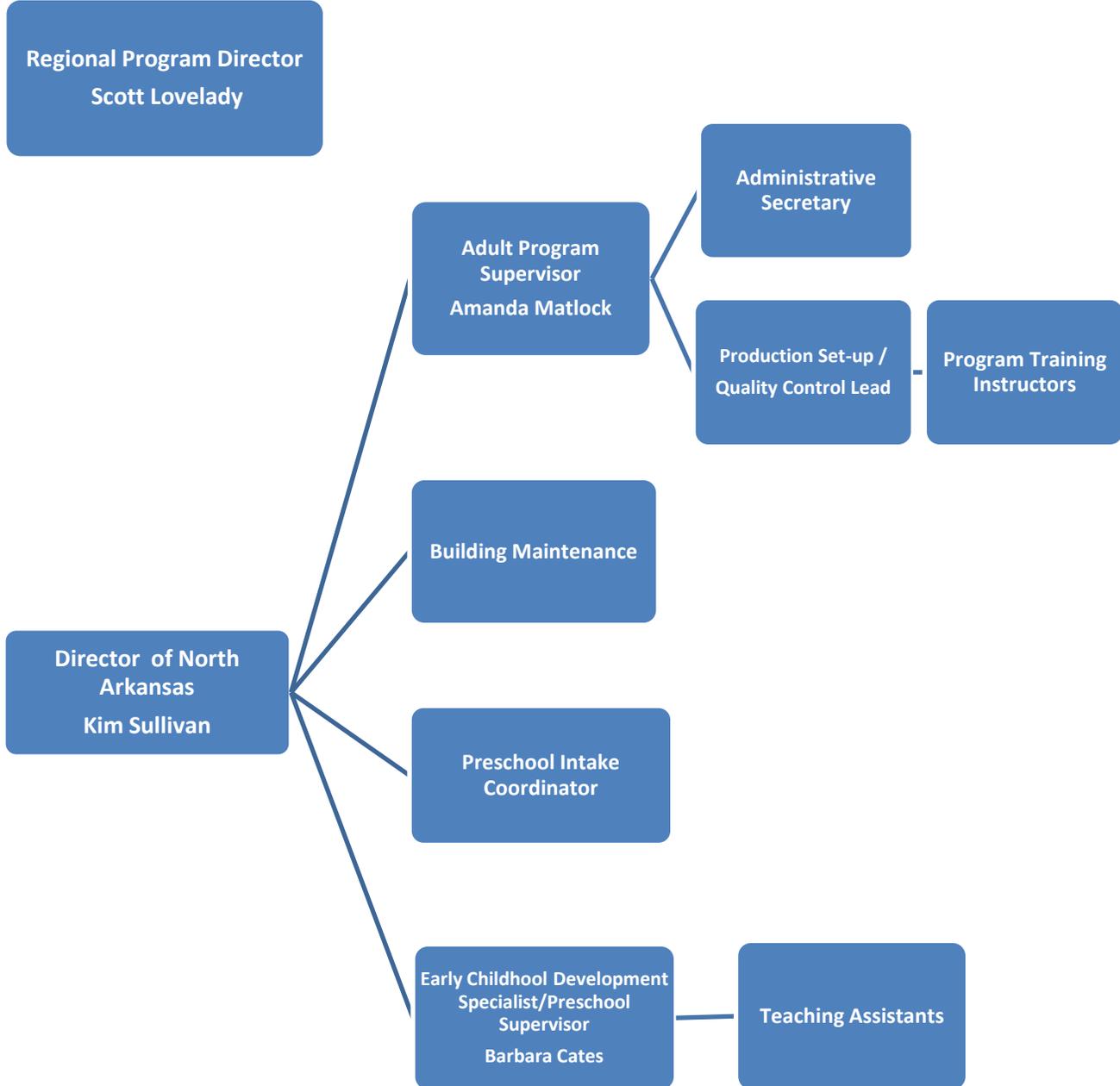
Northeast Arkansas Regional Services



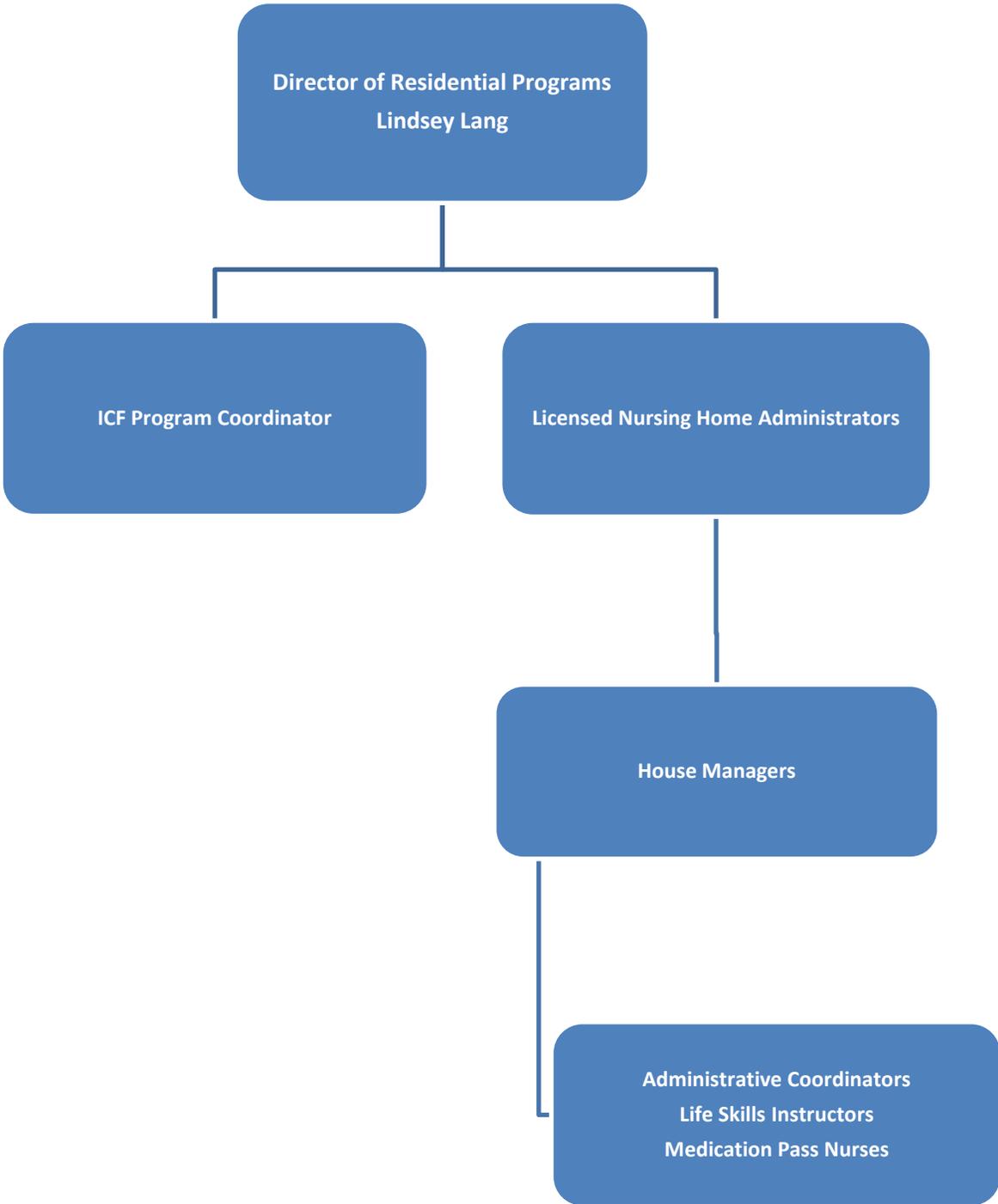
Northwest Arkansas Regional Services



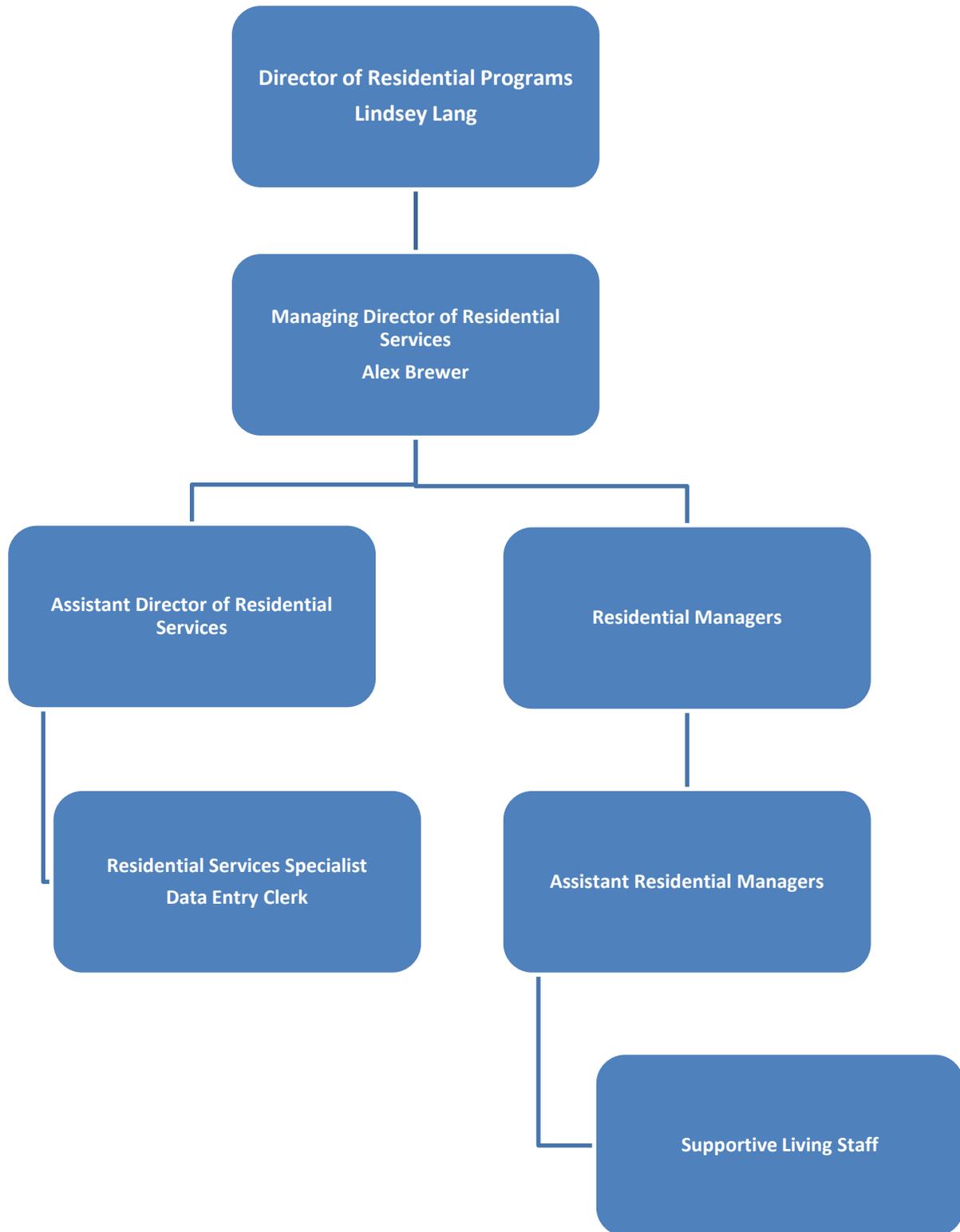
North Arkansas Regional Services



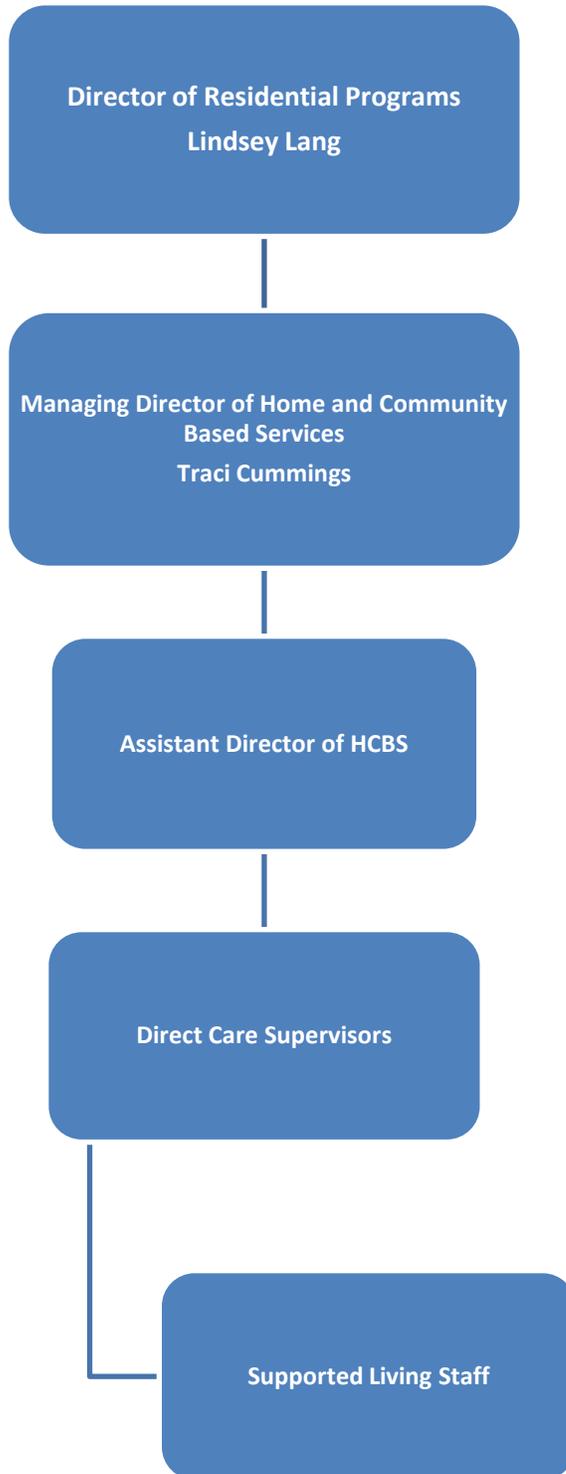
Intermediate Care Facilities for Individuals with Intellectual Disabilities



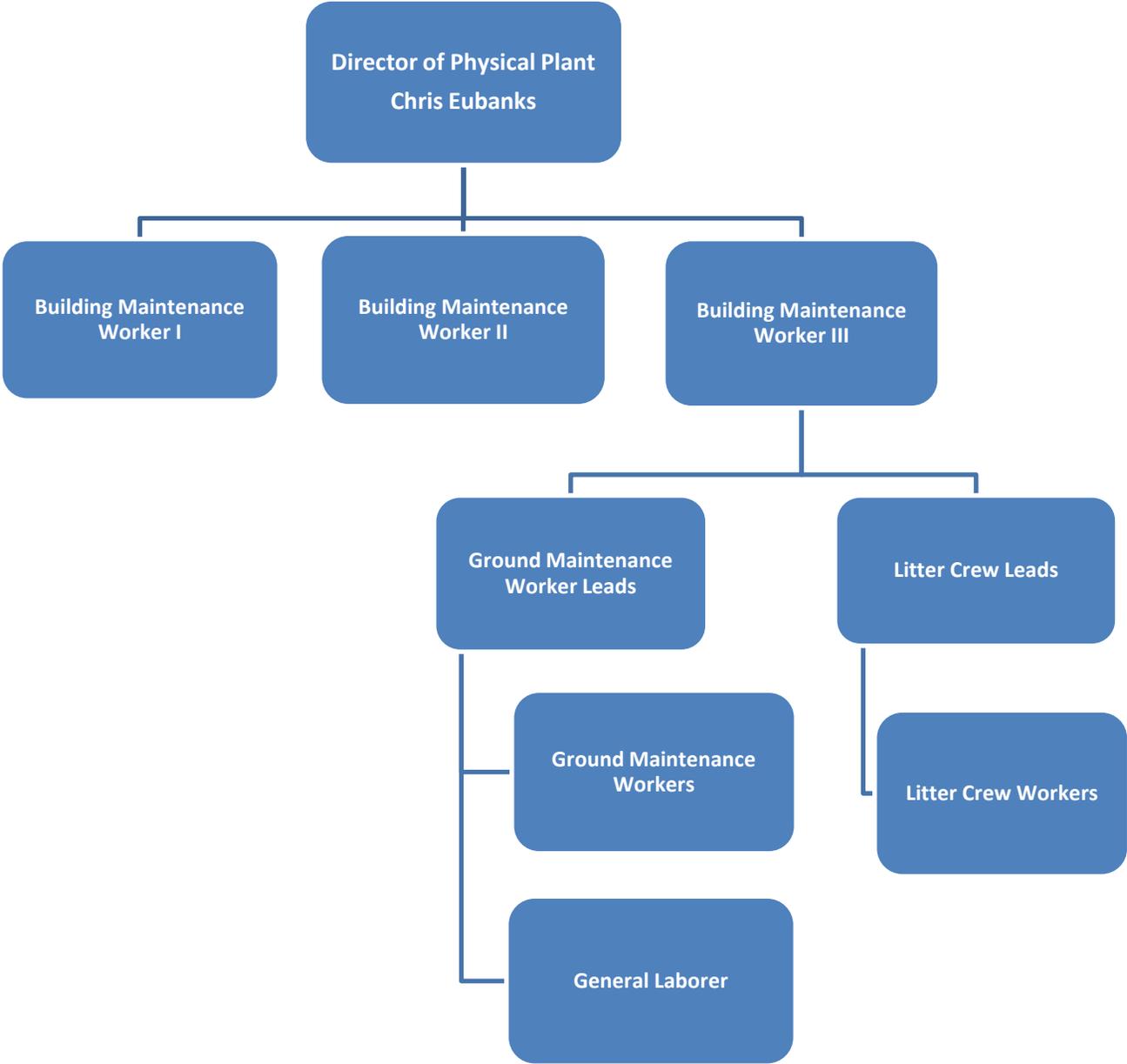
Residential Services



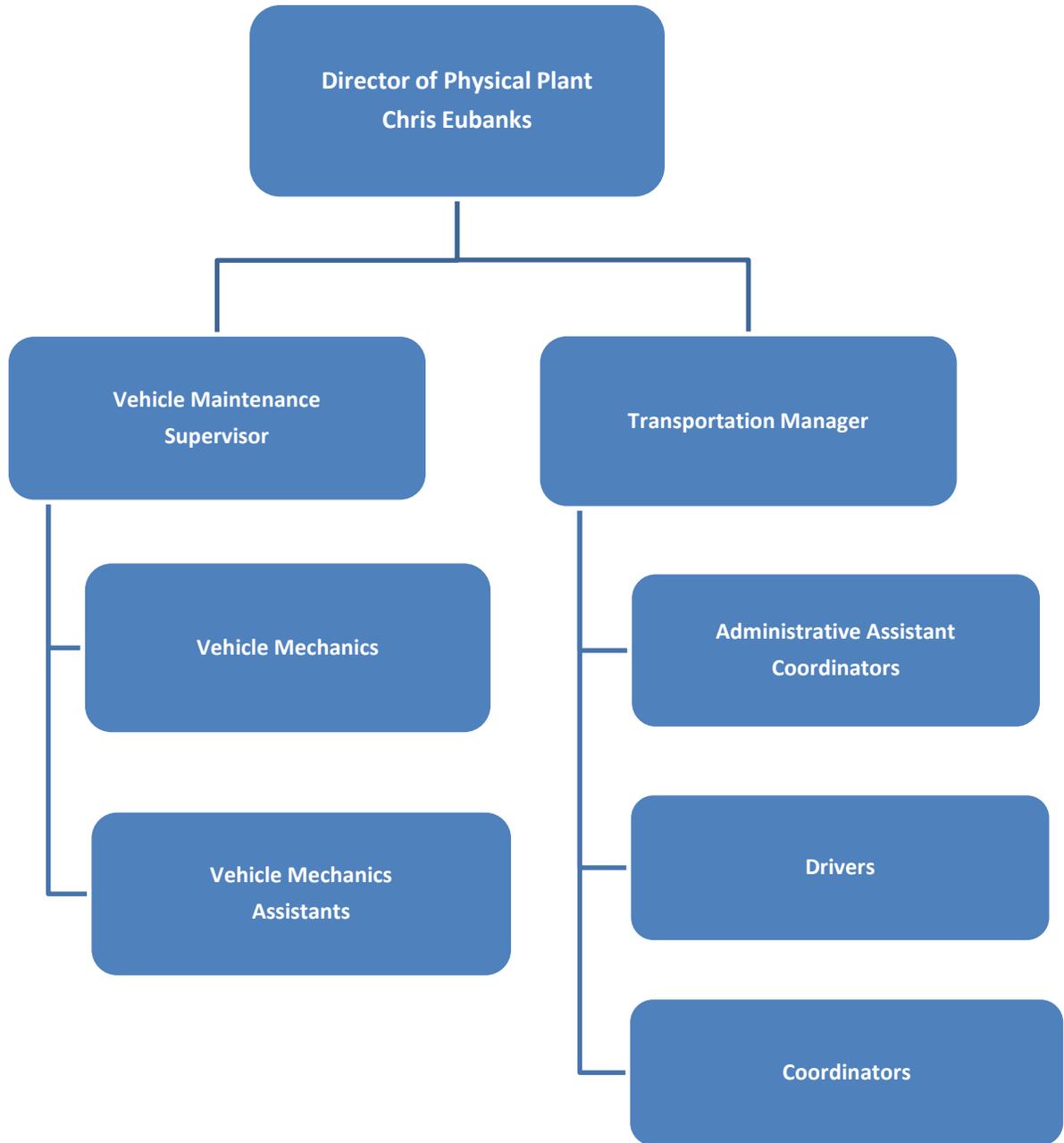
Home and Community Based Services – Central Arkansas



Physical Plant



Transportation

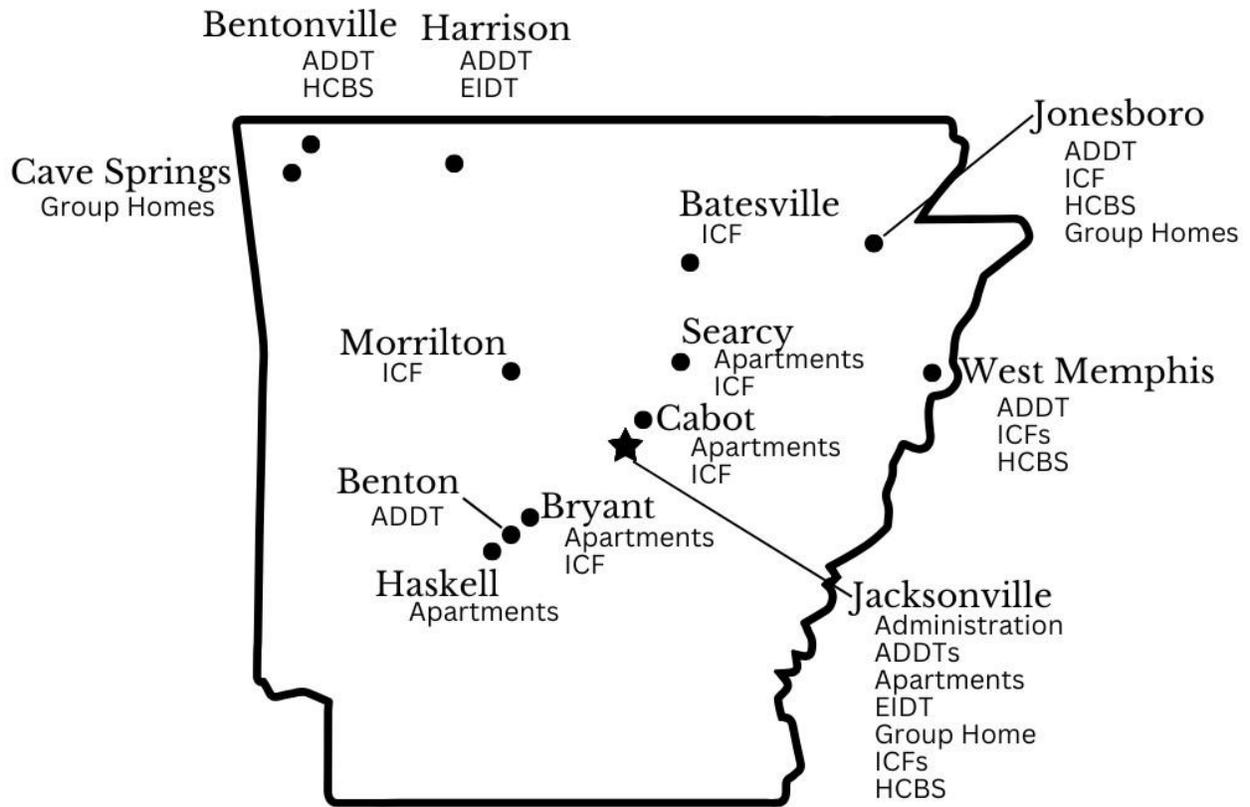


Map of Services



Pathfinder, Inc.

FOSTERING INDEPENDENCE



ADDT - Adult Development Day Treatment
EIDT - Early Intervention Day Treatment
ICF - Intermediate Care Facility
HCBS - Home and Community Based Services

Governing Board of Directors

NAME	OFFICE	ELECTION DATE	TERMS
Jan Baker 127 Wellington Plantation Lane, Little Rock, AR 72211 Phone: 703-677-6287	Chair	November 2025	3 years
Meredith Taylor 998 Apple Blossom Lane, Tontitown, AR 72762 479-283-6952	Vice-Chair	July 2024	3 years
Lisa Bamburg (Consumer Representative) 180 Maplewood Dr. Cabot, AR 72023 Phone: 501-658-5613	Secretary	November 2025	3 years
Randy Lann (Consumer Representative) 9 Gander Pointe, Vilonia, AR 72173 Phone: 501-835-8829	Member	December 2025	3 years
Baxter Drennon 500 President Clinton Ave, Suite RL20, Little Rock, AR 72201 Phone: 501-265-9927	Member	December 2023	3 years
John Burkhalter 26 Collins Industrial Place, North Little Rock, AR 72113 Phone: 501-539-3003 Office: 501-753-6400	Member	December 2023	3 years
Barbara McCreight 4020 Elizabeth Court, Benton, AR 72019 Phone: 501-944-0398	Member	November 2025	3 years
Andrew Branch 5738 S. Chanberry Lane, Rogers, AR 72758 501-722-8784	Member	May 2023	3 years
Matt McClendon (Consumer Representative) 26 Edgehill Rd, Little Rock, AR 72207 501-240-5600	Member	August 2023	3 years

BOARD OF DIRECTORS POLICIES

Pathfinder, Inc. is a private non-profit organization, legally constituted, corporate entity having Articles of Incorporation, Bylaws which are cognizant with the operation of the corporation. The organization has a set of bylaws which provide for the selection of board members, including terms of membership, replacement of directors, election of officers and directors, as well as the appointment of needed committees.

The Board of Pathfinder, Inc. is organized to facilitate the efficient transaction of the business procedures of the organization. The organizational structure provides the following duties and responsibilities of the Board of Directors, the functions of standing committees and the lines of communication with the Executive Director and designated staff. In order to keep the members of the Board informed of the activities of its governance, the Board has established an attendance policy, dismissal policy, and restrictions concerning nepotism and conflict of interests.

The Board of Directors of Pathfinder, Inc. and its committees are planned, organized, and conducted in accordance with its laws, policies, applicable statutes, and other appropriate regulations.

RESPONSIBILITIES

Meetings

The Board of Directors of Pathfinder, Inc. conducts its meetings in a place accessible to the public and uses the policy and format of Robert's Rules of Order for all meetings. The Secretary of the Board maintains an official transcript of each meeting and transaction. Written minutes of each previous Board meeting are distributed to each Board Member and are available to both the organization and employees of Pathfinder, Inc. and the public. To allow the Board of Directors of Pathfinder, Inc. to exercise their best judgment, all materials are distributed and made available to the above mentioned parties for their consideration.

Governance

The Board of Directors of Pathfinder, Inc. maintains overall responsibility for the administration and governance of the organization. The Board of Directors appoints directors whose qualifications, authority, and duties are described in writing.

Delegation

The Board delegates the implementation of policies, authority and responsibility to the directors for the management of the organization in accordance with established policy. It is the duty of the directors to establish the number and type of employees, set their salaries, maintain and review personnel policies, maintain job descriptions for each position which includes duties, responsibilities, and qualifications desired for each respective position, which are reviewed and approved annually by the governing board.

Strategic Plan

The Board of Directors maintains a strategic plan which identifies the annual and long range needs of the

proposed goals and service needs. This plan describes community needs and target populations which are reviewed and updated annually. Consumers and organization employees review evidence of this plan.

Monitoring

The Board of Directors monitors the decisions and operations of each program of the organization. The Board receives regular reports on organization operations reflecting available services, deviations from original goals, or other operational changes. The Board receives monthly expenditure reports reflecting changes, budget deviations, and fund balances. An annual "Fiscal and Programmatic Report" is prepared reflecting the current program and operation.

Evaluation

The Board of Directors has provisions for periodic evaluation of its programs in relation to its program goals. At least once annually the Board of Directors discuss short and long-term goals as it relates to the Pathfinder, Inc. mission, programs, stakeholders and individuals served.

BY LAWS

Article One: Offices

The principal office of the corporation shall be located at 2520 West Main, Post Office Box 647, City of Jacksonville, County of Pulaski, State of Arkansas, 72078. The corporation may have such other offices as the Board of Directors may deem necessary and appropriate from time to time.

Article Two: Board of Directors

Section 1- Class of Members: Members of the Board of Directors shall consist of two (2) classes, to be known as Active Board of Directors and Board of Directors Emeritus.

Section 2- Election of Members: Active Board of Directors: A group of no less than five (5) and no more than thirteen (13) shall be appointed to serve as the Active Board of Directors of the Corporation. The Board of Directors, and/or its/their authorized committee(s), shall solicit individual(s), business(es), corporation(s), or organization(s) for appointment to serve a three (3) year term as voting member of the Active Board of Directors.

- *Appointment:* Designation of members shall be made on an annual basis of no less than two (2) and no more than five (5) members so as to provide staggering of terms on the Active Board of Directors and such appointments shall be made at a regular time each year as designated by the Board of Directors. Board members will be allowed to succeed themselves for continual appointment if such is determined by the Board of Directors to be in the best interest of the Corporation.
- *Concern and Interest:* Appointment to the Active Board of Directors shall be after due consideration is given to a potential member's concerns and interests of and toward those served by the Corporation.

- *Selection of Board of Directors:* Selection of Board of Directors shall require that a minimum of twenty (20) percent of Board members be composed of either family members/consumers of services for the developmentally disabled and/or advocates for such.
- *Board of Directors Emeritus:* There shall also be a class of membership of the Board of Directors known as a Board of Director Emeritus. Said status shall be granted to any Active Board of Director member (s) who shall no longer wish to actively participate on the Board of Directors after tenure of no less than nine (9) years service as an Active Board of Directors member. In said capacity, a Board Member Emeritus may attend any and all Board meetings, though attendance is not required. Further, said Board Member Emeritus shall not be considered a voting member of the Active Board of Directors and shall not be counted as a member present so as to constitute a quorum at a meeting of the Board of Directors. Emeritus status shall be granted to a Board member for no more than ten (10) years.

Section 3- Voting Rights: Each director in good standing shall be entitled to one (1) vote on each matter submitted to a vote of the Active Board of Directors. However, no individual shall cast more than one (1) vote on any matter, regardless of how many member organizations said individual might represent.

Section 4- Termination of Membership: The Board of Directors, by affirmative majority vote of these members present at a regularly scheduled meeting of the Board of Directors of which a quorum is present, may suspend or expel a member of the Board of Directors for cause after an administrative hearing is held on the matter. By majority vote of those present at any regularly constituted meeting, the Board of Directors may terminate the membership of any director who becomes ineligible for membership and/or suspend/expel any director for just cause shown. A Policy may be adopted by the Board of Directors to provide for the removal of those Board of Directors members for just cause, to include, but not be limited to, absenteeism, lack of activity or volunteer services, action or demeanor against the overall principles and purpose of the organization, and other such good and proper causes.

Section 5- Resignation: Any member of the Board of Directors may resign by filing a written resignation with the Corporation Secretary. Such resignation, however, shall not relieve the member resigning the obligation to pay the balance of any unpaid pledges to the Corporation.

Section 6- Reinstatement: Upon written request signed by a former member of the Board of Directors and filed with the Corporation Secretary, the Active Board of Directors, by an affirmative vote of two-thirds (2/3rds) of the members of said Board, may reinstate such former member to membership of the Active Board of Directors under such terms as the Board of Directors deems appropriate.

Section 7- Transfer of Membership: Membership in this Corporation is neither transferable nor assignable.

Article Three: Meetings of Members

Section 1- Monthly Meeting: A monthly meeting of the members of the Board of Directors shall be held on the fourth (4) Thursday of the appropriate month of each year at 11:30 a.m., or as otherwise designated or required, for the purpose of transaction of business before the Active Board of Directors. Five (5) days written notice (via personal service, U.S. mail (postage prepaid) facsimile, and/or email) shall be given at each meeting. If the day fixed for the monthly meeting is a legal holiday in the State of Arkansas, such meeting shall be held on the next

succeeding business day. The Chair of the Corporation and/or the Board of Directors shall have the authority to postpone or reschedule any monthly meeting for just cause shown.

Section 2- Special Meetings: Special meetings of the members of the Board of Directors and/or Executive Committee may be called by the Chair, two (2) members of the Executive Committee, or not less than three (3) of the members of the Board of Directors holding voting rights.

Section 3- Notice of Meetings: Written notice stating the place, day, and hour of any meeting of members shall be delivered in person, facsimile, and/or email to each Board member not less than twenty-four (24) hours prior to the date of such meeting, by or at the direction of the Chair, the Secretary/Treasurer, the Executive Committee, or Board members calling said meeting.

- *Special Meeting:* In the event of a Special Meeting or when required by the By-Laws, the purpose(s) for which the meeting is called shall be stated in said notice. If facsimile transmission is used, the notice is deemed delivered when confirmation of such delivery is provided by the Sender's facsimile machine. If email notice is provided, it shall be deemed delivered when the Sender's computer notes confirmation of the transmission of the notice. Under special circumstances, the Chair may cancel, change, or call a regular or special meeting of the Board of Directors and waive the minimum of twenty-four (24) hours notice to all members in good standing of the Board of Directors.

Section 4- Quorum: Active Board of Directors members constituting fifty-one (51) percent of the eligible votes that may cast votes in any meeting shall constitute a quorum at such a meeting. If a quorum is not present at any meeting of the Board of Directors, the members present will adjourn the meeting without conducting any business other than to set a new meeting date.

Article Four: Board of Directors

Section 1- General Powers: The affairs of the Corporation shall be directed by its Board of Directors.

Section 2- Tenure and Qualifications: Directors shall be appointed on an annual basis for a three (3) year term. Vacancies may be filled at any time by notification to the Corporation Secretary. Directors shall serve as active members of the Corporation, subject to the policies and procedures adopted by the Board of Directors and the Corporation By-Laws.

Section 3- Compensation: Members of the Board of Directors shall not receive any salary for their services and shall do so solely on a volunteer basis. However, by action of the Board of Directors through a two-thirds (2/3rds) majority vote of those present (provided a quorum exists), a fixed sum reimbursement of expenses may be allowed to those Board of Directors who attend meetings, conferences, or programs sponsored or supported by the Corporation when the purpose of enhancement of the services provided by the Corporation is the main objective of the meeting, conference, and/or program.

Section 4- Board Decisions: The act of a majority of the Active Directors present at a Board of Directors meeting at which a quorum is present shall be the act of the Board of Directors. Such an act shall represent the majority view of the Corporation, unless the act of a greater number is required by law or through these By-Laws.

Article Five: Contracts, Checks, Deposits, and Gifts

Section 1- Contracts: The Board of Directors may authorize any officer, officers, agent, or agents, of the corporation, in addition to the officers so authorized by these By-Laws, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the corporation, with such authority in a general or specified nature, depending upon the circumstances. All contracts shall be executed by the President and Secretary of the corporation, unless required otherwise.

Section 2- Checks, Drafts, or Orders: All checks, drafts, or orders for the payment of money, notes, or other evidences of indebtedness issued in the name of the corporation shall be signed by such officers and agents of the Corporation in such a manner as prescribed by the Board of Directors. In the absence of such determination by the Board of Directors, any such instrument shall be signed by two (2) of the following officers: Chair, Vice-Chair, or Secretary/Treasurer, Director at Large, and/or as designated and approved by the Board of Directors.

Section 3- Deposits: All funds of the corporation shall be deposited from time-to-time to the credit of the corporation in such banks or other depositories as the Board of Directors may select.

Section 4- Gifts: The Board of Directors may accept, on behalf of the corporation, any contribution, gift, bequest, or devise, for use to satisfy any and all lawful purpose(s) of the Corporation.

Article Six: Books and Records

The Secretary shall keep a complete set of books and records of accounts and shall keep Minutes of the proceedings of its members, Board of Directors, or various Board committees. The Corporation shall also maintain at its principal office record(s) giving the names, addresses, and telephone numbers of the members of the Active Board of Directors. All books, records, or documents of the Corporation may be inspected by any member, his/her agent, or attorney, for any proper purpose upon reasonable notice to the appropriate record keeper of the Corporation during normal business hours.

Article Seven: Fiscal Year

The fiscal year of the Corporation shall begin on the first day of July in each year and shall end at midnight on the thirtieth day of June of the following year. An annual audit will be performed by parties named by the Board of Directors, with a written report made available to all Active Board of Directors Members.

Article Eight: Amendment of By-Laws

These By-Laws may be altered, amended, or repealed, and new By-Laws may be adopted by two-thirds (2/3rds) of the majority of the Active Board of Directors of this corporation present at any regular and/or special meeting(s), provided said proposals of amendments, alterations, or repeals be delivered, mailed, facsimile transmitted, and/or emailed to every member in good standing of the Active Board of Directors a minimum of one (1) week prior to the meeting upon which they are to be considered.

TRAINING PLAN

The organization will maintain a program for board training. The Board will be provided packages and be

oriented throughout the year to the Developmental Disabilities Services “Core Curriculum: Community Program Edition”, plus DDS “Suggested Board Training Topics”, utilizing the regular monthly board meeting, the regular monthly board meeting agenda, and be encouraged to go to the Developmental Disabilities Services regional board training meetings and/or invitations to Developmental Disabilities staff, to come to regular board meetings to discuss various issues concerning services to developmentally disabled individuals. A minimum of three (3) hours of training will be made available for new board members. After the first year, training will be provided on at least an annual basis, then as needed or requested.

Training topics within the first year will be:

- Functions and responsibilities of the board
- Composition and size of the board
- Legal responsibilities
- Funding sources and responsibilities
- Equal opportunity/affirmative action
- Due process, Ark Code Ann. SS 25-19-101-25-19-107; U.S.C. S12101E.T. Seq (Arkansas Freedom of Information Act and Americans with Disabilities Act, respectively)
- DDS Administrative Policy 107 Chemical Right to Know
- DDS Services Policy 3004-I Maltreatment Prevention, Reporting and Investigation
- DHS Policy 1090, Incident Reporting

The Board will schedule visits to program components during the year, allowing them to observe operations. Members can be selected or requested to visit the facilities and may visit and observe any of the services they may choose.

FISCAL ADMINISTRATION

Policies

The accounting procedures of Pathfinder, Inc. provide maximum protection and tracking systems for funds and expenditures. The account records clearly show total expenditures and income. The budget is approved by the Board of Directors and an annual audit by a certified public accountant is required. There is a "Blanket Fidelity Bond" covering the Board of Directors, Pathfinder, Inc. directors, and all employees handling funds.

The Executive Director shall be required to attend board meetings and present financial reports. The Treasurer of the Board of Directors shall make periodic checks to confirm the accuracy of said reports. Prior to each monthly board meeting, the Executive Director, Chief Financial Officer, Accounting Manager, and Financial Analyst review the financial reports, which include expenditures and revenues for each department.

The Audit Committee meets quarterly, or as needed. Minutes of each meeting are kept by the Chief Financial Officer.

Procedures

Internal control shall be accomplished by exacting compliance from all employees with the following policies.

Cash Disbursements

- Items required for operation of the facility shall be requested by requisition giving quantity, description, and approximate cost, use, and signed by person requesting item(s); all requests shall be presented to the immediate supervisor for approval prior to purchase.
- If approval is granted, the requisition is presented to Purchasing Assistant who prepares a purchase order. After purchase is made, invoice and requisition shall be compared for accuracy by accounts payable personnel and allocated to appropriate programs based upon indicated area of use and by percentage allocation provided by budget. Invoices shall be posted by the Accounting Manager/CFO.
- The designated accounts payable personnel, not having the authority to sign checks, shall process all invoices for payment.
- The Payroll Specialist prints the checks with laser signature. The checks are attached to backup and reviewed by the CFO. Upon review, checks are returned to designated accounts payable personnel for distribution.
- Employee in charge of petty cash at each location shall reconcile the petty cash fund each month and present a schedule of expenditures with documentation to their supervisor for review and approval. Schedule shall be forwarded to accounts payable personnel for posting and reimbursement. The Financial Analyst reviews petty cash accounts randomly.

Processing Payroll

- The Human Resources Department shall be presented a copy of the “*Authorization Form*” completed by supervisor and signed by employee for new hire or change in pay status listing salary/wages to be paid. No salary or change in pay will be made without written authorization by the supervisor. All categorically eligible employees are offered health insurance by an independent insurance agency. The Human Resources department will maintain a file for each employee that will include a job description, current rate of pay and the eligible benefits selected by that employee.
- Employees will use an automated time system. At the end of each pay period, supervisors review automated timecards for completeness before processing by the payroll department. Any hours worked over forty (40) in a given week shall be compensated at time and one-half for those individuals not classified as exempt.
- Payroll checks shall be prepared with appropriate deductions made and net pay calculated. The Human Resources Department and/or Payroll Department shall have authorization signed by employee for any miscellaneous deductions, such as insurance or contributions, and will inform designated accounting personnel of the deductions.
- Employees are paid bi-weekly, either by direct deposit or debit card. A payroll stub is distributed to employees each payroll.
- The designated Payroll Specialist shall make distribution of payroll costs based upon the budget for the current year, as approved by the Board of Directors. Any changes required, by the addition or deletion of program, or re-assignments, shall be provided in writing. No changes in distributions of cost shall be made until authorization is received from the Chief Financial Officer.

- The designated Payroll Specialist shall complete all attendant duties in conjunction with payroll, e.g., calculations and deposit of taxes pursuant to payroll in a timely manner and payment of deductions withheld to appropriate agency. All general ledger accounts for payroll related funds shall be reconciled monthly and wages reconciled quarterly with 941 forms. Documentation of reconciliations shall be maintained in files for each account.
- All costs incurred in any fiscal year shall be recorded in that fiscal year.

Accounts Receivable and Cash Accounts

- The designated accounts receivable personnel receive attendance and/or other documentation for substantiation of services rendered from individual service coordinators. Billing to various funding sources is completed, based upon this information and posted to accounts receivable ledger.
- The designated accounts receivable personnel provide follow-up for billing as it progresses through funding agency. If errors occur, billing is corrected. Voucher stating need/reason for correction is prepared by accounts receivable personnel, and posted by the Accounting Manager.
- Funds received by mail are opened and distributed by Executive/Administrative Coordinator. Check copies are given to Chief Financial Officer. Check copies are forwarded to accounts receivable personnel for coding and voucher preparation. Checks are forwarded to the Financial Analyst for deposit preparation, verifying deposit slips and assigning numbers. Deposits are taken to the bank by designated accounting personnel.
- Cash received is receipted by receptionist. Original of receipt is given to payee. Copy of receipt is retained in book. Two (2) copies of receipt are made. One (1) copy, with money, is forwarded for deposit. The other copy is forwarded to accounts receivable personnel for voucher preparation and entry. All funds received shall be deposited in the bank, as received, and no cash shall be withdrawn on the deposit slip.
- Bank accounts shall be reconciled monthly and shall include preparer's signature and date of reconciliation.
- Revenue and receivable accounts shall be reconciled monthly. For HUD receivables, a written reconciliation between MIP and Classic Real Estate shall be made describing any reconciling items.

Pathfinder Investment Policy

Pathfinder, Inc. will invest available money not required for operations in insured, income producing instruments that are: AA-, or better rated, certificates of deposits, Freddie Macs or similar. The Centennial Bank investment account is to be professionally managed by their trust department under the approved investment policies established for that account on an annual review basis by the Finance Committee.

Fiscal Document Retention and Destruction Policy

Pathfinder, Inc. Finance Department follows the document retention procedures outlined below. Documents that are not listed, but are substantially similar to those listed in the schedule will be retained for the appropriate length of time.

	Permanent	Active + 5 Years	7 Years	Electronic Records
Corporate Records	X			
Articles of Incorporation	X			
Board Meeting/Committee Minutes	X			
Board Polices/Resolutions	X			
By-Laws	X			
Property Records	X			
Patent and Trademark Records	X			
IRS Determination Letters	X			
Business Contracts		X		
Licenses		X		
Leases		X		
Conflict of Interest Disclosure Forms			X	
Financial Records			X	
Federal Tax Records			X	
State and Local Tax Records			X	
Bank Records			X	
Grant Records			X	
Accounts Payable Records			X	
Payroll and Employment Tax Records			X	X
Paper			X	

CORPORATE COMPLIANCE POLICY

Introduction

It is the policy of Pathfinder, Inc. to provide all of its services in cooperation with all state and federal laws governing its operations, and consistent with the highest of business and professional ethics. This policy is a solemn commitment to consumers, regulating governmental agencies, and the community that Pathfinder, Inc. conducts all activities and programs with the utmost integrity. In order to ensure that Pathfinder, Inc., its board and employees provide all its services in cooperation with all state and federal laws governing its operations, and consistent with the highest of business and professional ethics, the following Compliance plan was approved and adopted by our Board of Directors.

Purpose

To establish and publish the official policy of Pathfinder, Inc. regarding the organization's corporate compliance program and plan.

Policy

Pathfinder, Inc. is dedicated to the delivery of services in an environment characterized by strict conformance with the highest standards of accountability for administration, clinical, business, marketing and financial management. The Pathfinder, Inc. leadership is fully committed to the need to prevent and detect fraud, fiscal mismanagement and misappropriation of funds and therefore, to the development of a formal corporate compliance program to ensure ongoing monitoring and conformance with all legal and regulatory requirements. Further, the organization is committed to the establishment, implementation and maintenance of a corporate compliance program that emphasizes: (1) prevention of wrong doing – whether intentional or unintentional, (2) immediate reporting and investigation of questionable activities and practices without consequences to the reporting party, (3) timely correction of any situation which puts the organization, its leadership or staff, funding sources or consumers at risk, and (4) systemic adjustments as necessary to address any future occurrences.

Organization

By formal resolution, the Board of Directors has delegated overall responsibility for the Corporate Compliance Program to the Executive Director. The Executive Director has designated the Director of Quality Assurance to serve as the Corporate Compliance Officer. The Director of Quality Assurance will monitor the organization's corporate compliance program and provide periodic and regular reports to the Board of Directors, Management Team and employee on matters pertaining to the program.

Corporate Compliance Officer

The Director of Quality Assurance shall (1) chair the organization's corporate compliance team and serve as the organization's primary point of contact for all corporate compliance issues, including: scheduling team meetings, reporting on team activities and making recommendations to the Executive Director, Management Team and Board of Directors as required, (2) develop, implement and monitor – on a regular and consistent basis – the organization's corporate compliance plan, including all internal and external monitoring, auditing, investigative and reporting processes, procedures and systems, (3) prepare, submit and present periodic reports to the Executive Director, Compliance Committee and/or Board of Directors as may be required to provide clear communication to the organization's leadership for corporate compliance oversight, and (4) coordinate development of the organization's formal corporate compliance plan.

The Director of Quality Assurance shall submit an annual report to the Executive Director for forwarding to the Board of Directors. Annual reports will, at a minimum, include: (1) a summary of all allegations, investigations, and/or complaints processed in the preceding 12 months in conjunction with the corporate compliance program, (2) a summary of all corrective action(s) taken, and (3) any recommendations for changes to the organization's policies and/or procedures.

In the performance of his/her duties, the Director of Quality Assurance shall have direct and unimpeded access to the Executive Director for matters pertaining to corporate compliance.

As part of corporate compliance plan development, the Director of Quality Assurance shall ensure the scheduling, coordination, and monitoring of risk areas by competent persons external to the organization. Such

reviews will be conducted as a way to ensure ongoing conformance with billing, accounting, and collection regulations imposed by the federal government and other “third party” funding sources. More critically, these reviews will augment the organization’s annual audit of its accounting system and provide an additional internal measure to ensure conformance with billing and coding policies and practice that will withstand the scrutiny of any regulatory audit or examination.

The Director of Quality Assurance will receive and investigate all violations of the Corporate Compliance Plan and Code of Ethical Conduct. Results of the investigation will be maintained by the Director of Quality Assurance and will be reported to the Corporate Compliance Committee for review and appropriate action.

The Director of Quality Assurance will serve as the agencies Chief Privacy Officer in accordance with HIPAA law and regulations.

Compliance Committee

The Compliance Committee shall consist of the Corporate Compliance Officer (Director of Quality Assurance), Executive Director, Chief Financial Officer, Human Resource Designees, and Program Directors.

The Compliance Committee shall:

- Provide sufficient resources to fulfill the operational aspects of the Compliance Program.
- Advise the Director of Quality Assurance on compliance training needs within the organization in arranging for and conducting such compliance training.
- Assist the Director of Quality Assurance with developing organizational policies supporting the Compliance Program and Policy.
- Assist the Director of Quality Assurance with the implementation of the Corporate Compliance Plan.
- Advise the Director of Quality Assurance in connection with risk assessment and on compliance reviews as conducted within the organization.
- Assist the Director of Quality Assurance with the implementation of recommendations to resolve concerns.
- Receive results of all investigations of reported violations of the Corporate Compliance Plan and Code of Ethical Conduct and take appropriate corrective action whenever necessary.

Training

All employees and the Pathfinder, Inc. Board of Directors shall be provided compliance training upon hire/appointment and at intervals of no less than one (1) time every two (2) years. The training shall include a review of ethics and compliance issues and basic training to include, but not be limited to, relevant reimbursement issues, documentation, corporate personnel policies and procedures, and operational policies and procedures.

Employees shall be trained that failure to abide by operational and personnel policies and the spirit of the Code of Ethics could result in disciplinary action up to and including termination.

Code of Ethical Conduct

Purpose

The Board of Directors and employees of Pathfinder, Inc., in recognition of the importance of providing the most efficient and effective services to those individuals served by Pathfinder, Inc. and in accepting a personal obligation to our profession, its members, and the communities we serve, do hereby commit ourselves to the highest ethical and professional conduct.

The Code of Ethical Conduct is not intended to duplicate or paraphrase law, statute, or agency personnel policies, nor is it intended to qualify in any way the Board or an employee's obligation to comply with those authorities. It is instead a tool to be used in helping employees work through the often difficult ethical issues that confront them on a regular basis.

I agree to:

1. Accept and remember the finest responsibility is to the people Pathfinder serves. In working through ethical dilemmas, the best interests of a person with developmental disabilities are my first concern.
2. Accept responsibility in making decisions consistent with the safety, health, and welfare of the public and those we serve, and to disclose promptly factors that might endanger the public or those we serve.
3. Be honest and realistic in documenting and billing services to all payment sources. I will reject bribery in all its forms.
4. Avoid injuring others, their property, reputation, or employment by false or malicious action.
5. Avoid real or perceived conflicts of interest whenever possible and to disclose them to affected parties when they do exist.
6. Honor and respect all people as unique and valuable individuals. I recognize the danger of imposing my own priorities and values.
7. Recognize and support the central importance of family and friends. Each person is the center of a support network composed of varying numbers of family and acquaintances, including those who have a close and long-term relationship.
8. Empower people with disabilities, and their families, to achieve their dreams by providing lifelong choices, support and learning opportunities. I will attempt to balance the consumer's legitimate need for protection together with their right to function as a member of the larger society.
9. Be cautious in making assumptions about developmental potential. I understand that behavior, appearance, and even test scores can cause professionals and family members to make hasty judgments about the ability of an individual to learn and apply new skills. I will focus as much as possible on what people can do and their potential, rather than solely on deficits and limitations.
10. Support full integration of people with developmental disabilities. While many services and supports are necessarily unique to people with developmental disabilities I will endeavor to assist and encourage people to exercise their right to use those services and supports that are available to all community members.

11. Strive to remain competent on best practices for my field. I will also assist colleagues and co-workers in their professional development and to support them in following the code of ethics and all related professional codes.
12. Apply the principles of teamwork both within the agency and outside the agency. I will seek, accept and offer honest criticism, acknowledge and correct errors and credit properly the contributions of others. I will focus on common goals, sharing equally in the benefits and daily challenges of making difficult decisions.
13. Respect the right to privacy of persons with developmental disabilities and will maintain the strictest confidence regarding any issues and information relevant to the person served by Pathfinder.
14. Endeavor to maximize and understand the use of technology, and appreciate potential consequences, i.e., computers, internet, communication devices. I will not misuse technology for my personal gain. I will not engage in social media activity during work time, except as approved as a function of my position. I will refrain from making any personal posts on social media that may negatively reflect on Pathfinder, its activities and any personal information or photos regarding persons served. Posts will be randomly monitored by IT and Compliance staff and violations will be handled through the disciplinary process.
15. Adhere to all relevant state and federal regulations and to adhere to the professional conduct standards of all relevant professional groups.
16. Maintain a professional relationship with consumers and not enter into an intimate relationship with any consumer.
17. Honor and respect all consumers, co-workers, sub-contractors and the agency. I will not make disparaging remarks about them. I will promote and encourage consumers, co-workers and the agency as a whole.
18. Promote the individual adherence with the Pathfinder Corporate Compliance Plan and report to the Director of Quality Assurance those issues, without fear of reprisal, which are contrary to the spirit of this Code of Ethical Conduct and the Pathfinder Corporate Compliance Plan.
19. Only witness the signature of persons served on documents such as plans of care, consents, etc. when I am able to reasonably attest to the individual's identity, either through personal relationship with the individual or through identifying documents.

Business

20. Utilize the Director of Quality Assurance to ensure that Pathfinder conducts business in an ethical manner and ensure that any business practices that are questionable are thoroughly investigated.
21. Recognize that the task of the Director of Quality Assurance is difficult, assist that person, and acknowledge the authority given to that person by the Board of Directors.
22. Comply with the local, state and federal law, regulations, and/or guidelines in regards to all of Pathfinders' financial, purchasing, personnel, facility development and information technology practices.
23. Provide all employees the opportunity to anonymously report suspected fraud, waste and abuse to Pathfinder's Director of Quality Assurance or Executive Director.
24. Not sell items or services or engage in personal fund raising activities on behalf of Pathfinder or its consumers without prior approval from administration.

25. Recognize that all Pathfinder employees, officers, directors, agents and attorneys are prohibited from (1) soliciting anything of value for themselves from anyone in return for any business, service, or confidential information of the organization and (2) accepting anything of value from anyone in connection with the business. Small gifts and advertising or promotional materials are acceptable to receive as long as there is not intent to influence business decisions. Also, occasional meals and refreshments are acceptable but they must be of a reasonable nature and not received for the favor of a business decision.
26. No employee, officer or agent of Pathfinder shall participate in the selection, award or administration of a contract supported by U.S. Federal funds if a conflict of interest would be involved. Such a conflict would arise when the employee, officer, or agent, any member of his/her immediate family, his/her partner, or an organization which employs, or is about to employ any of the above, has a financial or other interest in the first selected for award.
27. An employee, officer or agent of Pathfinder shall be careful to ensure that s/he is involved in no apparent or potential violations of this provision.

Marketing

28. Conduct marketing practices in an honest and factual manner. Marketing materials and practices in no way will mislead the public or misrepresent Pathfinder ability to provide services.
29. Utilize clear and consistent methods of communicating information to consumers, families, other stakeholders, third party entities, referral sources, funding sources, and community members, and exhibit sensitivity to the educational and reading levels of all persons to whom information is distributed.
30. Not utilize monetary rewards or gifts to any potential consumer of services in an attempt to entice them to enter programs. Pathfinder does not solicit potential consumers.
31. Not share private donor information with any agency, group or identity, except where required by law or generally accepted accounting procedures, without donor approval.

Human Resources

32. Adhere to the agency's Human Resources Policies and Procedures and the Pathfinder, Inc. Code of Conduct for employees.
33. Prohibit discrimination in any work related decision on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity, physical or mental disability, veteran status, ancestry, marital status, age or citizenship. Pathfinder is committed to providing equal employment opportunity in a work environment where each employee is treated with fairness, dignity and respect.
34. Make reasonable accommodations to the known physical and mental limitations of otherwise qualified individuals with disabilities.
35. Not tolerate harassment or discrimination by anyone based on diverse characteristics or cultural backgrounds of those who work for the organization.
36. Not tolerate any form of sexual harassment or violence.
37. Not tolerate any form of workplace violence.

38. Provide all Pathfinder employees the opportunity to raise concerns and make reports without fear of reprisal, as long as the report is made in good faith.
39. All supervisors have a responsibility to be sensitive to and deal with violations of this Code of Conduct. This responsibility includes monitoring all relevant work activities and contacting a higher level supervisor or the Director of Quality Assurance if it is reasonably believed that violation of the Code of Conduct has occurred. Any such reports shall be investigated regardless of whether a formal complaint has been made.
40. Any employee, officer or agent of Pathfinder determined to have committed a violation of this Code of Conduct shall be subject to disciplinary action, up to and including termination.
41. All employees, officers or agents of Pathfinder shall be informed of this Code of Conduct when the Code is adopted, and/or when s/he is initially retained by Pathfinder, Inc. and on an annual basis thereafter.

Violations

The Code of Ethical Conduct is a critical component of the Corporate Compliance Plan. Employees may report violations of the Code of Conduct and Corporate Compliance Plan, without fear of reprisal, to the Director of Quality Assurance of Pathfinder, Inc. An employee, consumer, family member, or stakeholder may report a perceived violation of the Corporate Compliance or Ethical Code of Conduct in writing within five (5) business days of knowledge of the alleged violation to the Director of Quality Assurance of Pathfinder, Inc. The Director of Quality Assurance will begin an immediate investigation of the allegation, review the findings, and render a final decision to the complainant within 5 business days of the receipt of the allegation. Pathfinder, Inc. will not condone nor tolerate any intimidation, retaliation or discriminatory action against an employee who reports in good faith.

False Claims Act

Prevention and Detection of Waste, Fraud, and Abuse and Education about False Claims Acts

It is the policy of Pathfinder, Inc. to advise our employees, contractors, suppliers and agents of the steps the organization has in place to prevent and detect waste, fraud and abuse in government-funded health care programs. It is the policy of Pathfinder, Inc. to provide information to all employees, contractors, suppliers and agents about federal and state false claims acts, remedies available for false claims, and whistleblower protections available to anyone who alleges a violation of federal or state false claims acts.

Prevention, Detection, and Education Procedures

- A. The Director of Quality Assurance has been designated as the Compliance Officer by the Executive Director for Pathfinder, Inc.
- B. Pathfinder, Inc. maintains a Quality Assurance Program that consists of the following components:
 - Mission Statement: Pathfinder, Inc. is dedicated to the development and implementation of individually designed strategies that enable people with developmental disabilities to pursue total access to community life.

- Code of Conduct: The Pathfinder, Inc. Code of Conduct is the foundational document detailing the fundamental principles that guide the organization and its efforts in promoting and maintaining the highest ethical and professional conduct.
 - Employee Handbook: The Employee Handbook is an overview of policies and procedures for the organization. The Employee Handbook includes this policy, the Code of Conduct, and an overview of the Compliance Program.
 - Operations Manual: The Pathfinder, Inc. Operations Manual guides the day-to-day operations of the organization. The Operations Manual is available for review by any employee. Copies are distributed to each program.
 - Corporate Compliance Policy: The Compliance Program is designed to prevent fraud, waste and abuse and to promote ethical conduct by employees. The Compliance Program contains a variety of internal systems and controls that operate on an ongoing basis to ensure compliance with all applicable federal and state laws and to monitor coding and billing practices. The Corporate Compliance Policy is detailed in the Operations Manual and is available to any employee, contractor, supplier, or agent for review.
 - Orientation: During New Employee Orientation, each new employee is given a copy of the Employee Handbook along with a verbal overview of its purpose and content. New Employee Orientation includes training on the Pathfinder, Inc. Quality Assurance Program, specifically targeting the Mission Statement, the Code of Conduct, and the Compliance Program. Each new employee must sign a statement certifying he or she has received, read, and will abide by the Pathfinder, Inc. Code of Conduct. Documentation is kept in the employee's training file.
 - Annual Training: At least once a year, all employees receive in-service training on the Code of Conduct and the Compliance Program, which includes information about:
 - Federal and state false claims acts and related laws
 - The kinds of activities that could constitute a "false claim"
 - How to report a possible false claim
 - Remedies available for false claims
 - Whistleblower protections available to anyone who alleges a violation of federal or state false claims acts
- C. Pathfinder, Inc. will provide each contractor, supplier or agent, who provides goods to or performs services for Pathfinder, Inc. a copy of this Policy and Procedure and will maintain in the office an *"Acknowledgement of Receipt Form"* signed by the authorized representative of the contractor, supplier, or agent. Alternatively, the written agreement with a contractor, supplier or agent of Pathfinder, Inc. may contain a provision summarizing the steps the facility has in place to detect and prevent waste, fraud, and abuse and a provision that the agreement terminates if the contractor, supplier, or agent is excluded from participation in government-funded health care programs, including Medicare and Medicaid.

Employee Reporting

Submitting a false claim for payment to Medicare, Medicaid, or other federal or state health care programs is a civil offense and possibly a crime for which Pathfinder, Inc. and its employee can be punished severely. Penalties

for making false claims or statements may include large money penalties and even exclusion from participation in the Medicare, Medicaid, and other state or federal health care programs.

Even though Pathfinder, Inc. has a number of systems in place to prevent and detect fraud, waste, and abuse against the government, there may be instances in which an incorrect or "false" claim slips through. If an employee becomes aware of a possible false claim or has reason to suspect that fraud, waste, or abuse in state or federally-funded health care programs is occurring, Pathfinder, Inc. strongly urges each employee to report such knowledge to the Director of Quality Assurance or management.

What is a False Claim?

A false claim may take many forms, including without limitation:

- Making false statements regarding a claim for payment
- Falsifying information in the medical record
- Double-billing for items or services
- Billing for services or items not performed or never furnished
- Overcharging for a product or service
- Underpaying money owed to the government
- Charging for one thing while providing another

Reporting a Possible False Claim

If an employee discovers an event that is similar to one of the examples of a false claim listed above, or has reason to suspect that fraud, waste, or abuse in state or federally-funded health care programs is occurring, the employee is strongly encouraged to report the event to the Executive Director or the Director of Quality Assurance for further investigation. If the employee is not comfortable doing this, then the employee should contact his or her immediate supervisor or another member of management or refer to the below "No Duty to Notify Facility First" section.

No Duty to Notify Facility First

Employees are not required to report a possible False Claims Act violation to the organization first. A report may be made directly to the U.S. Department of Justice or the Arkansas Attorney General. In many instances, however, our internal reporting process allows us to quickly evaluate and, if necessary, respond to potential problems. Pathfinder, Inc. encourages each employee to consider first reporting suspected false claims to the Executive Director, the Director of Quality Assurance, or his or her immediate supervisor.

Investigation

Any reported matters reasonably suggesting possible violations of compliance policies or applicable federal or state law will be documented and investigated promptly in accordance with the Compliance Program.

Retaliation Not Permitted

Pathfinder, Inc. will not condone nor tolerate any intimidation, retaliation, or discriminatory action against an

employee who reports in good faith internally or to the federal or state government concerning activity reasonably believed to be a possible False Claims Act violation. An employee with questions regarding this policy or the Compliance Program should contact the Executive Director, the Director of Quality Assurance, or his or her immediate supervisor.

HUMAN RESOURCES AND EMPLOYEES

Employee Record Retention and Destruction

Pathfinder, Inc.'s Human Resource Department policy for record retention and destruction aligns with regulatory agencies and Employment and Labor Law guidelines. Pathfinder, Inc.'s general rule for retention and destruction of records is five (5) years but exceptions apply to this rule. The exceptions are reviewed on a case by case basis and may be retained longer. All electronic records are permanent. Paper records are shredded by human resource personnel.

Professional Standards

In order to ensure the highest quality of professional standards, the employees of Pathfinder, Inc. strive to help each individual realize his or her potential as a worthy and effective member of society.

Employee Development Program

- A. The identification of employee development needs is considered an on-going process which includes solicitation of employee input at regularly scheduled employee meetings, administrative organized reviews, individual/parent/guardian input through parent/guardian groups, and suggestions by regulatory agencies.
- B. An orientation will be provided for all new employees to acquaint them with the philosophies, programs, practices, and goals of the facility. This will be accomplished through a General Orientation of each new employee member by the Staff Development Training Department. Each new employee will be briefed by their immediate supervisor of specific guidelines for their department. The Pathfinder, Inc. Operations Manual will be available for review at all times by employees in the office of each program division head or individual program administrator/coordinator.
- C. Each new employee will be oriented to developmental disabilities, including material on various disabilities. Additionally, staff development will provide continuing education regarding various disabilities.
- D. Each new employee will be provided an explanation of federal laws as required by licensing/regulatory/accreditation agencies. This will be accomplished by providing each new employee with a list of these laws. Copies of these laws are made available by request.
- E. At least annually, the Staff Development Training Department will ensure training for all employees as required by licensing/regulatory/accreditation agencies.
- F. Community integration training (after initial training) will be updated every two (2) years. (See Board/Employee Training material on file at Pathfinder, Inc.)

- G. A minimum of twelve (12) hours of training will be required annually for all staff. This will be achieved by attending various approved training programs and participating in online training courses throughout the year.
- H. All orientation and in-service training will be maintained on file.
- I. Staff training will be developed and coordinated by the Staff Development Training Department. Training needs will be provided to each program manager on a regular basis to ensure in-service training requirements are met. Outside sources will be utilized as appropriate.
- J. Training is based on identified employee training requirements.
- K. All employees of Pathfinder, Inc. who provide transportation services will participate in Vehicle Safety Training as required. Additional training will be provided as deemed necessary.

Time Clock Policy

Pathfinder, Inc. utilizes an electronic time clock system for the purposes of recording employees work time. This system may include use of a hand print reader, telephone call in procedure and/or use of a computer entry procedure.

The Time Clock Policy sets forth procedures for clocking in and out by use of the electronic time clock system. Each department and location has designated methods for employees to clock in and out. Employees are expected to use the method and location that has been assigned. It will be the responsibility of the employee to follow the established procedures to ensure proper pay for hours worked.

Once an employee is entered into the electronic system, clocking in and out can be done by any of the above methods at any Pathfinder, Inc. location where an electronic time system is installed. The method used will be as designated by the worksite manager. Employees are expected to adhere to the method used at the approved site. It will be the responsibility of the employee to follow these procedures to ensure proper pay for hours worked.

- A. Electronic systems will be located at specific areas.
- B. All employees will be given a PIN to access the system.
- C. NO employee should EVER use the PIN of another employee to clock in or out for them.
- D. All designated staff will be required to clock in upon arrival at work. This can be done no more than six (6) minutes before the scheduled duty time. The time on the clock will be considered the official time.
- E. All designated staff will be required to clock out at the end of their shift, no more than six (6) minutes after the shift ends. The time on the clock will be considered the official time.
- F. Employees must obtain PRIOR approval of their supervisor to work more than regularly scheduled hours. Arrangements can be made with the supervisor to adjust the work schedule on occasion to allow for more than regularly scheduled hours. For example, if an employee is approved to work over to complete a project, the supervisor may allow them to leave early or come in late another day in the week to maintain the forty (40) hour schedule. Failure to receive prior approval for overtime may subject the employee to disciplinary action.
- G. Any employee assigned to work at more than one (1) worksite will be required to clock in and out at each site in accordance with the schedule approved for that site.

- H. Any problems identified with the time clock, phone or computer clock in process should be reported immediately to their supervisor who will report the problem to the appropriate person.
- I. Any employee who does not clock in or out electronically, by use of the hand reader, telephone or computer will be required to complete a *“Missing Clock-in/out Authorization Form”* and submit to their supervisor for review and approval.
- J. Failure to clock in or out electronically, resulting in completing a *“Missing Clock-in/out Authorization Form”* will NOT be allowed more than once a month. Employees may be subject to progressive disciplinary action for continued failure to use the designated system and/or failure to complete the *“Missing Clock-in/out Authorization Form”*. Mechanical malfunction of the system will be excused.
- K. Employees are expected to be at their work site at the designated time, not at the clock or on the grounds. Employees are considered late if they are not clocked in by the start of their shift.

Supervisors will be required to monitor employees’ use of the electronic clock in/out procedures and will be required to address chronic violations with appropriate disciplinary action up to and including termination. It will be the responsibility of the employee to follow the Pathfinder, Inc. Time Clock procedures to ensure proper pay for hours worked.

Inclement Weather Policy

In the event that Pathfinder, Inc. has to close due to inclement weather staff, consumers and families will be notified through Dial My Call and local Television station listing Pathfinder Day Programs will be closed. Pathfinder’s Residential, ICF and HCBS programs will remain open and staffed.

Should the weather be such that it will possibly affect driving conditions, staff who work in any of our ICF, apartments, group homes or who travel to work with clients who receives services from HCBS division, will be paid time and a half for working any shift during the event. This rate will also apply to any other staff members critical to our operation that are required to work during an inclement weather event. Should a staff person work over 40 hours per week due to the weather, he/she will be paid double their normal rate for time spent at work during the inclement weather event. In order to better facilitate attendance in bad weather, Pathfinder will offer to transport staff to and from work if the roads are impacted. Staff members will be expected to contact their supervisor and be placed on a list for pick up if they are in need of this service.

Work from Home Policy

Policy

Pathfinder, Inc. recognizes that there may be times, due to extenuating circumstances that warrant approval for certain staff to be allowed to conduct Pathfinder, Inc. business from home. Working from home is not an official, universal employee benefit; rather, it is an alternative method of meeting Pathfinder, Inc.’s needs and is generally for Pathfinder, Inc.’s benefit. Pathfinder, Inc. has the right to deny any employee’s request to work from home and to terminate an employee’s approval to work from home at any time.

Qualifications

To be considered for approval to work from home, the employee must be an exempt, full-time, non-

probationary employee who has been employed for at least one (1) year and has received no disciplinary actions in the preceding twelve (12) month period.

Approval

Employees must get approval from the Executive Director and/or Designee to attain approval to work from home. Additionally, proper procedures and guidelines must be met to be approved.

Emergencies/Inclement Weather

In situations of emergency or inclement weather employees may, with approval or authority from the Executive Director and/or Designee, be given permission to work from home due to deadlines or mandatory procedures or tasks.

The following is a list of tasks that may warrant an employee to work from home during emergency situations or inclement weather:

- Completion of payroll
- Completion of billing
- Coordination of closing of facilities
- Coordination of transportation
- Implementation of companywide notifications (including computer and/or phone notices)

Every situation in which an employee is working from home requires authorization from the Executive Director and/or Designee. Supervisors may not approve employees to work from home unless such approval has been granted by the Executive Director and/or Designee.

Americans with Disabilities Act (ADA)

Disability Accommodations

Pathfinder, Inc. is committed to providing equal access and opportunities to staff members with qualified disabilities, and prohibits discrimination on the basis of disability in the application process and the employment relationship. It is the policy and practice of Pathfinder, Inc. to comply with the Rehabilitation Act, the Americans with Disabilities Act, as well as with applicable state and local laws prohibiting discrimination on the basis of a disability.

Employees with a disability recognized by law are entitled to a reasonable accommodation if one is needed to enable the person to apply for a job, perform the essential elements of a job, or to enjoy the benefits offered to other staff members. In general, a disability is defined as a physical, mental, medical, or psychological impairment that substantially limits a major life activity or that prevents the exercise of a normal bodily function, a record of such impairment, or a condition regarded by others as such impairment.

A reasonable accommodation includes, but is not limited to, adjustments such as providing an accessible workplace, acquiring or modifying equipment, job restructuring, and/or modifying work schedules. Reasonable accommodations do not include lower performance standards or items for personal use or convenience.

Pathfinder, Inc. is obligated to provide a “reasonable” accommodation, which may not be the one requested. The process of identifying and providing a reasonable accommodation is an interactive one. Pathfinder, Inc. is not obligated to provide an accommodation if it would impose an undue hardship on the company, or if the person requesting the accommodation poses a direct threat to the safety of self or to others.

Eligibility

An individual who has requested a reasonable accommodation must provide certain information to the Pathfinder, Inc. Compliance Department and may also be subject to provide certification from an appropriate health care professional. In general, the information provided must be sufficient to substantiate that the individual has a disability and requires a reasonable accommodation. The information provided must describe, among other things, the nature, severity and duration of the impairment; the activity or activities the impairment limits; the extent to which the impairment limits the individual’s ability to perform the activity or activities; and, substantiate why the requested reasonable accommodation is needed. The cost of obtaining and providing this information to Pathfinder, Inc. is the responsibility of the staff member.

If the individual provides incomplete or inadequate information to substantiate that he or she has a disability and/or needs the reasonable accommodation requested, Pathfinder, Inc. may, at its discretion, require the staff member to provide the additional information at his or her expense.

The need for a reasonable accommodation may, and often does, change. Therefore, a staff member who receives a reasonable accommodation may be required to establish his or her eligibility for an accommodation annually or more frequently as may be appropriate.

The standardized form to assist staff members with requesting or establishing eligibility for consideration of a reasonable accommodation must be completed and is available on the Pathfinder, Inc. website.

Travel Policy

Mileage Reimbursement

Use of a private vehicle for job-related trips will be approved on an individual basis. Pathfinder, Inc. will provide travel reimbursement for those employees whose particular job requires the use of their privately owned vehicles to conduct company business away from the office. The employee’s supervisor will approve any request for travel reimbursement as listed on the Pathfinder, Inc. “*Travel Reimbursement Form TR-1*” (attached). The “*TR-1*” should be submitted for the pay period travel reimbursement is being claimed.

Employees authorized to use private vehicles on company business will be reimbursed at the rate of fifty-two (52) cents per mile or the current approved mileage rate as established by the state of Arkansas for state employees or at the discretion of the Executive Director. DDS Waiver is a reimbursable program, therefore Supported Living employees in the Waiver Department that claim mileage reimbursement will receive travel reimbursement as approved and designated in the person’s served MAPS plan.

All employees, prior to driving and requesting travel reimbursement for the use of their privately owned vehicle must have a valid Arkansas Driver’s license and proof of current personal auto liability insurance coverage.

Copies will be kept on file and verified for renewal upon expiration. In addition, Pathfinder, Inc. reserves the right to verify the employee's driving record. Pathfinder, Inc. may deny travel reimbursement to any employee who fails to meet the minimum coverage requirements as established for drivers by Pathfinder, Inc. or the company insurance carrier.

Employees will not be reimbursed for travel to the employee's official work station from their home, for travel during lunch breaks, or any other non-business related travel. Reimbursement for mileage may only be claimed for actual mileage traveled between the business location and the employee's official regular work station. In the event the employee leaves from their home, the shortest distance from either the home or the official regular work station should be claimed. Meals are not eligible for reimbursement for in- state non overnight travel unless the employee is traveling between Jacksonville and one of our four regional offices (Jonesboro, Bentonville/Cave Springs, Harrison, West Memphis).

Overnight Travel

Overnight travel expenses for business related purposes will be approved on an individual basis. Pathfinder, Inc. will reimburse employees for reasonable expenses including meals and lodging. All reasonable expenses should be listed on the "TR-1 Form". Meals are reimbursed during overnight travel. Meals for partial travel days will be reimbursed accordingly. Receipts for meals are required.

Meal	Out of State:	Instate:
Breakfast	8.00	7.00
Lunch	15.00	10.00
Dinner	25.00	20.00
TOTALS:	48.00	37.00

Claiming Reimbursement

When claiming reimbursement for business related travel, a "Travel Expense Reimbursement Form TR-1" must be completed and include the following information:

- Department: Official Station: Official Work location
- Name of Payee: Employee claiming reimbursement and traveling
- Place of Residence: Home address of employee claiming reimbursement
- Private Vehicle License Number
- Total Travel Mileage: Actual mileage claimed entering beginning and ending odometer reading; grand total should be listed at the bottom of the "TR-1"
- Total Amount Claimed: Actual mileage x fifty-two (52) cents per mile; grand total along with other approved charges listed at bottom of the "TR-1"
- Date, name of town visited and reason for business travel (if travel was on behalf of a specific program or individual served, enter the name and specific program for which the travel was related)

Family and Medical Leave Act (FMLA)

Terms

Pathfinder, Inc. complies with the Family and Medical Leave Act of 1993. In doing so, the company allows eligible employees to take up to twelve (12) weeks of unpaid family leave during a twelve (12) month period (effective the first day family medical leave is taken) to allow for the following circumstances:

- For incapacity due to pregnancy, prenatal medical care or child birth;
- To care for the employee's child after birth, or placement for adoption or foster care;
- To care for the employee's spouse, son, daughter or parent, who has a serious health condition; or
- For a serious health condition that makes the employee unable to perform the employee's job.
- Any qualifying exigency arising out of the fact that the employee's spouse, son, daughter, or parent is a covered military member on "covered active duty;" or
- Twenty-six (26) workweeks of leave during a single twelve (12) month period to care for a covered service member with a serious injury or illness if the eligible employee is the service member's spouse, son, daughter, parent, or next of kin (military caregiver leave).

Serious health condition is an illness, injury, impairment, or physical or mental condition that involves: a) inpatient care and any corresponding period of incapacity or subsequent treatment, or b) continuing treatment by a health care provider. Except pregnancy or chronic conditions, the period of incapacity must be more than three (3) days to receive multiple treatments either for restorative surgery or for a condition likely to result in incapacity of more than three (3) days absent medical intervention such as cancer, severe arthritis, or kidney disease).

The health condition must also involve a certain level of treatment: being seen two (2) or more times by a health care provider or one (1) treatment that results in a regimen of continued supervised treatment including prescription medication or therapy with specialized therapy equipment. The regimen of treatment must be more than the taking of over-the-counter medications, bed rest, drinking of fluids, exercise, or other activities than can be initiated without a visit to a health care provider. The definition of health care provider includes "clinical social worker" and any provider recognized by the group health plan for claims purposes.

Employee Eligibility

To be eligible for Family Medical Leave, the employee must have been employed at Pathfinder, Inc. for at least twelve (12) months or accumulative if employed more than once and must have worked 1,250 hours in the twelve (12) months immediately preceding the start of the leave. All requests for Family Medical Leave must be forwarded to Human Resources for approval.

Method of Taking Leave

An employee may take leave on an intermittent basis or reduced leave schedule for cases involving serious illness/injury, when medically necessary. However, when intermittent or reduced leave is exhausted, Pathfinder, Inc. has the right to temporarily transfer the employee to an available alternative position that has equivalent pay and benefits to the employee's current position and that better accommodates the recurring periods of

leave.

Substitution of Paid Leave

When taking family leave for any reason, Pathfinder, Inc. requires that employees exhaust paid vacation and personal leave time and floating holidays before receiving the remainder of the leave as unpaid. For cases involving the employees' serious illness/injury, employees must also exhaust their available short-term disability before receiving the remainder of the leave period as unpaid. Vacation time, personal leave, floating holidays, and short-term disability serve concurrently with family leave.

It is the policy of Pathfinder, Inc. that the use of any existing leave benefit, including workers' compensation and short-term disability, for a purpose that qualifies as FMLA leave is designated FMLA against the employee FMLA leave entitlement.

An employee absent on worker's compensation leave who is offered the opportunity to return to "light duty" work, if it is determined an appropriate assignment is available, may do so in order to not lose worker's compensation benefits, and Pathfinder, Inc. will not designate time in "light duty" as FMLA.

Benefits Protection

Leave will not result in any loss of employment benefits accrued prior to the date on which the leave began. The employee must continue his/her contribution to the group health plan during the leave period for Pathfinder, Inc. If the employee fails to make payments for coverage, Pathfinder, Inc. reserves the right to cancel the insurance if the employee becomes more than thirty (30) days delinquent and after giving the employee a fifteen (15) day notice of intent to cancel.

Notification and Certification

The employee must notify Pathfinder, Inc. Human Resource Department of the intent to take Family Medical Leave thirty (30) days prior to the commencement of the leave. Should an emergency require immediate leave with no thirty (30) day notification, or a situation occurs requiring the employee to begin leave during the thirty (30) day notification period, the employee must notify Pathfinder, Inc. of the commencement of leave immediately upon the employee's knowledge of the beginning of the leave.

When the leave is taken for serious illness/injury, the employee is required to provide certification for the leave from the health care provider upon commencement of the leave period, periodically during the leave period, and prior to job reinstatement (see "*Department of Labor FMLA Certification Form*"). The type of information required by these certifications can be obtained from the employee's supervisor.

An employee working a second job while on Family Medical Leave through Pathfinder, Inc. indicates the employee is not incapacitated and FMLA leave will be denied.

Second Opinion

When leave is taken under cases of serious health conditions, Pathfinder, Inc. may require and pay for the employee to obtain the opinion of a second health care provider designated by the company.

Return to work

At the end of the FMLA period, employees must provide a return to work/fitness for duty statement to the Human Resources office prior to returning to work. FMLA leave will be denied or forfeited for any employees found working a second job while on approved Family Medical Leave through Pathfinder, Inc.

Depletion of All Leave

In order to ensure that operations continue without interrupting services to individuals we serve, Category I employees unable to return to work when all annual, personal, advanced personal leave, and FMLA has been exhausted will be classified as a termed employee at the end of such leave. The termed employee may re-apply for any available position within Pathfinder, Inc. when the return to work date has been established and the employee is medically eligible to return to work.

Military Leave, Jury Duty Leave, Civic Duty Leave

Time off for military leave, jury duty, or other required civic responsibilities will be treated as an excused leave of absence. Employees should notify the supervisor as soon as possible to ensure adequate staffing can be arranged during their absence. Employees chosen to serve on jury duty will be excused with pay and must provide Pathfinder, Inc. with a certificate verifying service. Time off for employees absent for military leave or to conduct required civic responsibilities will be charged to personal leave, vacation leave, or leave without pay.

Eligible employees who are family members of covered military service members are eligible to take up to 26 work weeks of leave in a "single twelve (12) month period" to care for a covered military service member with a serious illness or injury incurred in the line of duty on active duty.

Advanced Leave

Upon the exhaustion of all accrued leave, an employee who has been employed at least twelve (12) months and worked 1250 hours in the previous twelve (12) month period may request Pathfinder, Inc. to advance up to three (3) days of personal leave when a serious health condition of the employee or immediate family member prevents the employee from returning to work. A *"Request for Advanced Personal Leave Form"* must be completed and submitted to the Human Resources Department for proper approval from the supervisor, department administrator, and Executive Director.

Upon return to work, the employee will utilize his/her personal leave accrual or annual vacation accrual to pay back advanced leave until all advanced time is paid in full. Pathfinder, Inc. will not approve additional advanced leave until all previously advanced time is paid in full.

Should the employee not return to work, arrangements shall be made by the employee to reimburse Pathfinder, Inc. for all unpaid advanced time. Failure to pay any advanced time shall render the employee ineligible for hire until such time as satisfactory arrangements have been made to reimburse the value of all advanced time. The form is located on www.pathfinderinc.org under Human Resource Forms.

Responding to Subpoenas, Complaints, and Other Legal Actions

Policy

Pathfinder, Inc. employees must exercise care when presented with any documents concerning legal actions in which the organization or its employees are involved. Only the Executive Director's Office may accept service of summons and complaints on behalf of Pathfinder, Inc. Subpoenas for Pathfinder, Inc. records, regardless of the location of those records, must be directed to the Executive Director/Designee for processing.

Pathfinder, Inc. will release records and information when required by law to do so and will cooperate with lawful searches, but will also protect confidential information such as consumer information and legally privileged information to the extent authorized by law. Pathfinder, Inc. and its personnel shall not attempt to obstruct an investigation or destroy, alter, or conceal documents or other evidence sought in an investigation.

Failure to appropriately handle summons, complaints or subpoenas could place Pathfinder, Inc. and affected employees at risk or disadvantage in legal proceedings. Failure to follow required procedures may be cause for discipline, up to and including termination. Any issue related to corporate compliance must be referred to the Executive Director/Designee.

Definitions

- *Complaint*: a legal document that sets forth the claims(s) in a lawsuit and the relief being sought by the plaintiff (one who commences a lawsuit to obtain a remedy for an alleged injury to his or her rights)
- *Summons*: a legal document that notifies an individual or entity that a lawsuit has commenced and that the individual or entity served must respond to the complaint
- *Subpoena*: a legal document commanding a person to provide testimony under oath at a specified time and place about a matter concerned in an investigation or a legal proceeding, such as a trial or a deposition
- *Subpoena duces tecum*: a legal document commanding requirement that you supply documents or some other specific physical material in your possession
- *Process server*: a person who delivers (serves) legal papers in lawsuits, usually either as a professional process server or as a government official, i.e. a deputy sheriff, marshal, constable
- *Search Warrant*: a judicial document authorizing a law enforcement officer to search a person or place to obtain evidence for presentation in a criminal case

Summons and Complaints

- *Summons and Complaints Listed Party- Pathfinder, Inc.:*
If a process server attempts to serve a Summons and Complaint on Pathfinder, Inc. to an employee, the process server must be referred to the Executive Director's Office. Only the Executive Director is authorized to accept service on behalf of the organization.
- *Summons and Complaints Listed Parties- Pathfinder, Inc. and Employee:*
If a process server attempts to serve an employee who is personally named in a complaint along with Pathfinder, Inc., the employee may accept service of the Summons and Complaint only on his or her

own behalf. In addition, the employee must immediately notify the Executive Director. The process server must be referred to the Office of the Executive Director for service of the Summons and Complaint on Pathfinder, Inc. Only the Executive Director may accept service on behalf of the organization. No other staff is authorized to accept service of process on Pathfinder, Inc.'s behalf.

- *Summons and Complaints Listed Party- Employee Only (Work-Related):*
If the complaint, naming only the employee, is based on the employee's conduct within the course and scope of his or her employment with Pathfinder, Inc., the employee must accept the complaint and contact the Executive Director immediately.
- *Summons and Complaints Listed Party- Employee Only (Non-Work Related):*
If the complaint naming the employee is based on conduct occurring outside the course and scope of his or her employment with Pathfinder, Inc., the employee shall act on his or her own behalf without involving Pathfinder, Inc. Pathfinder, Inc. supervisors or other employees not named in the complaint should not interfere or assist the named employee in efforts to avoid or evade being served with the complaint.
- *Accepting Service on Behalf of Another Employee:*
An employee asked by the process server to accept service of a Summons and Complaint on behalf of another employee should not do so. Contact the Executive Director immediately for instructions.

Subpoenas

- *Subpoenas to Testify- Pathfinder, Inc. Related:*
Employees served with a subpoena to appear to testify in a matter that is related to his or her employment with Pathfinder, Inc. should accept the subpoena, and immediately contact the immediate supervisor and the Executive Director.
- *Subpoenas- Pathfinder, Inc. Records:*
Employees must not accept subpoenas for Pathfinder, Inc. records. Subpoenas for Pathfinder, Inc. records, regardless of the location of those records, must be directed to the Executive Director, who will then contact the appropriate custodian of the records sought.
- *Subpoenas for Testimony or Testimony and Records- (Not Pathfinder, Inc. Related):*
Subpoenas for individuals served in their individual capacity and not as employees or agents of Pathfinder, Inc. must be personally served on the named individual. For example: the employee witnessed an incident (e.g. a car accident) unrelated to his employment and is being subpoenaed to testify as a fact witness.

Search Warrants

If a member of law enforcement arrives at your work place with a search warrant, the following steps should be taken:

- Contact the Executive Director immediately and follow any directions provided.
- Request the name of the officer or agent in charge, and record the names and badge numbers of all officers present.
- Request a copy of the warrant and, if provided, fax it to the Executive Director at 501-985-1462.

- Provide the agent in charge with a copy of this policy.
- If possible, create a written inventory of the items taken by the officials conducting the search.
- Do not disclose receipt of the search warrant or discuss the search with anyone except the Executive Director or your supervisor until you are given additional instructions.

Employee Benefits

Workers Compensation

Workers' Compensation Insurance is paid by Pathfinder, Inc. and, under certain conditions, provides compensation for employee's injury or death during the course of employment. If the employee is injured while at work, he/she must report the injury to their supervisor immediately. The employee should not pay any job-related medical or hospital expenses. Remember that minor injuries may also be covered provided they are reported when the injury occurs.

All work related injuries must be reported to the Human Resources Department immediately and appropriate paperwork must be completed by the employee and immediate supervisor. In non-emergency situations and when possible or reasonable, employees should contact the Human Resources Department prior to seeking medical attention. Employees requiring immediate medical attention will be sent to an approved medical provider or nearest medical facility if the injury is life threatening. A nurse triage call line has been established to allow employees and their supervisors to report job related injuries and inquire if medical attention is needed. All on-the-job injuries requiring medical attention will be assessed and treated by the facility designated medical provider.

Unless incapacitated, failure to report a work related injury when it occurs, may result in both internal disciplinary action and/or a thorough external investigation for possible fraud. Employees are not entitled to Workers' Compensation for days missed until the eighth (8) day of disability and after the claim has been determined to be compensable. Personal leave and/or vacation leave may be used for the first seven (7) days of disability. Beginning on the eighth (8) day of disability, employees are eligible to receive untaxed compensation equal to about 66 2/3 percent of the employee's average weekly wage.

After employees use the first seven (7) days, all remaining personal leave and/or vacation leave will remain intact. The employee is not eligible to receive compensation for accrued personal leave and Workers' Compensation after the seven (7) days when workers' compensation begins payment. If the employee has exhausted personal leave during the first seven (7) days, and Workers' Compensation has paid for those days, the employee may choose to reimburse Pathfinder, Inc. and have personal leave restored.

If the employee is absent from work due to an on-the-job injury, he/she will discontinue accruing personal leave benefits when he/she ceases to be on Pathfinder, Inc. paid leave status on the first day of the month following the seventh (7) day of disability. However, Pathfinder, Inc. will cover health and life insurance premiums in the same manner as prior to the injury. Employees will be encouraged to return to work as soon as possible, either on full-time or modified duty status.

Any questions concerning Workers' Compensation and treatment of injuries should be referred to Human

Resources Department staff.

Retirement Savings- 401(k)

The 401(k) Plan, adopted by the Board of Directors of Pathfinder, Inc., applies to eligible administrative employees and professional employees in Category IE and III E.

Pathfinder, Inc. will contribute an approved benefit amount of the employee's gross salary beginning January 1 or July 1 after completion of a full six (6) months employment. All administrative costs associated with administering the plan are paid by Pathfinder, Inc. An employee becomes 100% vested in the 401(k) plan for Pathfinder, Inc. contributions after the third full year of service in the plan has been completed. All contributions made by the employee become immediately vested upon deposit into the plan.

Approved Salary Supplement

Non-401(k) eligible employees, Category I, Category II, and Category III, are entitled to receive a supplemental income payment at the approved rate in addition to their regular hourly wage beginning January 1 or July 1 after completion of a full six (6) months of employment. Upon eligibility of the employee, the supplemental income payment will be paid each pay period or cumulatively at the end of each year at the discretion of the employee. Any accumulated interest will be forfeited if payment is drawn before the end of the year or if the employee terminates.

Social Security

This program is designed to provide monthly supplemental retirement income in addition to Pathfinder, Inc.'s 401(k) program. The employee's contribution, which is deducted from his/her pay, is matched dollar for dollar by Pathfinder, Inc. Social Security is a federally administered program that covers both private and public employment on a nationwide basis.

WORKPLACE COMMITMENTS

Affirmative Action Program

Affirmative Action Statement

It is our policy to employ, retain, evaluate, promote, discipline, and otherwise treat any and all employees and job applicants without regard to any individual's sex, sexual orientation, gender identity, race, color, religion, national origin, age, marital status, medical condition, or physical disability.

Affirmative Action Program

Executive Order 11246 requires Pathfinder, Inc. to maintain and develop an affirmative action program. The Department of Labor, Office of Federal Contracts Compliance Programs regularly monitors the organizations monitoring and evaluation of the Affirmative Action Program. The Human Resource Department and Director of Quality Assurance shall be accountable to the Executive Director for coordination and implementation of the EEO and Affirmative Action Program policies.

Affirmative Action Officer

The Director of Quality Assurance has been appointed by the Executive Director to perform the duties of the Affirmative Action Officer. The Director of Quality Assurance will coordinate, monitor, and review all grievances filed or received within the organization and will advise and assist key personnel and employees to officially serve as a focal point for complaints, and to submit reports as needed.

The Director of Quality Assurance will keep a record of all grievances filed and appropriate documentation will be kept of each grievance.

Monitoring and Evaluation

The Executive Director/Designee has the authority and responsibility for review and analysis of the Affirmative Action Program Plan. A review of employment practices and the Affirmative Action Program will be conducted at least annually and the plan will be revised annually to adjust equitably to economic and social changes with particular emphasis being placed on the status of minorities, women, the handicapped and older workers, and individuals with disabilities, establishing new objectives and timetables for the ensuing year as required.

The review and analysis of the program shall include:

- Developing and implementing audit and reporting systems designed to:
- Continually measure the effectiveness of the plan
- Point out deficiencies and needs for remedial action
- Determine the degree to which goals and objectives have been reached
- Conducting periodic audits of hiring and promotion techniques to insure that provisions of the plan are being carried out and the goals and objectives are being met.
- Making a periodic review of the plan and submitting recommendations for expansion and improvement of the plan where applicable.
- Serving as liaison between the school, minority organizations, and community action groups.
- Assisting in the identification of problem areas and establishing specific goals and objectives.
- Holding discussions with supervisors and key personnel to insure that EEOC policies are being followed and involving department employee in a goal setting process.

Communication and Dissemination of Affirmative Action Plan

Internal and external communication to the Pathfinder, Inc. Equal Employment Opportunity Policy will include, but not be limited to, the following:

- Notice of the policy will be placed in plain sight in the office or at work sites for the benefit of interested parties.
- Special meetings will be arranged and conducted as needed with the organization's employees and key personnel in order to explain the intent of the EEO policy and responsibility of the individual.
- Advertisements to fill position vacancies shall carry the phrase "Equal Opportunity Employer, Male/Female."

- Pathfinder, Inc. will announce and publicize the EEO policy through dissemination of information to local newspaper(s), radio stations and TV stations, as appropriate, and copies of the EEO Policy of providing full and equal opportunity will be made available to interested parties and/or agencies on request.

Recruitment

Recruitment procedures will be reviewed and monitored to insure that no discriminatory practices exist.

The following recruitment methods will be utilized to reach both female and male minority groups and in seeking qualified individuals to fill job openings:

- Community organizations representing minority groups, where older workers and individuals with disabilities will be contacted.
- Current employee will be encouraged to seek out and refer qualified applicants.
- Recruitment efforts will be coordinated with news media, public schools, and Arkansas Employment Security Division.
- Recruitment from existing employee for positions that constitute upgrading for employee will be conducted to insure that existing employee will be considered for higher positions for which they might be qualified.

Every effort will be made to insure that recruitment information is relevant to members of minority groups, women, and the elderly.

Equal Opportunity Policy

It is the policy of Pathfinder, Inc. to provide Equal Employment Opportunity to all its employees and applicants for employment and to assure that there will be no discrimination against any person because of citizenship, race, creed, color, marital status, disability, sex, sexual orientation, gender, gender identity, age, ethnic or national membership, national origin, and/or protected veteran status with regard to any employment practices, political affiliation or beliefs. This policy extends to all areas of employment including, but not limited to, the following: recruitment, interviewing, selection and placement, working conditions, benefits, privileges of employment, compensation, training, advancement, transfer, demotion, and termination. Pathfinder, Inc. will continue to take affirmative action to employ and advance in employment women, minorities, individuals with disabilities, and protected veterans and to treat qualified individuals without discrimination in all employment practices.

Further, it is the policy of Pathfinder, Inc. to inform all sources that have contracts with Pathfinder, Inc. of our Equal Employment Opportunity Policy and to require that all subcontracts and/or contracts through Pathfinder, Inc. agree to comply with Title VI of the Civil Rights Act of 1964, as amended by legislation in 1972, and other applicable federal laws governing equal opportunity regulation and all requirements imposed by or pursuant to that title, and shall agree to comply with the Department of Labor's regulations under Section 504 of the Rehabilitation Act of 1973, so as to insure that during the performance of the contract there will be no discrimination against any person because of citizenship, race, creed, color, marital status, disability, sex, sexual orientation, gender, gender identity, age, ethnic or national membership, national origin, and/or protected

veteran status with regard to any employment practices, political affiliation or beliefs. Pathfinder, Inc. is committed to comply with all federal, state, and local legislation, presidential executive orders and court decisions relating to Equal Employment Opportunity, and will work with the appropriate parties and/or agencies within the community so as to cooperate in further development of community acceptance and adoption of non-discrimination practices to insure that women, minorities, individuals with disabilities, and protected veterans are afforded full employment opportunities.

Selection, Appointment, and Placement

Selection and appointment of employees will be made on the basis of merit. Educational and job related experience requirements are to be established, and all candidates will meet these before appointment to a position. Applications for vacant positions will be received and the candidates will be ranked according to their qualifications. Open competition, whenever practical, will exist for all appointments. However, to facilitate the career employment of individuals with disabilities, competition may be limited to such persons. If open or limited competition is not practical, non-competitive appointments may be made.

Grievance Procedures

Step One:

Employee must express his/her grievance in writing to the Director of Quality Assurance. The grievant must have completed a ninety (90) day new hire probationary period of employment to be eligible to grieve an action. The written grievance:

- Must be dated.
- Must address each grievance separately.
- Must address matters that affect the aggrieved employee personally.
- Must be given to the Director of Quality Assurance within five (5) business days of the occurrence of or knowledge of the matter being grieved.

Step Two:

The grievance will give the employee the opportunity to provide additional information on their behalf. The Director of Quality Assurance will review the information provided by the employee and may ask questions of the employee. Based upon the information provided by the employee, the Director of Quality Assurance may do additional follow up and/or questioning of other involved parties to seek clarification. The Director of Quality Assurance will make a determination if the action taken against the employee was done fairly, consistently and in accordance with Pathfinder, Inc. policy. The decision will be provided to the employee within five (5) business days of receiving the formal grievance.

Step Three:

If the decision of the Director of Quality Assurance is adverse to the employee, he/she may seek an outside arbitration source.

Employee Responsibilities:

- Must initiate action by writing down the problem and expressing his/her grievance in writing within five (5) days of the occurrence.
- Each occurrence must be addressed and dated separately.
- If there is more than one (1) occurrence to be grieved, they may be addressed as item 1, item 2, etc., but each, and its date of occurrence must be addressed separately.
- Must be available to during the grievance period if additional information is needed.

Affirmative Action/Grievance Officer Responsibilities:

- Must start file on grievance when provided with a copy of the employee's grievance.
- Must assure that the aggrieved employee receives an impartial hearing.
- Must document results of the grievance.
- Must provide written decision to the employee within five (5) business days of receiving the formal grievance. If an extension is needed to complete additional review and or follow-up, the grieving employee will be advised when the decision is expected to be made.

The decision of the Director of Quality Assurance will be Pathfinder, Inc.'s final decision in the matter.

Cultural Competency

Pathfinder, Inc. is committed to fostering, cultivating, and preserving a culture of diversity and inclusion. Our human capital is the most valuable asset we have. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities, and talent that our employees invest in their work represents a significant part of not only our culture, but our reputation and Pathfinder, Inc.'s mission as well.

We embrace and encourage our employees' differences in age, color, disability, ethnicity, family or marital status, gender identity and expression, language, national origin, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status, veteran status, and other characteristics that make our employees unique.

Pathfinder, Inc.'s initiative are applicable, but not limited to, our practices and policies on recruitment and selection, compensation and benefits, professional development and training, promotions, transfers, social and recreational programs, layoffs, terminations, service delivery, and the ongoing development of a work environment built on the premise of diversity equality that encourages and enforces:

- A. Respectful communication and cooperation between all employees and toward all consumers.
- B. Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
- C. Employer and employee contributions to the consumers and communities we serve to promote a greater understanding and respect for diversity.

All employees of Pathfinder, Inc. have a responsibility to treat others with dignity and respect at all times. All

employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the work site, and at all other company sponsored and participative events.

At orientation training, all employees will receive overview training on cultural competency in accordance with Pathfinder, Inc.'s Affirmative Action Plan, federal regulations, and other regulatory agency standards and guidelines. All employees are also required to attend and complete annual diversity awareness training to enhance their knowledge to fulfill this responsibility.

Programs, employees, and consumers within Pathfinder, Inc. sponsor events that demonstrate and provide awareness to staff, consumers, and various stakeholders of the various cultural and ethnic backgrounds and customs represented within Pathfinder, Inc. and our local communities.

Upon orientation, all employees will receive training on cultural competency in accordance with Pathfinder, Inc.'s Affirmative Action Plan, federal regulations, Developmental Disabilities Services standards, Office of Long Term Care guidelines and CARF accreditation standards. An annual training will be conducted for all employees.

Employees who believe that they have been subjected to or witnessed any kind of discrimination that conflicts with Pathfinder, Inc.'s Diversity Policy and initiatives should seek assistance from their supervisor or the Director of Quality Assurance.

An employee found to have exhibited any inappropriate conduct or behavior against others will be subject to disciplinary action.

Workplace Harassment Policy

Purpose Statement

Pathfinder, Inc. seeks to ensure a work and training environment for all employees and individual/consumers/residents free from all forms of unlawful discrimination and conduct considered harassing, coercive or disruptive, including sexual harassment. This policy prohibits harassment in any form, including verbal, physical, and visual harassment.

Reporting Harassment

Pathfinder, Inc. will not tolerate harassment of its employees and participants/consumers by anyone: co-workers, other participants, consumers, management, supervisors, non-management, customers, or anyone doing business with the organization. Management and supervisors are responsible for ensuring their respective areas are free from all forms of harassment. Any employee (or participant/consumer) who feels she or he is being harassed must report such violations immediately to his or her immediate supervisor. If the employee cannot talk with his/her supervisor, the report should be made to the Director of Quality Assurance at (501)-982-0528.

Supervisors or other managers must immediately notify the Executive Director of any observed or reported behavior described above or upon the receipt of any complaint of harassment.

Employees, supervisors, and victims, who fail to immediately report harassment, will be subject to disciplinary

action for failure to follow established policy. Disciplinary action can include warning, suspension, transfer, discharge, or termination of services.

Sexual Harassment

Definition: Sexual harassment is misconduct that undermines the integrity of the employment (and training) relationship. No employee (or individual/consumer), male or female, should be the object of an unwelcome sexual advance or request for sexual favors as an explicit or implicit term or condition of employment (or training status) or when submission or rejection of the advance or request is the basis for a decision affecting employment (or services) provided. Sexual harassment is also the intentional or repeated unwelcome verbal comments, sexually suggestive comments, jokes, or display of sexually oriented materials including pinup type calendars of either sex. The unwelcome intentional touching of intimate body areas, between consenting persons while at work in view of others is sexual harassment of other employees (and individual/consumers) and is strictly prohibited. Occasional compliments of a socially acceptable nature are not sexual harassment. Sexual harassment is the behavior described above that is not welcome, is personally offensive, and interferes with work (or training) effectiveness.

Reporting: Victims of harassment must report such incidents immediately to their supervisor. Any employee or participant/consumer who is a victim of sexual harassment, but cannot go through their immediate supervisor, must report the violation to the Director of Quality Assurance or Executive Director. Either can be reached at 501 982-0528. Your identity will be kept confidential unless you provide written authorization to use your name. Employees should feel free to report incidents of sexual harassment without fear of retaliation.

Factual Determination: Pathfinder, Inc. recognizes that the question of whether or not a particular action or incident is a purely personal, social relationship without a discriminatory employment effect requires a factual determination based on all facts in this matter. Given the nature of this type of discrimination, Pathfinder, Inc. recognizes also that false accusations of sexual harassments can have serious effects on innocent men and women. We trust that all employees of Pathfinder, Inc. will continue to act responsibly to establish a pleasant working environment free of discrimination.

Drug Free and Alcohol Free Workplace

It is the policy of Pathfinder, Inc. to maintain a work place that is free from the effects of drug and alcohol abuse. Employees are prohibited from the use, sale, dispensing, distribution, possession, or manufacturing of illegal drugs and narcotics or alcoholic beverages on company premises or work sites.

If you are cited for violation of the laws above, you are required to notify us within five (5) days.

The company will not hire, unless state or local law provides otherwise, individuals whose pre-employment drug screen reflects use of such substances that prevents them from performing their jobs or who would constitute a direct threat to the property or safety of others.

Successful applicants for employment will receive a conditional offer for employment subject to passing a drug test. Refusal to submit to a pre-employment drug screen will result in rescinding the conditional offer for employment.

For Cause, Reasonable Suspicion

Supervisors should report immediately to their Supervisor any action by an employee who demonstrates an unusual behavior pattern, work habits, or the observation of drugs and drug paraphernalia on or about the person. Employees can report to the Director of Quality Assurance or the Human Resources Manager if the employee feels they can't report to their supervisor. Other behavior commonly associated with drug or alcohol influence, such as a staggered walk, erratic behavior, slurred speech, and/or dilated pupils must be observed and documented. The Executive Director and/or Designee will determine whether the employee should be examined by a physician or clinic and/or tested for drugs and alcohol. Refusal by the employee to submit to a drug/alcohol test will be grounds for immediate dismissal. Employees believed to be under the influence of drugs, narcotics, or alcohol will be required to leave the premises. If an employee is terminated due to a positive drug/alcohol test, they may not be eligible to reapply for employment with Pathfinder for 90 days based on the circumstances surrounding their termination.

New-Hire Testing

The qualified applicant will receive a conditional offer of employment, subject to passing a drug test. (When hiring an in-house employee who is already assigned a category status, drug testing will be conducted if the employee has not been tested within thirty [30] days.) A Human Resources Department employee will arrange a drug test for the qualified applicant. Only after a conditional offer of employment is made can the employee be required to take the drug test. Refusal to submit to a pre-employment drug screen will result in rescinding the conditional offer for employment if an applicant fails an initial drug screen, they may not be eligible to reapply for employment with Pathfinder for 90 days.

Post Accident

Drivers involved in a vehicle accident (regardless of being issued a citation) must undergo a drug test. Employees will not be allowed to operate a Pathfinder, Inc. vehicle or a private owned vehicle while conducting Pathfinder, Inc. business until the testing results have been received. Testing will be conducted immediately upon the completion of the on-scene investigation.

Return to Work

Any employee may be required to undergo drug testing upon returning to work, following any period of extended leave of three (3) weeks or more, including Workers' Compensation Leave and Family Medical Leave.

Failure to Submit

Failure to submit to a drug screen may result in disciplinary action up to and including termination.

Medical Marijuana

Pathfinder takes the position that illegal drugs have no place in the work environment. Current use of marijuana is prohibited by individuals in safety-sensitive positions.

Pathfinder will presume an individual is engaged in current use of marijuana when a positive test result for

marijuana is received.

The ADA specifically addresses illegal drug use, alcohol and testing programs. Current users of illegal drugs are excluded from ADA protections and subject to discipline or termination.

Policy Violations

Testing positive for drugs or alcohol is a violation of this policy. Employees subject to the Drug-Free Work Place Act who are convicted of any criminal drug violation must report such conviction to their supervisor within five (5) days, and management is then to take appropriate action as required by law.

Employees will be subject to disciplinary action, up to and including dismissal, for violations of this policy. Such violations include, but are not limited to, refusal to submit to testing as outlined in this policy, possessing illegal or non-prescribed drugs and narcotics or alcoholic beverages at work, being under the influence of such substances while working, and using, manufacturing, or selling them on company premises and work sites. Employees, their possessions, company issued equipment, and containers under their control are subject to search and surveillance at all times while on company premises or while conducting company business.

Seeking Help

Employees who are experiencing work related problems resulting from drug, narcotic, or alcohol abuse or dependency may request to seek counseling help. Job performance alone, not the fact that an employee seeks counseling, is the basis for all performance appraisals. Any employee who voluntarily discloses prior to a positive drug test that they are abusing drugs or alcohol may be granted a leave of absence to undertake rehabilitation treatment. The treatment must be provided by a certified rehabilitation program. The employee will not be permitted to return to work until certification is presented to his/her supervisor stating that the employee is participating in or has completed a treatment program. The employee will be required to submit status updates for attendance of the program. Pathfinder, Inc. will, to the extent feasible, provide continuing education for the work force about the ill effects of drug and alcohol abuse.

Tobacco Policy

In order to protect employee's health and our facilities, use of any tobacco related products in Pathfinder, Inc. vehicles, in personal vehicles transporting clients, offices, and facilities is prohibited. This includes smokeless tobacco products and/or devices. Designated smoking areas will be at least twenty-five (25) feet from entrances to buildings and will be so identified. Supervisors must designate smoking areas that are twenty-five (25) feet away from building entrances.

Workplace Violence Policy

Pathfinder, Inc. unequivocally condemns any act of harassing, intimidating, threatening or assaulting fellow employees at and away from the workplace. Pathfinder, Inc. seeks to prevent workplace incidents of violence by enforcing its behavior and discipline policy and by conducting pre-employment screens, criminal background checks, and drug screens.

Weapon Policy

The carrying of a weapon is prohibited while at the workplace. All Pathfinder, Inc. facilities are subject to inspection at any time. Any employee found in violation of the Weapon Policy will be subject to disciplinary action and reported to local law enforcement agencies.

Safety Policy

The safety and health of our employees is Pathfinder, Inc.'s most important business consideration. Pathfinder, Inc. will comply with all applicable workplace safety and health requirements and maintain occupational safety and health standards that equal or exceed the best practices.

Pathfinder, Inc. has a safety committee, consisting of management and program representatives, whose responsibility is identifying hazards and unsafe work practices, removing obstacles to ensure accident prevention, and helping evaluate the company's effort to achieve an accident-and-injury-free workplace. This committee will meet formally every quarter or sooner if a hazard or working conditions warrant.

The company pledges to do the following:

- Strive to achieve the goal of zero (0) accidents and injuries.
- Provide mechanical and physical safeguards wherever they are necessary.
- Conduct routine safety and health inspections to find and eliminate unsafe working conditions, control health hazards, and comply with all applicable safety and health requirements.
- Train all employees in safe work practices and procedures.
- Provide employees with necessary personal protective equipment and train them to use and care for it properly.
- Enforce company safety and health rules and require employees to follow the rules as a condition of employment.
- Investigate accidents to determine the cause and prevent similar accidents.

Managers, supervisors, and all other employees share responsibility for a safe and healthful workplace:

- Management is accountable for preventing workplace injuries and illnesses.
- Management will consider all employee suggestions for achieving a safer, healthier workplace. Supervisors are responsible for supervising and training workers in safe work practices.
- Supervisors must enforce company rules and ensure that employees follow safe practices during their work.
- Employees are expected to participate in safety and health program activities including: immediately reporting hazards, unsafe work practices, and accidents to supervisors or management, wearing required personal protective equipment, and, participating in monthly safety briefings.

Debriefing Policy

Pathfinder, Inc.'s Director of Quality Assurance/Designee and the program director will coordinate all debriefing based on the nature of incidents. The Executive Director and/or Designee will assign key personnel to perform

crucial functions to ensure that the critical incident is handled in a timely, professional and proactive manner. The debriefing will be designed to mitigate the impact of the incident and assist in the stress associated.

Debriefings will be conducted within twelve (12) to seventy-two (72) hours of post-incident.

Examples of critical debriefing incidents include, but are not limited to, the following:

- Sudden death
- Suicide or threat of suicide
- Life threatening injury/illness
- Sexual assault
- Mental health crisis
- Drug/alcohol overdose
- Violent or threat of violent crime on campus
- Campus disturbance/riot
- Fire/explosion
- Natural disasters

Serious Accident, Illness, or Fatality of Employees

This information is being provided to assist staff in ensuring all steps are taken in making proper notifications subsequent to a serious accident, illness, or fatality of an employee at a Pathfinder, Inc. facility.

Emergency Contact

- A. All staff will be asked to provide an updated “*Emergency Contact Form*” during their Annual Performance Evaluation.
- B. Any time a change in emergency contact information occurs; an updated “*Emergency Contact Form*” should be completed by the employee and given to the supervisor who will ensure that the updated information is sent to Administration with a copy maintained at the facility.
- C. A copy of all staff “*Emergency Contact Forms*” will be maintained in each facility, in an area accessible to all staff during all shifts.
- D. A copy of all “*Staff Emergency Contact Forms*” will be maintained in the employee master personnel file.
- E. In the case of transport of an employee to a medical facility, a copy of the “*Emergency Contact Form*” will be provided to the transporter(s).
- F. The supervisor of the facility will make notification of the incident to the individual designated as the emergency contact or, if the emergency contact person cannot be reached, to other known family members (if any are known) to advise of the incident.
- G. In the event the supervisor is not on site, the next level supervisor should be contacted for instruction and contact.
- H. Notification to the emergency contact or other known family member, if applicable, should be made regardless of whether another agency or entity will make efforts to notify emergency contacts or family.

Supervisor Responsibilities

- A. Supervisors should contact their Administrator/Director as soon as possible to report the incident.
- B. Administrator/Director should immediately make contact with Director of Quality Assurance
- C. Complete “DHS Incident Report Form” which will include documentation of all notifications including emergency contact notification and submit to Administration.

Administration Responsibilities:

Following an incident subject to this protocol, the Director of Quality Assurance/Designee will:

- A. Report to Occupation Safety and Health Administration (OSHA) within eight (8) hours of notification of occurrence of inpatient hospitalization or fatality.
- B. Report to Workers Compensation.
- C. Report via “DHS Incident Report Form” to proper licensing agencies.
- D. Initiate/conduct any investigation as applicable.
- E. Provide technical assistance as needed.

Conduct Policy

Pathfinder, Inc. does not violate the law and does not tolerate those who do. If an employee believes that any person employed or associated with Pathfinder, Inc. has directed him or her to do anything that violates the law, or has prohibited the employee from doing anything that the law requires him or her to do must report the conduct immediately to his or her supervisor and the Executive Director.

Infectious Disease Control/COVID

Infectious Disease Control

An individual should remain at his/her residence if he/she is not physically well. Parent(s)/guardian(s) are asked to notify the Pathfinder, Inc. employees if individuals are contagious or if infectious conditions exist. Upon notification of such a condition, the employee will verify the doctor's report and then notify the affected individual's parent/guardian. If an individual is discovered to have a contagious or infectious disease while at our facility, the individual will be isolated from the others until the guardian can be contacted or the individual can be sent home. If the individual is a resident of one of our facilities, the individual will be isolated from the other residents while in a contagious or infectious state.

The communicable diseases of public health significance are to be reported to the Arkansas Department of Health within twenty-four (24) hours of diagnosis. Reports should include: 1) the reporter's name, location and phone number, 2) the name and onset date of the disease, 3) the patient's name, address, phone number, age, sex and race, 4) the attending physician's name, location and phone number, 5) any pertinent clinical, laboratory, and treatment information.

Report by Fax to 501-661-2428; 24 hr. answering machine 800-482-8888; in person to 501-661-2893. A list of communicable diseases and the “Communicable Disease Reporting Form” are found on the Arkansas

Department of Health website at: <https://www.healthy.arkansas.gov/programs-services/topics/communicable-diseases>

COVID or Other Infectious Diseases

Pathfinder will adhere to the guidelines set forth by the Arkansas Department of Health and other governing entities. Proper precautions will be taken to ensure health and safety of all individuals.

Use of Chemicals

Employees need to look at the packaging of all products used and read the labels carefully. The labels on products are there to keep individuals aware of how to stay safe. Employees should take the instructions seriously - they are there to increase the safety of everyone!

Try to reduce exposure to hazardous chemicals to a minimum. The risk an individual faces from a chemical is based on its inherent danger, multiplied by exposure to it – the amount one is exposed to, or the time over which one has been exposed.

Take advantage of the right to know what is in the consumer products that are bought. Ask retailers what hazardous chemicals are in them. They are legally obliged to give individuals this information. Knowing this information will assist in avoiding products containing hazardous chemicals.

Remain informed by using the OSHA website. Employees can refer to Pathfinder, Inc. Exposure Control Plan and Hazard Communication for more information.

Open Door Policy

The fair, prompt, and just treatment of all employee problems or complaints is of primary importance to Pathfinder, Inc. Open communication is a vital part of a successful organization. Pathfinder, Inc. strives to provide an atmosphere conducive to open discussion between supervisors, managers, and their employees.

In view of this Open Door Policy, employees are assured that an employee will not be criticized, penalized or subjected to discrimination as a result of good faith candid discussions with any supervisor, department administrator, or manager.

Employees not satisfied with the outcome of the discussion should follow the chain of commands up to the Executive Director.

Employee Confidentiality/HIPAA

Pathfinder, Inc. will maintain all individual, personnel, and related documentation in a confidential manner in accordance with regulatory agencies and the Health Insurance Portability and Protection Act of 1996 (HIPAA) requirements.

Only authorized Pathfinder, Inc. personnel, state licensure accreditation, regulatory enforcement personnel and those entered in business contract agreements with Pathfinder, Inc. have access to the records of persons served, administrative records, personnel records, financial records and electronically generated documents,

which may include fax and e-mail. Pathfinder, Inc.'s computer department routinely downloads and copies all electronic records on a regular basis. These records are kept off site in a secured environment in case of theft, fire, and water damage or other natural causes or hazards. Confidential information that is maintained on-site is kept in a secured location and only authorized Pathfinder, Inc. personnel have access to these records.

The affairs and records of individuals served must be held in the strictest confidence. Employees are prohibited from sharing or discussing confidential information, including pay, benefits, raises or other personnel information with co-workers, friends, relatives, or any other unauthorized individuals without a business need to know the information. Any suspected breach of confidentiality should be reported to Administration for proper action.

The Executive Director and/or Designee must approve any disclosure of confidential information/records. All requests for confidential information, involving litigation or a legal process must be forwarded to the Executive Director for review. Any breach of confidentiality will result in disciplinary action up to and including termination.

Technology Policy

Security and Privacy Statement for Confidential Data

Pathfinder, Inc. is dedicated to providing consumers with the most effective privacy safeguards available. Our strict privacy policy incorporates multiple measures to ensure that confidential consumer data is accessible only to authorized persons. All users of consumer's information must be authorized by the Pathfinder, Inc. server and verified with user name and complex password. In addition, we carefully control all internal access to Information Technology Supervisor, who reports to the Chief Financial Officer.

The privacy of all our site users is also protected. We do not sell, trade, or release the names or personal information of data obtained through our on-site e-mail capabilities without expressed written permission.

Any request for assistive technology to assist in either job function or consumer care must be addressed to the Internet Technology Supervisor.

Implemented Safeguards

Pathfinder, Inc. has implemented the following safeguards to protect consumer data:

- Secure Firewalls: Cisco has earned all of the industry's major awards and certifications, including the world's most rigorous and internationally accepted IT security evaluations including EAL4+ Certification and ITSEC E3 Security Certification.
- Authentication Mechanisms: Our Cisco Firepower Firewall System provides consumers, including remote users, with secure, authenticated telecommunications access to resources using multiple authentication schemes.
- Pathfinder, Inc. has implemented the most respected data and security systems available to ensure the accuracy and privacy of all consumer information.

It should be noted, however, that we claim no liability for the failure of such systems when circumstances are beyond our control.

Virus Protection

We currently are using AVG Anti-Virus on all servers within Pathfinder and Microsoft Windows Defender on each computer in all of Pathfinder, Inc.'s facilities for virus protection. Each computer is configured to automatically update daily. We also have Microsoft Firewall enabled on outlying facilities for extra protection.

Internet Access

Pathfinder, Inc. employees have access to the internet.

Remote Access

The Pathfinder, Inc. network is protected by Pathfinder, Inc.'s server software, Microsoft Server, and Cisco Guard Firewall. The security on the network can be set all the way down to specific files. Employees who access information from remote locations are restricted to their own area on the network. The only damage they could do would be to their files. With Pathfinder, Inc.'s backup system we would be able to restore up to the previous night any damage that they may do.

Security Summary of Software and Hardware

All of Pathfinder, Inc. users' information, not just the sensitive information mentioned above, is restricted in Pathfinder, Inc.'s offices. Only employees who need the information to perform a specific job are granted access to personally identifiable information. Furthermore, all employees are kept up-to-date on Pathfinder, Inc.'s security and privacy practices. Any time new policies are added, Pathfinder, Inc.'s employees are notified and/or reminded about the importance we place on privacy, and what they can do to ensure Pathfinder, Inc.'s users' information is protected. Finally, the servers that store personally identifiable information are in a secure environment.

Data Back Up Policy

All data is backed up daily. Weekly backups are stored off site in a vaulted system, which is accessible by key Pathfinder, Inc. Board and staff.

Disaster Recovery Preparedness

In the event of a disaster or complete loss of data, all information that is stored on backup can be re-established on a server to minimize the loss of data and the impact upon business functions. The Information Technology Supervisor is responsible for the recovery and re-installation of data as soon as functionally possible.

Links

The Pathfinder, Inc. website contains links to other sites. Please be aware that we, Pathfinder, Inc., are not responsible for the privacy practices of such other sites. We encourage Pathfinder, Inc.'s users to be aware when they leave Pathfinder, Inc.'s site and to read the privacy statements of each and every website that collects

personally identifiable information. This privacy statement applies solely to information collected by the www.Pathfinderinc.org. We do not partner with, or have special relationships with, any ad server companies.

Availability of Personnel to Assist Users

Each individual service page lists personnel to contact for more information and assistance with accessing the service. There are email addresses, contact names, and alternative methods of contact posted on the contact page of www.Pathfinderinc.org.

User's Rights

To help keep Pathfinder, Inc.'s promise to respect the user's privacy, it is important when an individual wishes to exercise their rights that they contact Pathfinder, Inc. via any of the means listed in the first section of this Privacy Policy.

Changes, Comments, Questions

If Pathfinder, Inc.'s information practices change at some time in the future, we will post the policy changes to the website to notify you and allow you to opt out of new uses. The latest version of Pathfinder, Inc.'s Privacy Policy will always be available at www.Pathfinderinc.org. If concerned about how user information may be used, please check our website periodically. Pathfinder, Inc. welcomes your comments or questions about Pathfinder, Inc.'s Privacy Policy and privacy practices. If you feel that www.Pathfinderinc.org is not following the stated policy, please contact your supervisor.

Using Technology to Enhance and Improve Services

Pathfinder, Inc. strives to enhance individual service through use of available technology. Pathfinder, Inc. uses donated equipment to improve access and communication with consumers and other stakeholders. Pathfinder, Inc. has a website that is designed to provide information to the general public including general information about the organization, descriptions of services provided and employment opportunities. Pathfinder, Inc. also uses Facebook to provide information to and receive information from the public.

Pathfinder, Inc. uses its website and social media to improve communication among personnel, stakeholders and consumers. Pathfinder, Inc. is working to develop the use of tele-psychiatry to improve services to isolated populations in Arkansas.

Pathfinder, Inc. works to use the computer and other technology, like handheld data devices, to improve the efficiency and productivity of personnel. Ordering of supplies and access to information on various services provided are available to designated employees once they sign in. All confidential information requires two (2) points of password protected entry.

Equipment Policy

Use and Return of Equipment

Employees are trusted to behave responsibly and use good judgment to conserve company resources. Company

resources, including time, material, equipment, and information should be utilized for company use only.

During employment, employees may be issued company property including a computer, a laptop, cell phone, pager, hand-held mobile device, or keys. Employees are expected to take proper precautions to care for company property. Upon termination, employees are expected to return all company property in proper working order. Employees are expected not to remove any files, contacts, and programs on any electronic device. Failure to return property may be considered theft and may lead to criminal prosecution.

Questions about the proper use of company resources should be directed to supervisors.

Issuance of Property

When easily portable property is issued to an employee, it is mandatory for the employee to sign the “*Property Receipt Form*”. The supervisor issuing the property is to complete all relevant information on the form, maintain the original, and submit a copy to the Human Resources Department.

Return/Exchange of Property

The supervisor issuing the property should complete the “return” section of the old “*Property Receipt Form*” and complete a new “*Property Receipt Form*” for the new property. Copies of all changes should be submitted to the Human Resources Department.

Employee Terminating/Transferring

Before an employee’s termination or transfer, the Human Resources Department should be contacted for information on any property that may have been issued. The employee’s supervisor should complete the “return” information of the “*Property Receipt Form*” and submit to the Human Resources Department. Before submitting a final pay request, all property should be returned.

REPORTING AND INVESTIGATIONS

Solving Consumer Issues

Supervisors, administrators and employees at all levels shall receive, and act promptly and fairly, upon consumer issues. Pathfinder, Inc. recognizes the importance of bringing to light and resolving grievances and/or complaints promptly. If you need further assistance at any time with bringing an issue, grievance, and/or complaint please contact the main office at [\(501\)982-0528](tel:501982-0528), and an employee will be designated to assist you in any way possible with your issue, including information on external options.

Individual/Parent/Guardian Grievance Procedures

The following procedure is hereby established to handle individual/parent/guardian grievances:

- A. Any individual/parent/guardian expressing a grievance of any nature shall first present the grievance in writing to the program director of the facility within five (5) business days of knowledge of the incident.

The consumer and/or the guardian/custodial parent, may present his/her grievance in good faith, without fear of any reprisal, retaliation or barrier to services.

- B. Within five (5) business days of the filing, the individual shall meet with the program director. Written notification and actions taken as a result of this meeting will be provided within five (5) business days of said meeting to the consumer or his/her representative.
- C. If the individual is not satisfied with the results of the meeting listed in B, they may contact the Director of Quality Assurance within five (5) business days.
- D. The Director of Quality Assurance will review all pertinent grievance information submitted and investigate the situation. The Director of Quality Assurance render a final decision within five (5) business days of the meeting. The decision will include appropriate resource information for an external appeal and assistance.

An annual written report of all formal complaints and grievances will be conducted to determine trends, performance improvement and appropriate actions to be taken.

NOTE: Dismissal and Grievance Procedures are to be outlined in the Individual Policies and Procedures Manual.

Physical Abuse, Verbal Abuse, Critical Events Policy

The policy of Pathfinder, Inc. prohibits the use of corporal punishment, physical abuse, verbal abuse (shouting, screaming, swearing and name calling) or any other activity that would be damaging to a person's served self-respect, safety, or result in occurrences of critical incidents other than by means of natural causes. All personnel of Pathfinder, Inc. are trained upon hire and at least annually on the laws and regulations of the state of Arkansas regarding the prevention and timely reporting of Maltreatment and Critical Incidents. Training on conducting incident investigations is also available to all supervisory employees on an as needed/as requested basis. No corporal punishment, seclusion or restraint may be administered to a consumer by an employee at any time.

Critical incidents resulting in death, medication errors, misappropriation of client funds, unauthorized seclusion or restraint, injury, communicable disease, infection, violence or aggression, use or possession of weapons, elopement and/or wandering, vehicular accidents, bio-hazardous accidents, use of illicit or licit substances, abuse or neglect, suicide or attempted suicide are reported and investigated as required by DDS Policy 1090.

Reporting Process

A "DHS Incident Report Form" will be completed and forwarded to Pathfinder, Inc. Administration by 9:00 A.M. next business day to be reported to the appropriate agencies.

Mandated Maltreatment Reporters

Arkansas requires that all educational care workers report a condition that might be considered child abuse as referred to in Arkansas Code 12-18-103 (i.e. maltreatment, abuse, exploitation, abandonment, neglect, etc.). The EIDT Program will report such activity or suspicion immediately to the Department of Human Services (DHS), Child Abuse Hotline 1-800-482-5964. A written report to the local DHS and Developmental Disability Services (DDS) Offices will follow and kept in a confidential file accessible by the director. The reports will not be placed

in the student’s personal life. Neither the EIDT Program nor the employees of Pathfinder, Inc. determine child abuse. After the report is made, DHS is responsible for investigation and follow-up.

The Department of Human Services (DHS) requests you be notified that your child may be subject to interview at any time by the Department of Children and Family Services (DCFS), Special Investigations, and Law Enforcement for investigative purposes and/or for determining compliance with licensing regulations.

Individual Oriented Concerns Procedures

Pathfinder, Inc. provides an administrative procedure to assure that individuals, who believe that the rights of the program's individuals are not protected or observed, may file a formal grievance against the program or individual employees of the program. The administrative procedure shall assure a fair and thorough hearing for both the accuser(s) and the accused, with the right of legal representation and/or counsel, at one's own expense, throughout the process and shall be directed toward arriving at administrative actions that properly address the complaint. Utilization of the administrative procedure shall not result in any adverse management action against individuals filing complaints but shall be viewed by management as an amicable and constructive method for identifying and solving problems.

Nothing herein prohibits an individual's right to seek guidance and/or assistance from:

Governor’s Council on Developmental Disabilities 1515 W. 7th Street, Suite 320-330 Little Rock, AR 72201 Phone: 501-682-2897 ddcstaff@dfa.arkansas.gov www.gcdd.arkansas.gov	OR	Adult Protective Services Hotline 1-800-482-8049 Child Abuse Hotline 1-800-482-5964
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Concerned individuals shall report directly to the supervisor in charge of the program. Initial report may be verbal, but must be followed with a written, signed report within one (1) working day. Individual/resident statements may be taped in lieu of written report, or written report witnessed by third party component.

A preliminary investigation is immediately initiated by the Director of Quality Assurance resulting in a written report of findings to the director. The investigation should be completed within five (5) working days unless extenuating circumstances exist that require additional time. If, at the end of the preliminary investigation, the Director of Quality Assurance determines the allegation is unfounded, the process is ended unless the charging party desires appeal. The findings of the investigation will be documented and maintained in the Administration Office. The entire process must be completed within ten (10) working days unless extenuating circumstances exist that require additional time.

Notify and forward documentation to the appropriate overseeing authority.

Employee Screening and Continued Monitoring

Pathfinder, Inc. will not knowingly hire or retain any individual who has not satisfactorily met the established requirements. Employees will be considered temporary until appropriate, applicable screening is completed.

This includes (in accordance with applicable state and federal regulations) the following:

- Criminal background check
- Office of Inspector General checks
- Reference checks
- Abuse registry checks
- Drug screening for cause or reasonable suspicion, random drug screening, and pre-employment drug screening for vehicle drivers
- Office of Long Term Care Clearance Registry

If negative findings exist the employee will be subject to termination immediately and reported to the proper licensing agency. Periodic criminal background re-checks will occur within each five (5) year period. Re-checks of the Adult and Child Abuse Registry will occur every two (2) years.

Employee Training and Competency

All new employees will receive orientation training upon hire on prevention and reporting of abuse/neglect. Annual retraining will be conducted for all staff. Additional re-training will be conducted as the need is identified. Rules of reporting allegations will be available in the facility for employees to review.

Identifying, Reporting, and Investigating in an Intermediate Care Facility

- A. All incidents of alleged or suspected mistreatment, neglect, abuse, or misappropriation of resident property, injuries or bruises of unknown origin, exploitation of consumers, unusual deaths or deaths from violence (deaths from natural causes need not be reported) must be reported immediately to the Administrator and/or designee by the employee witnessing or becoming aware of the incident. The Administrator and/or designee will in turn immediately notify Director of Quality Assurance of the alleged incident and complete and “*DHS Incident Report Form*”.
- B. Any person in the facility suspecting the Administrator of abuse, or failing to report abuse should contact the Program Director and the Director of Quality Assurance.
- C. The Administrator and/or Designee under the direction of Pathfinder, Inc. Administration will initiate an immediate investigation of all alleged or actual incidents covered by this policy. The investigation should determine whether an incident has occurred, to what extent the resident was mistreated, by whom, and the measures needed to protect residents from further incidents.
- D. All injuries/bruises of unknown origin, upon finding, must be reported to the Administrator and/or Designee. The Administrator will investigate the cause and question the consumers appropriately regarding the injury/bruise. If suspected abuse is alleged, proper reporting according to this policy will occur.

- E. Medical assessments will be conducted immediately as the circumstance requires. The resident's medical record and care plan will be reviewed. Close observation will occur if the origin of the injuries is unknown and/or abuse is suspected. Residents will be referred for further medical treatment if circumstances indicate. The resident's medical record will contain documentation of objective clinical findings.
- F. All alleged or suspected incidents must be reported by Director of Quality Assurance within specified time frames according to state and federal law.

Reporting Process for ICF/IID Facilities:

- A. A "DHS Incident Report Form" will be completed and forwarded to Pathfinder, Inc. Administration by 9:00 A.M. next business day.
- B. An "Incident and Accident Report Form, DMS 7734," will be completed by the Administrator and/or Designee within twenty-four (24) hours of the incident's discovery or receipt of report and faxed to the Office of Long Term Care by 11:00 a.m. next business day.
- C. The Administrator and/or Designee will complete the investigation report, "DMS 762", and submit a copy to the Office of Long Term Care within five (5) working days of the submission of the "DMS 7734 Form".
- D. All completed reports will be forwarded to the Pathfinder, Inc. Administration Office.
- E. Any employee who fails to report actual or suspected abuse, neglect or misappropriation of property immediately upon discovery will be subject to disciplinary action up to and including termination.
- F. Any employee found to be guilty of abuse, neglect, or misappropriation of property will be terminated. Guilty means that the preponderance of evidence exists to substantiate that the alleged incident occurred.

Protecting From Further Occurrences During Investigation

- A. The alleged perpetrator will be suspended and restricted from facility contact except in the case of investigative interviews pending the results of the investigation.
- B. Any acts of retribution for reporting will not be tolerated and should be reported immediately to the Administrator and/or Designee.
- C. All abuse related incidents will be tracked by the Administrator and/or Designee. Recommendations will be made regarding necessary action to be taken to prevent further occurrences.
- D. An accused resident will be temporarily separated until agitation/behavior has stabilized and the Interdisciplinary Team can develop a care plan to address the current needs of the resident.
- E. An accused family member, visitor will be required to leave the facility grounds.

Disposition of Accused Employee or Volunteer

Any employee or volunteer found to be guilty of violation of maltreatment shall be dismissed from his/her duties.

Definitions

- *Abuse* - the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish.
- *Verbal abuse* - defined as the use of oral, written or gestured language that willfully includes disparaging and/or derogatory terms to residents or within their hearing distance. This includes but is not limited to threats of harm, saying things to frighten residents.
- *Sexual abuse* - includes but is not limited to sexual harassment, coercion, or sexual assault.
- *Physical abuse* - includes hitting, slapping, pinching and kicking. It also includes controlling behavior through corporal punishment.
- *Mental abuse* - includes but is not limited to humiliation, harassment, threats of punishment, or deprivation.
- *Involuntary seclusion* - separation of a resident from the other residents or from his/her room or confinement to room against the resident's will or the will of the resident's legal representative.
- *Neglect* - failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness.
- *Misappropriation of resident property* - the deliberate misplacement, exploitation or wrongful temporary or permanent use of a resident's belongings or money without the resident's consent.

CONTRACTED EMPLOYEES

Pathfinder, Inc. contracts with individuals and entities to perform specific regular services for the organization. A written signed contract defining specific responsibilities and objectives of the contractor is kept on file, including a HIPAA business associate agreement. Verification of credentials, if required, will occur. Appropriate verification and screening will occur as necessary including clearance by the Office of the Medicaid Inspector General (OMIG).

Each contractor of Pathfinder, Inc. must assure that all program benefits are made available to all persons and provided to all eligible individuals, without regard to age, religion, disability, political affiliation, veteran status, sex, gender identity, race, color, or national origin.

Each contractor is responsible for assuring that the program remains in compliance with state and federal regulations governing its operations in the area of expertise for which they are contracting.

FACILITY REQUIREMENTS

All facilities are located, equipped, and designed to assure safe care and supervision for all individuals to enable them to utilize the surrounding community resources necessary to meet their needs.

Compliance

The physical structure of all facilities will be compatible with the services to be provided and with the needs of the individuals. Employees will help to provide an accessible and safe environment. All facilities are in compliance with all applicable laws, rules, regulations, or ordinances of each relevant governmental unit, which

the facility is located in, including; building codes, fire prevention, health safety, zoning, civil rights and employment.

Adult Living Component Physical Plant Requirements

All facilities are in compliance with all applicable laws, rules, regulations, or ordinances of each relevant governmental unit, which the facility is located in, including: building codes, fire prevention, health safety, zoning, civil rights, and employment.

General

- A. Mobile homes will not be utilized as group living facilities.
- B. Facilities are available that are architecturally accessible so as to assure the individuals' reasonable participation. Ramps, doors, corridors, toiletry and bathing facilities, furnishings, and equipment are designed to meet the individual's needs.
- C. The windows, or at least a portion of the windows, should be able to be opened to the outside in Adult Living Component Facilities. All windows should be provided with shades, draw drapes, curtains, or other effective means of controlling natural light and to assure privacy to the occupants.
- D. All areas of all facilities are lighted in accordance with the usage of the area.
- E. The temperature and humidity are maintained within a normal comfort range.

Living Room/Dining Room

The living and dining areas will be utilized as follows to create a "home-like" atmosphere:

- A. Individuals are allowed free use of all space within the facility, with due regard to privacy and personal possessions of others residing in the facility and reasonable house rules.
- B. The living and dining area will be provided with an adequate number of furnishings for the usual functions of daily living, social, and diverse activities. The furnishings shall be sturdily constructed and of satisfactory design to meet the daily needs of the individuals.

Kitchen

The kitchen area should be equipped and maintained as follows:

- A. The facility shall comply with appropriate State Department of Health regulations.
- B. The kitchen will be large enough to accommodate the equipment and personnel needed to prepare and serve the required meals.
- C. The kitchen has equipment, utensils, and supplies to properly store, prepare, and serve the required number of meals.
- D. The hot water supply will be of sufficient temperature to insure dishwashing and sanitizing.
- E. Hazardous, non-edible supplies are not stored adjacent to food storage or preparation areas.

Bedroom

The bedroom area should be decorated and create a "home-like" atmosphere as outlined below:

- A. The square footage of bedrooms should contain a minimum of one hundred (100) square feet per individual in a single occupancy or eighty (80) square feet in multiple occupancy room.
- B. Bedrooms are arranged so that privacy is assured for individuals. Sole access to these rooms is not through a kitchen, bathroom, or other bedroom.
- C. Bedrooms must be equipped with a functioning lock with only appropriate staff having keys.
- D. A maximum of two (2) individuals will share a bedroom.
- E. Bedroom arrangements are compatible with the physical needs of the individuals.
- F. Each beneficiary shall have an individual bed. Each bed must have a clean, adequate, and comfortable mattress.
- G. Each bed shall have a suitable pillow, pillowcase, sheets, blanket, and bed spread.
- H. Bedroom furnishings for each individual shall include shelf space, individual chest or dresser space, and a mirror.
- I. An enclosed closet space adequate for the belongings of each beneficiary must be provided.
- J. Each individual shall be allowed to decorate his/her private quarters in an individual style which will respect the care of the property.

Bathrooms

The bathrooms will be used and maintained as outlined below:

- A. Sole access to the bathroom is not through a kitchen or another individual's bedroom.
- B. Toilet and Lavatory facility is provided for every four (4) individuals.
- C. Individuals shall have access to toilet and bathing facilities that are appropriate in number, size, and design to meet their needs.
- D. The bathrooms are well ventilated by natural or mechanical methods.
- E. Toilets, tubs, and showers used by individuals provide for individual privacy.
- F. Each individual is provided a separate and appropriate place for keeping toilet articles.
- G. Toilet and bathing area fixtures approximate normal patterns found in residential construction, except where special requirements are applicable for physically disabled individuals or for special programs.
- H. Lavatories and toilet fixtures are designed and installed in an accessible manner so that they are usable by the age range of the individuals accepted by the center.

Laundry Facilities

Laundry facilities and services will be addressed as outlined below:

- A. Laundry services and/or appliances for laundry are available within the facility.
- B. Laundry services or assistance is provided for those individuals without the ability to obtain these services themselves.

Safety Guidelines

Material/Equipment Storage Safety

- A. All materials and equipment will be stored and maintained in a safe condition.

- B. Housekeeping equipment and supplies are properly stored.
- C. Cleaning fluids, detergents, and wax are stored in containers describing contents.
- D. Supplies are not stored in the same area as food storage and/or preparation.
- E. A janitor's closet is provided and locked as appropriate.
- F. All paint is used in an acceptable manner and will be lead free.
- G. Mechanical or boiler rooms are not used for storage of flammable materials.

Appliance Safety

- A. Furnaces, heaters, radiators, and exposed water heaters are protected with screens or guards, without sharp corners, and are attached to wall or floor to prevent injury.
- B. Gas heaters are enclosed and properly vented, installed with a cutoff valve.
- C. Provisions are made to control water temperature at one hundred and twenty (120) degrees Fahrenheit. If the thermostat of the hot water heater is set above one hundred and twenty (120) degrees Fahrenheit, a mixer will be used on the lavatories and bathing facilities to maintain individual/employee safety.

Health Safety

- A. In order to protect the health of all individuals and our facilities, all Pathfinder, Inc. offices and facilities are smoke-free.
- B. Provision is made for isolation of an individual with a communicable disease.
- C. All water and sewage disposal systems are in accordance with the regulations of the Arkansas Department of Health in accordance with the usage of the area.
- D. Temperature and humidity are maintained within a normal comfort range in all facilities.

Prevention

- A. Battery operated smoke alarms, carbon monoxide detectors, and/or heat sensors will be installed in each designated area of the facility.
- B. Fire extinguishers, as required by the state Fire Marshall, will be installed in each designated area of Pathfinder, Inc.
- C. Each designated area of the facility will maintain emergency lighting.
- D. Each designated area of the facility will maintain a First Aid Kit.
- E. Antidote charts and telephone numbers of poison control centers shall be readily accessible.

Inspections

An annual review or inspection by a State Fire Marshall will be completed on each building. This review will be kept on file.

Self inspections of all facilities owned and operated by the organization are conducted quarterly for any shift that is staffed by the site designee for environment inspections. A representative from within Pathfinder, Inc. will conduct inspections annually. Records of inspections will be maintained on site and with the Building Maintenance Department. A written checklist of each inspection will be kept that identifies each area checked,

recommendations for improvement, and appropriate corrective actions taken.

Maintenance Guidelines

- A. All facilities are maintained in a clean, safe, presentable interior and exterior that is in repaired condition.
- B. The grounds, and all buildings on the grounds, are maintained in a safe, sanitary, and presentable condition. Activity areas will be free of dense undergrowth and refuse accumulations. All landscape plants and the lawn are kept in well groomed condition.
- C. All indoor and outdoor garbage and other waste materials are kept in covered containers until removed. Containers are emptied as often as necessary to prevent public nuisance, health hazards, and unsightliness at least in accordance with the usage of the area.
- D. All facilities are kept free of unnecessary and unusual accumulations of possessions for the operation of the facility, including equipment and supplies of individuals and staff, which constitute a fire hazard.
- E. The facility is maintained free of infestation of insects and rodents. The facility has a pest control program provided by the maintenance personnel and a contract agreement.

RISK MANAGEMENT

Vehicle Loss Control

Commitment and Involvement

Without management's commitment and involvement, most safety programs fail. The responsibility of management in a Fleet Loss Control Program is to develop the specific policies and procedures concerning vehicle use and accident prevention.

Appropriate consideration should be given to the following key elements of a Fleet Loss Control Program:

- A. Driver Selection
- B. Driver Training
- C. Driver Supervision
- D. Accident Investigation Procedures

At Pathfinder, Inc. all managers, supervisors, and employees are committed to safe operation of vehicles.

Safe Driving Procedures

The following is a list of items leading toward safe driving procedures:

- A. All drivers will have a valid Arkansas driver's license except an individual who is from out of state and attending an institution of higher education or resides in one state and works in another state, but returns to the state he/she came from after a tour of work is over.
- B. All applicable motor vehicle laws of the state, county, city will be adhered to.

- C. No unauthorized driver will be allowed to operate a Pathfinder, Inc. vehicle or a privately owned vehicle to conduct Pathfinder, Inc. business. An unauthorized driver is someone who has not complied with Pathfinder, Inc. procedures.
- D. No unauthorized passengers will be allowed to ride within a Pathfinder, Inc. vehicle. Only clients or employees of Pathfinder, Inc. are authorized to ride within Pathfinder, Inc. vehicles, unless permission has been received from the Transportation Supervisor or higher authority.
- E. Seat belts will be worn properly at all times while operating or riding in a Pathfinder, Inc. vehicle. All baby and child seats will be properly secured and individuals properly secured in the seat.
- F. All vehicle accidents or property damage will be reported as soon as possible to the employee's supervisor and the Transportation Supervisor.
- G. Vehicles will be operated only when they are in safe operating condition. This decision is made by the Vehicle Maintenance Supervisor. However, as the driver, continued awareness of the vehicle's condition should be observed and any damages or suspected defects need to be reported to the Vehicle Maintenance Supervisor immediately.
- H. Vehicles will not be used for personal business unless authorized by the Transportation Supervisor or higher authority.
- I. Each driver's privilege to operate a company vehicle or a privately owned vehicle to conduct Pathfinder, Inc. business exists only as long as the driver operates it in a safe manner. A record of reportable accidents with the Pathfinder, Inc. driver at fault can result in the removal of driver privileges. If your job depends upon the operation of a Pathfinder, Inc. vehicle to conduct Pathfinder, Inc. business, you could be dismissed from employment.
- J. Any employee operating a Pathfinder, Inc. vehicle is expected to adhere to the Safety Policy at all times.

Insurance Driving Record Guidelines

The following are driving record guidelines per Pathfinder, Inc.'s Vehicle Insurance carrier:

In order for a driver to be approved, the following criteria must be met:

- A. Maximum of one (1) moving violation in the last three (3) years in combination with one (1) at fault accident.
- B. Maximum of two (2) moving violations in the last three (3) years with no at fault accidents.
- C. Maximum of two (2) at fault accidents in the last three (3) years with no moving violations.
- D. No speeding violations over eighty (80) miles per hour.
- E. All drivers must be licensed for at least three (3) years.

Any driver with any of the following in the last three (3) years is unacceptable:

- A. Suspension or revocation for other than failure to pay fines
- B. Driving under the influence of alcohol or drugs
- C. Careless driving
- D. Negligent homicide arising out of the use of a motor vehicle
- E. Operating during a period of revocation or suspension
- F. Using a motor vehicle for the commission of a felony

- G. Aggravated assault with a motor vehicle
- H. Operation of a motor vehicle without owner's authority
- I. Operating a motor vehicle while unlicensed
- J. Speed contests
- K. Any other criminal use of a motor vehicle

Age- Drivers under eighteen (18) years old, the following guidelines apply:

- A. No drivers under eighteen (18) years old
- B. No more than twenty-five percent (25) of drivers should be under the age of eighteen (18) or over the age of seventy-four (74).

Procedure for New Employee Drivers

- A. Employees are hired based on their experience and/or talents which are needed to fulfill the basic service responsibilities of each individual position. When selecting an individual for employment with Pathfinder, Inc., the applicant's driving history and record is carefully reviewed and violations are noted per the Pathfinder, Inc. Insurance carrier guidelines. When interviewing the individual that will be operating a Pathfinder, Inc. vehicle, a few basic questions should be asked, such as: "Have you driven a long wheel based vehicle?"; "Have you driven a vehicle to transport passengers?"; "Have you driven in city, towns, freeways, country roads, etc.?"
- B. Once the candidate is selected, a copy of the applicant's Driver's License, the "Driver's Questionnaire Form", registration, and current liability insurance is submitted to Human Resources prior to beginning employment.
- C. Upon receipt of the appropriate paperwork, Human Resources will run a Motor Vehicle Record (MVR) check and advise the hiring supervisor of the applicant's eligibility to drive one of Pathfinder, Inc.'s vehicles.
- D. Upon being deemed eligible to drive a Pathfinder, Inc. vehicle or a privately owned vehicle (POV) for Pathfinder, Inc. business, employees will be required to attend Vehicle Safety Training. This Vehicle Safety Training satisfies Pathfinder, Inc.'s insurance requirements for all personnel who will drive a Pathfinder, Inc. vehicle or POV for Pathfinder, Inc. business.

Motor Vehicle Records

There are several theories of liability under which an employer may be sued for damages arising out of a motor vehicle accident when an employee is involved. Under the theory of negligent entrustment, the owner of a motor vehicle is held liable, not only for any imported negligence, but by reason of the company's own independent and wrongful breach of duty entrusting a vehicle to someone that is known, or should have known, is likely to cause injury. This is the reason a review of an individual's Motor Vehicle Record (MVR) is obtained. A driver with a history of moving violations is likely to continue in that mode.

- A. If there is an occurrence of any violation as listed by Pathfinder, Inc.'s insurance carrier, the carrier will not insure the employee which will automatically prevent the individual from driving a Pathfinder, Inc.

vehicle or a POV for Pathfinder, Inc. business. The employee's supervisor will be notified as soon as this is identified.

- B. A Motor Vehicle Driving Record check will be conducted annually or more often as necessary.
- C. The Motor Vehicle Driving Record, Initial Vehicle Briefing, Vehicle Familiarization, a copy of employee's Driver's License, and the Individual Driver Questionnaire will be maintained on file.

Documentation

Supervisors should retain information pertaining to an employee's driving record. Any time a change is made to the driver's license or it is renewed a copy is to be submitted to Human Resources to maintain in the employee's personnel record.

Vehicle Operation Rules

- A. *Smoking*: Smoking within the vehicle is not authorized. Smoking while transporting client in personal vehicle is not authorized.
- B. *Eating/Drinking*: Eating and/or drinking within the vehicles is not authorized. It becomes a health hazard. Dropping crumbs, candy, chewing gum, drinks, etc. allows these things to get into the carpet and attract ants, roaches, and other pests. Eating and/or drinking while transporting a client in a personal vehicle is not authorized.
- C. *Speed*: Pathfinder, Inc. vehicles will not be driven over the posted speed limit or according to conditions prevailing.
- D. *Railroad Crossings*: All Pathfinder, Inc. vehicles will stop at railroad crossings. As you approach the crossing, emergency flashers should be turned on. The driver should slow gradually to a complete stop—no more than fifty (50) feet and no less than fifteen (15) feet from the crossing. Next, the driver should check both ways and proceed if the way is clear. Emergency flashers should be turned off. Employees should not proceed in any instance if the barrier is down and/or lights are flashing unless a railroad official or police officer directs traffic through.
- E. *Backing*: As per Pathfinder, Inc. policy, employees should:
- F. Do not back unless absolutely necessary.
- G. If backing is necessary, use a spotter.
- H. If nobody is available to spot, the driver should get out and do a walk around the vehicle prior to backing. Then, back very carefully.
- I. *Sandals*: If sandals are worn while operating a Pathfinder, Inc. vehicle, they must have a solid toe and heel. Thongs are not authorized to be worn while operating a Pathfinder, Inc. vehicle.

Vehicle Records

A program has been established to keep maintenance records on each Pathfinder, Inc. vehicle. This documentation will be necessary in case of an accident claiming mechanical failure or mechanical negligence.

To ensure safety, some Pathfinder, Inc. vehicles will be equipped with a monitoring system that will provide information electronically to a designated device for monitoring. This information will include location of the vehicle and speed. The vehicle data can be accessed by Pathfinder, Inc. for the previous thirty (30) day period

and maintained by the manufacturer for up to twelve (12) months for access by Pathfinder, Inc. if needed.

Accident Protocol

When an accident occurs:

- Contact local law enforcement personnel.
- Get the injured cared for.
- Contact supervisor and/or Transportation Supervisor.

Information needed:

- Is anyone injured?
- Has law enforcement personnel arrived?
- What is the number of the Pathfinder, Inc. vehicle?
- Is the vehicle operational?
- What is the location and time of the accident?
- How many clients were in the vehicle at the time of accident?
- How many personnel were in the vehicle at time of accident?
- Is there any other necessary driver and vehicle information?

After accident has been investigated by the law officers:

- A. Employees who have been given a ticket should not operate the vehicle. The driver must be checked for injuries. Additionally, drivers will be drug and alcohol tested as required by the Pathfinder, Inc. Loss Control Program. Drug and Alcohol results must be received prior to the driver operating another Pathfinder, Inc. vehicle or a privately owned vehicle to conduct business for Pathfinder, Inc.
- B. Employees should be sure not to let anyone discourage them from reporting the accident. If this does occur, the employee should inform the individual that reporting is company policy and that failure to report an accident or follow accident procedure could result in dismissal from employment.
- C. Employees must ensure that all passengers are taken to hospital, clinic, or doctor's office as necessary to be checked for injuries. The driver and other employees are covered under Worker's Compensation. The clients are covered by Pathfinder, Inc.'s auto liability insurance. Bills should be turned into Pathfinder, Inc. labeled, Attention: Transportation Manager.
- D. Employee should fill out an accident report within the vehicle. This should be submitted to the Transportation Supervisor as soon as possible in addition to all paperwork received from check-ups, drug and alcohol tests, etc. When a police report is received, employee should forward report to the Transportation Supervisor (501)-533-6340 or fax (501)-533-6368.
- E. As additional information relating to the incident (including bills) becomes available, it should be submitted immediately to the Transportation Supervisor.

Any Pathfinder, Inc. employee involved in a vehicle accident while driving a Pathfinder, Inc. vehicle is liable for that accident along with Pathfinder, Inc. This means that if an employee is driving a Pathfinder, Inc. vehicle and is involved in an accident, he/she may be sued along with Pathfinder, Inc. Drive carefully.

Exposure Control Plan

Introduction

Pathfinder, Inc. has adopted this program in order to implement 29 C.F.R. 1910.1030, the OSHA standard regulating occupational exposure to blood or other potentially infectious materials (bloodborne pathogens). The purpose of this program is to limit occupational exposure to blood and other potentially infectious material because any exposure could result in transmission of bloodborne pathogens that could lead to disease or death.

The hazard of exposure can be minimized or eliminated by the use of a combination of engineering and work practice controls, personal protective clothing and equipment, training, medical surveillance, Hepatitis B Vaccination, signs and labels, and other provisions.

This Exposure Control Plan will be reviewed and updated at least annually or whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. A copy will be accessible to our employees and made available to OSHA and NIOSH representatives in accordance with applicable legal and constitutional provisions.

Employees in the health care industry and related occupations are at risk of occupational exposure to bloodborne pathogens, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and others. All occupational exposure to blood or other potentially infectious materials (OPIM) places workers at risk for infection from bloodborne pathogens. OSHA defines blood to mean human blood, human blood components, and products made from human blood.

Other potentially infectious materials (OPIM) means: (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Because there is no population that is risk free for HIV, HBV or HCV infectivity, any employee who has occupational exposure to blood or other potentially infectious material is included within the scope of the OSHA standard.

A list is included below of a number of job classifications that **may** be associated with tasks that have occupational exposure to blood and other potentially infectious material. This affects people in many types of employment and is not restricted to the healthcare industry. By the same token, Pathfinder, Inc. emphasize that employees in the following jobs are not automatically covered unless they have occupational exposure:

- Nurses, nurse practitioners, other healthcare and direct care employees in ICF/IID, ADDT, EIDT, Community Waiver and Residential Facilities
- Housekeepers/custodial in all Pathfinder, Inc. programs
- Personnel who do laundry or assist individuals in doing laundry

- Employees assigned to provide emergency first aid
- Employees who provide assistance in dental hygiene
- Employees who provide assistance in personal grooming/hygiene
- Employees handling regulated waste (waste from Preschool Programs, Day Treatment Programs, Adult Development Programs, Workshop Programs, Waiver Programs, Residential Programs, or ICF/IID Programs)
- Maintenance and repair personnel

Definitions

For purposes of this section, the following shall apply:

- **Blood** means human blood, human blood components, and products made from human blood.
- **Bloodborne Pathogens** mean pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).
- **Clinical Laboratory** means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.
- **Contaminated** means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.
- **Contaminated Laundry** means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.
- **Contaminated Sharps** means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.
- **Decontamination** means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.
- **Engineering Controls** means controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.
- **Exposure Incident** means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties.
- **Hand Washing Facilities** means a facility providing an adequate supply of running potable water, soap, and single-use towels or air-drying machines.
- **Licensed Healthcare Professional** is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by section: Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.
- **HBV** means Hepatitis B Virus.
- **HIV** means Human Immunodeficiency Virus.
- **Needleless Systems** means a device that does not use needles for:

- The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established
- The administration of medication or fluids
- Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps
- **Occupational Exposure** means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.
- **Other Potentially Infectious Materials** means
 - The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids
 - Any unfixed tissue or organ (other than intact skin) from a human (living or dead)
 - HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV
- **Parenteral** means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.
- **Personal Protective Equipment** is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.
- **Production Facility** means a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.
- **Regulated Waste** means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.
- **Research Laboratory** means a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.
- **Sharps with engineered sharps injury protections** means a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.
- **Source Individual** means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

- **Sterilize** means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.
- **Universal Precautions** is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.
- **Work Practice Controls** means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

Applicability of the OSHA Standard

The OSHA Standard applies to all occupational exposure to blood or other potentially infectious material (OPIM). Occupational exposure means any reasonably anticipated exposure that may result from the performance of an employee's duties. Other potentially infectious material (OPIM) is defined very broadly to include all conceivable exposures to various human body fluids, tissues, and organs and to HIV or HBV infected cells, tissues, organ cultures or mediums.

Although the standard primarily applies to healthcare-related facilities and occupations, it is not restricted to the healthcare industry. It applies to any place where there is "occupational exposure" as defined in the definition section. That includes many jobs in non-healthcare settings where such exposure might occur on a regular basis, such as janitors, building maintenance personnel, firefighters, linen service workers, services provided to individuals with developmental disabilities, institutional workers, and handlers of regulated waste.

Exposure Determination

As the results of an "exposure determination", which the OSHA standard required us to perform, Pathfinder, Inc. have identified and listed in Attachment A of the Exposure Control Plan, those jobs, tasks and procedures in which occupational exposure may occur while at work. Each has been marked with an A, and B to conform to the categories.

- A. Persons holding those jobs will receive the training, protective equipment, vaccination, and other matters required by the OSHA standard. Employees will be individually advised by supervision of the requirements that apply to them.
- B. For OSHA purposes, the "exposure determination" is made without regard to the use of personal protective equipment. In making our determination, Pathfinder, Inc. will follow OSHA's guidance. Pathfinder, Inc. will continue to review our exposure determinations and make additions to and deletions from, the Attachment A list as appropriate.

Control Methods

Our Exposure Control Plan includes a combination for engineering and work practice controls including Personal Protective Equipment requirements.

Pathfinder, Inc. will observe the basic rule of exposure control known as "universal precautions". It requires that, in those situations where differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials. The engineering controls for this OSHA standard include, but are

not limited to, puncture-resistant sharps containers, splash guards, and self-sheathing needles. The engineering controls that Pathfinder, Inc. has put in place will be examined and maintained or replaced on a regular basis to ensure their effectiveness.

Work Practice Controls

Work practice controls are alterations in the manner in which a task is performed in an effort to reduce the likelihood of a worker's exposure to blood or other potentially infectious materials (OPIM). Pathfinder, Inc. has adopted the following:

- A. There are hand washing facilities readily accessible to all affected employees and all work stations. Hands and other affected skin areas shall be washed with soap and water after removing gloves or other personal protective equipment and as soon as possible after contact with body fluids or OPIM.
- B. All Personal Protective Equipment (PPE) should be removed immediately, or as soon as possible upon leaving the work area, and placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.
- C. Contaminated needles and other contaminated sharps shall not be bent, recapped. Shearing or breaking of contaminated needles is prohibited. Contaminated needles and other contaminated sharps shall not be bent, recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by specific medical or dental procedure. Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one (1) handed technique.
- D. Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. The container shall be puncture resistant; labeled or color coded in accordance with OSHA standards; leak proof on the sides and bottom and stored or processed in a manner that does not require or permit employees to reach by hand into the containers where these sharps have been placed.
- E. All procedures involving blood or other potentially infectious material shall be performed in such a manner as to minimize splashing and spraying.

Work Rules

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses is prohibited in work areas where there is a reasonable likelihood of occupational exposure.

- A. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious materials are present.
- B. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of those substances.
- C. Mouth pipetting/suctioning of blood or other potentially infectious material is prohibited.
- D. Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.
 - The container for storage transport or shipping shall be labeled or color-coded in accordance with the rules for labels and signs set forth in. It also must be closed prior to being stored, transported, or shipped. Warning labels shall be affixed to containers of regulated waste,

refrigerators, and freezers containing blood or other potentially infectious material and other containers used to store, transport or ship blood or other potentially infectious materials. Red bags or red containers may be substituted for labels.

- Of outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and will be labeled or color-coded according to the requirements of OSHA standard 1910.1030(d)(2)(xiii)[B]].
 - If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant, in addition to the above characteristics.
- E. Equipment which may become contaminated with blood or other potentially infectious material shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless it can be demonstrated that decontamination of such equipment or portions of such equipment is not feasible.
- A readily observable label shall be attached to the equipment. It shall also state which portions remain contaminated.
 - Pathfinder, Inc. shall convey to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, and prior to handling, servicing, or shipping so that appropriate precautions will be taken.
- F. During use, containers for contaminated sharps shall be:
- Easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonable anticipated to be found (e.g. laundries)
 - Maintained upright throughout use
 - Replaced routinely and not be allowed to overfill.
- G. When moving containers of contaminated sharps from the area of use, the containers shall be:
- Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping
 - Placed in a secondary container if leakage is possible. The secondary container shall be: Closable; constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and labeled or color-coded according to standards
- H. Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of exposure or injury.

Personal Protective Equipment (PPE) Rules

Our Exposure Control Plan requires the use of Personal Protective Equipment (PPE). PPE is specialized clothing or equipment used by workers to protect themselves from direct exposure to blood or other potentially infectious materials.

Surgical or examination gloves, however, must be replaced after each use. They shall not be washed or disinfected for re-use. Utility gloves may be cleaned and disinfected for re-use, if they show no signs or deterioration.

Any employee who has not been advised by his/her supervisor that any such item of PPE is required, but who

desires to wear it while at work, may obtain the desired PPE by requesting it from their immediate supervisor.

The following PPE rules apply:

- A. Pathfinder, Inc. will provide, at no cost to any employee, appropriate personal protective equipment such as, but not limited to: gloves, gowns, face shields or masks and eye protections, and resuscitation mouthpieces, pocket masks, or other ventilation devices.
- B. Personal protective equipment will be considered “appropriate” only if it does not permit blood or other potentially infectious material to pass through to, or reach, the employee’s work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protection equipment will be used.
- C. Each supervisor must ensure that employees use appropriate personal protective equipment when coming into contact with potentially infectious or hazardous substances.
- D. Appropriate personal protective equipment, in the appropriate sizes, will be readily accessible at the worksite or will be issued to the employee who is to use it.
- E. Pathfinder, Inc. will clean, launder, and dispose of all required personal protective equipment and shall repair or replace it, as needed, in order to maintain its effectiveness, at no cost to any employee.
- F. Pathfinder, Inc. shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee
- G. If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately.
- H. All personal protective equipment shall be removed prior to leaving the work area.
- I. When personal protective material is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.
- J. Masks, in combination with eye protection devices, such as goggles or glasses with solid shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
- K. Appropriate protective clothing such as, but not limited to, gowns, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.
- L. Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated.
- M. Gloves shall be worn when it can be reasonably anticipated that the employee may have contact with blood, other potentially infectious materials, mucous membranes and non-intact skin, and when handling or touching contaminated items or surfaces:
 - Disposable (single use) gloves such as surgical or examination gloves shall be replaced as soon as practical when contained or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
 - Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked; peeling, torn punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

- During all cleaning and decontaminating procedures where body fluids and/or blood are present
- Gloves must be of appropriate material, usually intact latex or intact vinyl, or appropriate quality for the procedures performed, and of appropriate size for the person performing task
- Pathfinder, Inc. provides powder free vinyl disposable gloves, poly kitchen gloves and latex utility gloves in various sizes.

Housekeeping Practices

All worksite should be maintained in a clean and sanitary condition. An appropriate cleaning/decontamination schedule shall be adopted, and followed, for all rooms where body fluids are present. Schedules shall be as frequent as necessary depending on the area, the type of surface to be cleaned, and the amount and type of soil present.

All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

- A. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures, immediately or as soon as feasible when surfaces are overtly contaminated, after any spill of blood or other potentially infectious materials and at the end of the work shift if they may have become contaminated since the last cleaning.
- B. Protective covering, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.
- C. All bins, pails, cans, and similar receptacles intended for reuse, which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials, shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.
- D. Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employee to reach by hand into the containers where these sharps have been placed.
- E. Broken glassware, which may be contaminated, shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as brush and dust pan, tongs, or forceps.
- F. Housekeeping workers must wear appropriate PPE including disposable gloves or general-purpose utility gloves during all cleaning of blood or other potentially infectious materials and during decontaminating procedures.
- G. Initial clean-up of blood or other potentially infectious materials shall be followed with the use of an approved hospital disinfectant chemical germicide that is tuberculocidal or a solution of 5.25 percent sodium hypochlorite (household bleach) diluted between 1:10 and 1:100 with water.
- H. Equipment contaminated with blood or other potentially infectious material shall be checked routinely and decontaminated, if possible, prior to servicing or shipping.
- I. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

Laundry Practices

- A. Contaminated laundry shall be handled as little as possible with a minimum of agitation.
- B. Contaminated laundry shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use.
- C. Contaminated laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with OSHA standards (red bag or red container). When Universal Precautions are used in the handling of all soiled laundry, alternative labeling or color-coding is sufficient if it permits all employees to recognize the containers as requiring compliance with Universal Precautions.
- D. Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or leakage from the bag or container, the laundry shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.
- E. Employees who have contact with contaminated laundry must wear protective gloves and other appropriate personal protective equipment. Any other personal protective equipment required must be determined on a case-by-case basis. Gowns, aprons, eye protection, and masks may be necessary to prevent employee exposure.

Vaccination, Post Evaluation, and Follow-Up

Pathfinder, Inc. has available the Hepatitis B Vaccine and Vaccination Series to all employees who have occupational exposure and post-exposure evaluation and follow-up to all employee who have had an exposure incident.

The Hepatitis B vaccine and vaccination series and post-exposure evaluation and follow-up, including prophylaxis, is available at an accredited laboratory, or from a licensed healthcare professional, at no cost to all employees whose jobs involve the risk of direct contact with blood or other potentially infectious material. Each employee shall be vaccinated unless he/she specifically declines. An employee who declines the vaccination must execute a form available in the human resource department. Vaccination will also be available under the same circumstances to all employees who have had an exposure incident.

Vaccinations shall be given at a reasonable time and place under the supervision of a outside licensed healthcare professional (clinic, doctor office, pharmacy) according to standard medical practices and the current recommendations of the U.S. Public Health Service. The healthcare professional responsible for the employee's Hepatitis B Vaccination shall be provided with a copy of the OSHA Bloodborne Pathogens Standard.

Hepatitis B Vaccination

- A. For those employees who have occupational exposure, the vaccinations shall be given after the employee has received the training and education that is provided on the efficacy, safety, method of administration, and the benefits of being vaccinated and within ten (10) days of initial assignment, unless the employee has previously received the complete Hepatitis B Vaccination Series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.
- B. Pathfinder, Inc. will not make participation in a pre-screening program a prerequisite for receiving Hepatitis B Vaccination.

- C. If an employee initially declines Hepatitis B Vaccination but, at a later date while still covered under the OSHA standard, decides to accept the vaccination, Hepatitis B Vaccination will be made available at that time.
- D. Those employees who decline to accept the Hepatitis B Vaccination must sign a statement to that effect. The *"Hepatitis B Vaccination Statement Form"* is available through Human Resource Department.
- E. If a routine booster dose(s) of Hepatitis B Vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) will be made available under the same circumstances stated above.

Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up

In the event of an exposure incident, a confidential medical evaluation and follow-up of the incident will be made available to the employee involved.

It will include documentation of the route of exposure and the circumstances under which the exposure occurred.

- A. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law
 - The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, Pathfinder, Inc. shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
 - When the source individual is already known to be infected with HVB or HIV, testing for the source individual's known HVB or HIV status need not be repeated.
 - Results of the source individual's testing shall be made available to the exposed employee(s), and the employee(s) shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- B. Collection and testing of blood for HBV and HIV serological status.
 - The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
 - If the employee consent to baseline blood collection, but does not give consent at the time of HIV serologic testing. The sample shall be preserved for at least ninety (90) days. If within ninety (90) days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.
- C. When medically indicated, there shall be post-exposure prophylaxis, as recommended by the U.S. Public Health Service, as well as counseling, and evaluation of reported illnesses.
- D. The healthcare professional evaluating the employee after an exposure incident will be provided with the following information:
 - A copy of the OSHA Bloodborne Pathogens Standard
 - A description of the exposed employee's duties as they relate to the exposure incident
 - Documentation of the route(s) of exposure and circumstances under which exposure occurred
 - Results of the source individual's blood testing, if available

- All medical records relevant to the appropriate treatment of the employee including vaccination status, which it is our responsibility to maintain
 - A copy of Act 289 of the 1991 Acts of Arkansas
- E. Healthcare Professional written opinion.
- A copy of the evaluation healthcare professional's written opinion shall be obtained within fifteen (15) days of the completion of the evaluation.
 - The healthcare professional's written opinion for Hepatitis B Vaccination shall be limited to whether Hepatitis B Vaccination is indicated for an employee and if the employee has received such vaccination.
 - The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
 - That the employee has been informed of the results of the evaluation
 - That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
- F. All other findings or diagnoses shall remain confidential and shall not be included in the written report.
- G. Medical recordkeeping
- Medical records required by the OSHA recordkeeping standards and Act 289 of 1991 Acts of Arkansas.

Communication of Hazards

- A. Warning labels or tags that comply with 29 C.F.R. §1910.145(f) shall be used to identify the presence of an actual or potential biological hazard They shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport, or ship blood or other potentially infectious materials, except as provided otherwise in this part of our Exposure Control Plan.
- B. The labels shall contain the work "Biohazard" and the biological hazard symbol shown.
- C. The labels shall be fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color.
- D. Labels shall be affixed as close to feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.
- E. Red bags or red containers may be substituted for labels
- F. Containers of blood, blood components, or blood products that are labeled as to their contents and have been released for transfusion or other clinical use are exempted from these labeling requirements.
- G. Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment, or disposal are exempted from the labeling requirements.
- H. Labels required for contaminated equipment shall be in accordance with this part and shall also state which portions of the equipment remain contaminated.
- I. Regulated waste that has been decontaminated need not be labeled or color-coded.



Training and Education of Employees

Pathfinder, Inc. shall train each employee with occupational exposure in accordance with the requirements of OSHA. Such training must be provided at no cost to the employee and during working hours. Pathfinder Inc. provides this training during employee's first week of employment in general orientation and at employee's annual review.

The training will be provided as follows:

- A. At the time of initial assignment to tasks where occupational exposure may take place and annually thereafter. Annual training for all employees shall be provided within one (1) year of their previous training.
- B. Additional training shall be provided when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new exposures created.
- C. Material appropriate in content and vocabulary to educational level, literacy, and language of employees shall be used.
- D. The training program shall contain, at a minimum, the following elements:
 - An accessible copy of the regulatory text of the OSHA Bloodborne Pathogens Standard and an explanation of its contents
 - A general explanation of the epidemiology and symptoms of bloodborne diseases
 - An explanation of the modes of transmissions of bloodborne pathogens;
 - An explanation of our Exposure Control Plan and the means by which the employee can obtain a copy
 - An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials
 - An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials
 - Information of the types, proper use, location, removal, handling, decontamination and disposal of Personal Protective Equipment
 - An explanation of the basis for selection of Personal Protective Equipment
 - Information on the Hepatitis B Vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge
 - Information on the appropriate actions to take and person to contact in an emergency involving blood or other potentially infectious materials
 - An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
 - Information on the post-exposure evaluation and follow-up that Pathfinder, Inc. is required to provide for the employee following an exposure incident
 - An explanation of the signs and labels and/or color-coding required by the OSHA Bloodborne Pathogens Standard

- E. The training will allow an opportunity for interactive questions and answers with the person conducting the training session.
- F. The person conducting the training will be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the particular work place that the training will address.
- G. Training records will be maintained for five (5) years from the date on which the training occurred and will include the following:
 - Dates of training sessions
 - Contents or summary of training program, including the trainer's name and qualifications
 - Job titles and names of all persons attending the training session
- H. All training records shall be maintained for five (5) years from the date on which the training occurred and must be made available, upon request, to OSHA and NIOSH as well as employee representatives, in accordance with 29 C.F.R. §1910.20, the OSHA records-access standard.
- I. Pathfinder maintains all training records for five (5) years.

Recordkeeping

An accurate record of each worker's reported occupational exposure in accordance with 29 CFR 1910.1020. Such records shall be kept confidential and shall not be disclosed or reported to any person within or outside the work place without the employee's expressed written consent except as may be required by law or OSHA regulation.

The records shall include:

- The name and social security number of the employee
- A copy of the employee's Hepatitis B Vaccination status including the dates of all the Hepatitis B Vaccination and any medical records relative to the employee's ability to receive vaccination as required under the Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up section of this plan
- A copy of all results of examinations, medical testing and follow-up procedures as required by Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up section of this plan.
- Pathfinder, Inc's report from the healthcare professional's written opinion as required.
- Copies of information provided to the healthcare professional

Sharps Injury Logs record percutaneous injuries from contaminated sharps. The information in the Sharps Injury Log shall be recorded and maintained in such manner as to protect the confidentiality of the injured employee.

The sharps injury log shall contain, at a minimum:

- A. The type and brand of device involved in the incident
- B. The department or work areas where the exposure incident occurred
- C. An explanation of how the incident occurred.

The Sharps Injury Log shall apply to any employee who is required to maintain a log of occupational injuries and illnesses under 29 CFR Part 1904. The Sharps Injury Logs shall be maintained for five (5) years following the end

of the calendar year.

Medical records will be kept for each employee with occupational exposure for the duration of employment plus thirty (30) years.

All records required to be maintained shall be made available upon request.

Attachment A

The following list identified the job classifications, positions, and the specific tasks and procedures that include potential occupational exposure to blood or other potentially infectious materials as defined in the OSHA standard, 29 C.F.R. §1910.1030. The letter A, B, or C has been placed beside each job classification to indicate the following:

Classification A: Those in which all employees in the job classification have occupational exposure. All employees in this job classification may be subject to occupational exposure:

- Registered Nurses
- Licensed Practical Nurses
- Physicians

Classification B: Those in which only some employees have occupational exposure; and particular tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure occurs. Some employees in this job classification may be subject to occupational exposure:

- Supervisors
- Managers
- Program Training Instructor
- Life Skills Instructors
- Supportive Living Staff
- Job Coaches
- Transportation Drivers
- Therapist
- House Managers
- Teacher Assistances
- Certified Teachers
- Cooking Staff
- Directors
- Assistance Directors
- Office Staff
- Administration Staff
- Case Managers
- Direct Care Supervisors
- Administrative Coordinator

- Vehicle Maintenance
- Ground Maintenance
- Building Maintenance

The individuals in Classification B may be subject to occupational exposure as they perform tasks related to training and assisting with personal hygiene and administering first aid.

Hazard Communication Program

Introduction

In order to fulfill its obligation to protect the health and safety of employees, Pathfinder, Inc. has developed the following hazard communication standard (HCS) program to comply with Occupational Safety and Health Administration (OSHA) standards 29 CFR 1910.1200 and 29 CFR 1926.59. Pathfinder, Inc. will develop hazardous-chemical lists, obtain Safety Data Sheets (SDS) for each hazardous material used and provide training in New Hire Orientation and at the Employee Annual Review to our employees so they have a thorough understanding of what is required of the standard.

The Program Administrator will be the Special Projects Coordinator. Copies of the written program, including the written chemical inventory list and SDSs, will be made available upon request. Additionally, a copy of the written program will be kept at each job site for the duration of the project. The site copy will be maintained by the manager and made available upon request. The master copy will be retained in the Administration Office.

Scope

This program applies to all normal and emergency work operations, as required by local, state and federal regulations.

A chemical inventory list will be developed by the Program Administrator. The master list will be kept at the Administration Office. A project-specific chemical inventory list will be developed for each project and maintained at the jobsite along with the appropriate SDSs. When new chemicals arrive at a project site, a copy will be made of the SDS, and the original will be sent to the home office. Any new chemicals will be added to the project's chemical inventory list as needed.

Hazard Determination

It will be the policy of Pathfinder, Inc. not to evaluate hazardous chemicals purchased from suppliers or manufacturers. The suppliers and manufacturers will be relied upon to supply the information needed to satisfy standard requirements. The SDS will be reviewed for completeness and additional information from the manufacturer will be requested if needed.

Safety Data Sheets

All SDSs will be maintained by the Project Administrator. The program will consist of the written program, a proposed chemical inventory list (generic in nature initially and modified as the project progresses) and all appropriate SDSs. The manager will be responsible for maintaining the program for the project's duration.

If a chemical arrives without a SDS, the Program Administrator will be notified. The Program Administrator will begin the process of obtaining the SDS. All letters sent to the manufacturer will be copied and sent to the program for filing in the SDS book.

Pathfinder, Inc. Administration maintains the chemical inventory list through Pathfinder, Inc's SDS website.

Container and Warning Labels

The Program Administrator will have the responsibility of acquiring hazard warning labels and making them available for each program. Labels will be consistent throughout the entire company. They will contain, at a minimum, the following information:

- Identification of chemicals
- All potential hazards associated with chemicals
- Manufacturers name, address, and phone number

Each project manager or other designated person will have the responsibility of assuring that all labels are affixed on containers properly. As new products arrive at the program, the manager or other designated person will inspect the containers for labels. If the container is in need of a label, the manager will affix one. No product will be used until it is properly labeled.

All portable containers will be dedicated to a single chemical and labeled with the appropriate information. The only exception to this rule is buckets of hot asphalt. Because of the elevated temperature of hot asphalt, labeling becomes impractical. The training program will specifically address this exception, informing all affected employees about wearing proper personal protective equipment (PPE) and other hazards associated with hot asphalt.

If a label falls off, it will be the responsibility of the manager to replace it. The container will be removed from service until a new label is affixed.

Non-routine Tasks

On occasion, Pathfinder, Inc. may be required to perform non-routine tasks that may involve the use of hazardous substances. If such a need arises, a special training course will be conducted to inform employees of the potentially hazardous chemicals they may be exposed to during the non-routine operation and measures they can take to avoid those exposures.

A non-routine task is one that an employee does not normally perform and for which the employee has not previously been trained.

An example of a non-routine task would be if an employee was asked to clean chemical residue from a floor, conveyor system, tank or secondary chemical container. It may be as simple as an annual housekeeping project. It could be a chemical spill or debris cleanup involving hazardous chemicals. The non-routine task may even involve entering a confined space, with a potential exposure to a hazardous atmosphere.

Informing Contractors

Any contractor with employees working in the Pathfinder, Inc. workplace will be informed of the hazardous chemicals to which the contractor's employees may be exposed while performing their work. The contractor will take appropriate protective measures, as determined by the SDS provided. Pathfinder, Inc. management also will confer with the contractor's management as appropriate to discuss any hazards particular either to the work the contractor will be performing or the work area in which the work will be performed. Management or the Program Administrator will describe the labeling system used at Pathfinder, Inc.

In addition, Pathfinder, Inc. will require any contractor who intends to bring any hazardous chemicals to the workplace to provide an SDS for each such chemical. The contractor will further be required to explain (orally or in writing) any precautionary measures necessary to protect employees during normal operation conditions or in foreseeable emergencies. The contractor also will explain his company's system for labeling hazardous chemicals. Pathfinder, Inc. will train, or require the contractor to train, any Pathfinder, Inc. employee who may be exposed to hazardous chemicals used by the contractor as provided in the employee training section.

Informing Visitors

It is the Program Manager's responsibility to inform visitors of any hazards they may encounter while within the area, such as:

- Hazardous chemicals to which they may be exposed to
- Measures they may take to lessen the possibility of exposure
- Procedures visitors are to follow if exposed to a hazard

Training

Employees who could potentially be exposed to hazardous chemicals will receive training in the elements of the hazard communication standard. During their initial training, they also will receive an overview of the chemicals typically used. When new hazards are introduced, additional training will be conducted with the manager.

The typical training session will address the following:

- A summary of the company's written program and the OSHA HCS
- Methods of detecting hazardous chemicals, including a description of the hazardous chemicals and physical properties (i.e. visual appearance, odor, monitoring, fires, explosions, etc.)
- Health hazards and signs or symptoms of exposure (acute and chronic)
- Proper work practices for working with a hazardous substance
- PPE selection
- Emergency procedures and first aid for spills and other exposures
- Locations of SDSs
- How to read a SDS
- How to obtain additional information

The training program will be conducted initially and as new hazards are introduced. Periodic training will be

conducted to further inform our employees of hazardous chemicals and the methods of safeguarding themselves. At least annually, refresher training will be conducted to reacquaint everyone with the standard and discuss any changes made to the program.

The training program elements will be reviewed at least annually.

At the conclusion of each training session, a question-and-answer period will be held so that employees can voice any further concerns on the topic. Each employee will sign an *“Acknowledgement of Receipt of Hazard Communication Training Form”*. It will be dated and signed by the trainer and employee.

Chemical Inventory List

SDS on File (Y/N)	Product Identification Number	Product Name	Manufacturer’s Name, Address, City, State, Zip Code	Manufacturer’s Emergency Phone Number(s):

EMERGENCIES

Pathfinder, Inc. adheres to all safety and emergency guidelines that are required by various city, state, and federal agencies. Accident/Incident Reports are made to appropriate entities as required by various funding sources.

Emergency Plan Training

Emergency Plan Training

- Facility personnel are provided in-service training to implement the emergency procedures. All personnel will receive initial and annual competency based training, identification of unsafe environmental factors, emergency procedures, evacuation procedures, identification and reporting of critical incidents.
- Employees are required to attend trainings each year to update skills and to learn of any changes in procedures.

First Aid/CPR Training

- Appropriate personnel will be trained in First Aid and CPR.
- All direct care employees must be trained and certified in First Aid and CPR.
- All non-direct care employees must be certified in First Aid.

- These certifications/trainings will take place during the scheduled training period which occurs the first week of work.
- The trainer must be qualified and authorized to teach the curriculum and shall be certified by American Red Cross or American Heart Association.
- The curriculum must conform to current American Heart Association or American Red Cross Guidelines.
- The curriculum shall require hands-on, skill-based instruction, as well as written and practical testing.
- At least annually, all employees will be provided with information related to First Aid and/or CPR procedures.

Emergency Equipment and Supplies

We maintain well stocked First Aid Equipment and supplies, and post antidote charts, telephone numbers for Poison Control, the local hospital and the local police department at all Pathfinder, Inc. facilities. Accident/Incident reports are made to appropriate entities as required by various funding sources.

Emergency Drills

Pathfinder, Inc. conducts emergency drills to ensure staff and clients are prepared for numerous types of emergencies as described in the Emergency Operation Plans for each program.

- All programs are required to conduct fire and tornado drills in the following manner:
 - Programs staffed 24/7 must complete drills for each shift within each quarter. (i.e. Fire and tornado 1st shift- Jan; fire and tornado 2nd shift-Feb; fire and tornado 3rd shift-Mar, repeat for the following quarters.)
 - Programs staffed two (2) shifts with on site manager must conduct actual drills first and second shifts and table top drills with on site manager.
 - Programs staffed one (1) shift will conduct drills within their shift timeframe.
- All office buildings are required to conduct fire and tornado drills semi-annually.
- Annual drills are to be conducted from January - December. (Violence threat, natural disaster, utility failure, medical emergency, bomb, and van evacuation.)
 - Programs staffed 24/7 must complete drills for all three (3) shifts during the annual timeframe.
 - An evacuation drill and a shelter-in-place drill must be completed at least once annually on the 3rd shift.
 - Programs staffed two (2) shifts with on site manager must conduct drills for first (1) and second (2) shifts and table top drills with on site manager.
 - All other programs and office building complete annual drills during the allotted timeframes.

A written report listing: program; date; start/end times; time evacuate; number consumers and staff type of drill; shift; notification method; scenario or real event description; problems encountered; plan for improvement; correction plan; person completing form is submitted to the Safety Department and a copy maintained at the program. The *“Emergency Drill Reporting Form”* can be obtained from the Special Projects Coordinator.

EMERGENCY OPERATIONS PLAN

Overview

Pathfinder, Inc. is committed to protecting the well-being of our consumers, staff, and visitors. An important aspect of this responsibility is the development and active commitment of facility leadership and staff to an effective Emergency Management Program (EMP). This document is our facility's *All-Risk Emergency Operations Plan (EOP)*, it states our organization understands how we will manage and conduct actions under emergency conditions.

We understand that there are a variety of hazards, both natural and human-caused, that may pose risks to the health and safety of consumers, staff and visitors. Furthermore, these hazards may also pose risks to our on-going business operations.

This is an "all hazards" plan and we have verified through our Hazard Vulnerability Analysis (HVA) that the hazards that pose the greatest risk (a combination of probability and consequence) are given special attention in our plan, training and exercises.

We recognize that the effectiveness of this plan requires the commitment of facility administrators and staff. The day-to-day provision of services to our consumers requires considerable focus and effort, yet we have a duty to prepare for events that may have significant impact to our consumers and facility.

This plan is a living document that will be reviewed at least annually and updated as necessary based on "lessons learned" during exercises or real events, the evolution of new "best practices", or changes to local, state, and federal regulatory requirements.

Purpose and Scope

The purpose of our EOP is to describe our all-hazards approach to emergency management, and by so doing, support the following incident objectives:

- A. Maintain a safe and secure environment for consumers, staff and visitors.
- B. Sustain our organization's functional integrity, including our usual service and useful functions (continuity of operations).
- C. Integrate into the community's emergency response system as necessary.

The scope of this plan extends to any event that disrupts, or has the potential to disrupt, our normal standards of care or continuity. This includes the impact due to internal incidents, such as a fire, or external incidents, such as an earthquake.

Structure and Leadership

Our facility has an organizational structure as indicated by the Organization Charts. This structure identifies the general chain-of-command and principal roles of facility administrators and senior management staff.

Risk Assessment

Comprehensive emergency management includes four (4) phases: preparedness, mitigation, response and recovery. A critical component of the preparedness phase is assessing risks and vulnerabilities, and a common tool used for this purpose is the Hazard Vulnerability Analysis (HVA). For this reason, all facilities must complete an HVA that is reviewed annually.

Hazard Vulnerability Analysis (HVA)

To complete a HVA, complete the following six (6) step process:

1. Establish the participants in the HVA process. We involved knowledgeable stakeholders in the HVA process, including both internal and external stakeholders (police, fire, etc).
2. Identify the hazards. This step consists of identifying all of the hazards that could significantly impact operations, the care of consumers, or unusual service needs. Hazards may be both internal to the facility (e.g., failure of HVAC) or community-based, e.g., earthquake or tornado. Whether internal or external, all hazards were considered that could significantly impact our facility.
3. Assess the hazard-associated “risk” (probability and consequence). Risk is the product of probability and consequence. Each identified hazard was assessed according to its probability and impact (consequences).
4. Rank the hazards by magnitude of risk. This step involves sorting the risks into categories, e.g., high risk, moderate risk, and low risk. This step also includes expert judgment, e.g., information from emergency management officials that may be aware of community vulnerabilities, e.g., flood zone information, seismic risk, etc.
5. Analyze the vulnerability of “mission-critical” systems to each hazard. This final step assessed vulnerabilities relative to human impact, property and facility impact, and operational impact.
6. Prioritize the vulnerabilities and implement risk intervention activities (mitigation) as appropriate.

Generally, our vulnerabilities are ranked by the following priorities:

- Life safety threat (injury/illness, death, short and long term health risk)
- Disruption of facility operations
- Emergency system failure
- Loss of customer/community trust and/or goodwill
- Property and/or environment damage
- Liability and/or legal/regulatory exposure

Risk Mitigation

Mitigation may be defined as activities taken to reduce the impacts from hazards. Mitigation planning establishes short and long-term actions to eliminate hazards or to reduce the impact of those hazards if they cannot be eliminated

Based on the results of the HVA, the mitigation strategy considers, but is not be limited to, the following: the use of appropriate building construction standards; relocation, retrofitting or removal of structures at risk; removal or reduction of the amount or size of the hazard; segregation of the hazard from that which is to be protected;

provision of protective systems or equipment; establishing hazard warning and communications procedures; redundancy or duplication of critical systems, equipment, information, operations, or materials.

Emergency operations plan is designed to be “all hazard” meaning that we remain vigilant and ready to respond to all emergency events whether they have been pre-identified through our HVA or not. This is accomplished through practiced team work, good communication and the process of incident action planning Communication Plan.

Our communication plan supports *rapid* and *accurate* communication both internally and externally. This section describes the elements of a basic communication plan incorporated into this EOP.

Relative to internal communications, the facility maintains a contact list of all staff, including telephone numbers and email addresses (if available). This contact information may be used whenever it is necessary to notify staff of a threat or emergency that may impact or involve them.

Once an incident is recognized that may require activation of the EOP, the person who first recognizes the incident should immediately notify their supervisor or administration.

Our internal communication equipment includes: overhead page, cell phones with texting, Dial My Call, runner, and/or other equipment.

It is also important to communicate with relevant external partners to: 1) gather information relevant to the incident, and 2) share information regarding the facility’s status, activities and needs. Our facility will report incidents as required to jurisdictional authorities, e.g., report a fire to the local fire department. We may also share relevant situational information with external partners consistent with local policies and procedures. Our external communication equipment includes: land lines, cell phones with texting, weather radios, Dial My Call, internet, and/or other equipment.

Consumer and Family Communication – Our facility provides information to all consumers and family members regarding our EOP as part of our orientation and on-going communications. In the event of an emergency, family members may be notified and briefed on the status of the facility and the condition of their loved one as soon as it is feasible to do so. In case of an emergent situation, where time and conditions do not allow us to communicate with our consumer’s families in a timely manner, we may utilize the American Red Cross, our website, Dial My Call system and other methods as available to provide a phone number to families where they can call and obtain information on the status and location of their consumer.

Public Relations Liaison: All release of information to the public after a disaster will be handled by the Executive Director or Director of Quality Assurance.

Employee Preparedness

Emergency response and recovery operations can be stressful for affected consumers and employees in addition to the families of both. Our employees may be requested to report to their work site and provide services related to emergency response and recovery operations in addition to their normally assigned duties.

Supervisors, co-workers, and consumers share an expectation that medical services will proceed uninterrupted

and that medical needs generated by the incident impact will be addressed. Preparedness planning in this facility should be recognized as a shared responsibility between leadership and staff. Staff is encouraged to visit www.ready.gov/make-a-plan and/or <https://www.redcross.org/get-help/how-to-prepare-for-emergencies/make-a-plan.html> for guidance and templates for personal disaster plans.

Staffing During an Emergency

Staff Recall

Staff may be called in and/or availability may be requested. The individuals contacted may be asked to report for duty immediately or be scheduled for future shifts during the emergency.

Emergency Employee Call-Ins

All staff in full and part time positions should contact their immediate supervisor or manager if they are unable to report to duty as scheduled. All approved Paid Time Off (PTO) days during an event may be cancelled. Employees should be available to report for duty if it is safe and feasible to do so.

Staff Responsibility

Employees will be deployed and rotated, as deemed appropriate by the Pathfinder, Inc. Administration/Program Supervisor, during the duration of the disaster; work in various assigned shifts; and/or provide non-routine duties. Employees will report in when an "All Clear" is called and/or it is safe to travel.

Coordination with Response Partners

We recognize that the majority of emergencies experienced by our facility will likely involve other response partners. Our facility has established relationships with relevant response partners in the community and become familiar with local policies and procedures relevant to emergency management.

Education and Training

Education and training, including drills and exercises, are utilized in each facility to achieve proficiency during emergency response. In compliance with state and federal regulations, our facility conducts initial training on the EOP during the orientation of new staff, and annually to all staff or as needed if the EOP is changed. Programs will conduct violence threats, natural disasters, utility failures, medical emergencies, bombs, and van evacuations annually for all shifts. A written report of drills and exercises is maintained, and corrective actions are taken as indicated. Staff from all shifts shall participate in drills or test exercises. In addition, fire and tornado disaster drills are held at least quarterly, under varied conditions for each shift at consumer facilities. A dated and signed report and evaluation of each drill and rehearsal is maintained.

Bomb Threat

Initial Actions

<input type="checkbox"/>	Call Administration/Supervisor to report threat and contact 9-1-1
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<input type="checkbox"/>	Do NOT approach, disturb or touch the potential threat.
<input type="checkbox"/>	Immediately evacuate anyone in the area surrounding the potential threat, saying: "We have an emergency in the building and must evacuate this area immediately according to our plan. This is not a drill."
<input type="checkbox"/>	Instruct staff to calmly and safely evacuate consumers to a safe area.
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Notify your supervisor or facility administrator as specified in the EOP.
<input type="checkbox"/>	If a bomb threat is called in, be calm and courteous. If you are not in danger, attempt to collect information from the caller that will help to identify the location of the potential bomb, e.g.: (Where is the bomb? What does it look like? When will it explode? What kind of bomb is it? What is your name?). Record this and any other information you collect, such as whether the caller is male or female, characteristics of the caller's voice and any background sounds you notice. It is best to write this information down.
<input type="checkbox"/>	Communicate relevant information with law enforcement.
<input type="checkbox"/>	Notify the Arkansas Department of Health (DPH) to report an unusual occurrence and activation of facility's EOP.
<input type="checkbox"/>	If facility evacuation is required, see RAPID RESPONSE - EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Complete At Time of Threat

Instructions: Remain calm and be courteous with the caller. Do not interrupt the caller. Pretend you can't hear the caller and try to keep the caller talking. Fill out the form below with as much information as possible.

1. Where is the bomb going to explode?	5. What will cause the bomb to explode?
2. When is the bomb going to explode?	6. Did you place the bomb? If so, why?
3. What does the bomb look like?	7. What is your address?
4. What kind of bomb is it?	8. What is your name?
Exact wording of the threat:	

Complete After Evacuation

Time of Call:	Date:	Phone Number Call Received From:
---------------	-------	----------------------------------

Accent: <input type="checkbox"/> Local <input type="checkbox"/> Middle East <input type="checkbox"/> Hispanic <input type="checkbox"/> African	<input type="checkbox"/> Slavic <input type="checkbox"/> Southern <input type="checkbox"/> Northern <input type="checkbox"/> Midwestern <input type="checkbox"/> Other: _____	Manner: <input type="checkbox"/> Calm <input type="checkbox"/> Rational <input type="checkbox"/> Coherent <input type="checkbox"/> Deliberate <input type="checkbox"/> Righteous	<input type="checkbox"/> Angry <input type="checkbox"/> Irrational <input type="checkbox"/> Incoherent <input type="checkbox"/> Emotional <input type="checkbox"/> Laughing <input type="checkbox"/> Other: _____	Background: <input type="checkbox"/> Machines <input type="checkbox"/> Music <input type="checkbox"/> Office <input type="checkbox"/> None <input type="checkbox"/> Traffic	<input type="checkbox"/> Trains <input type="checkbox"/> Animals <input type="checkbox"/> Voices <input type="checkbox"/> Airplanes <input type="checkbox"/> Other: _____
Voice: <input type="checkbox"/> Loud <input type="checkbox"/> High Pitch <input type="checkbox"/> Raspy <input type="checkbox"/> Intoxicated	<input type="checkbox"/> Soft <input type="checkbox"/> Deep <input type="checkbox"/> Pleasant <input type="checkbox"/> Other: _____	Speech: <input type="checkbox"/> Fast <input type="checkbox"/> Distinct <input type="checkbox"/> Distorted <input type="checkbox"/> Slurred	<input type="checkbox"/> Slow <input type="checkbox"/> Stutter <input type="checkbox"/> Nasal <input type="checkbox"/> Other: _____	Language: <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Foul <input type="checkbox"/> Other	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Other: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Adult <input type="checkbox"/> Juvenile Age: ()		Call Origin: <input type="checkbox"/> Local <input type="checkbox"/> Non-Local	
Your Name:			Your Phone Number:		
Your Position:			Date of Report:		

Earthquake

Initial Actions

<input type="checkbox"/>	<p>If you are physically able- DROP, COVER and HOLD ON. DROP to the ground. Take COVER by getting under a sturdy desk or chair (cover your head and neck with your arms and hands). Keep away from glass, windows, or anything that could fall near you. HOLD on to your shelter until the shaking stops.</p> <p>If a consumer is in a wheelchair- Tell/assist the consumer to LOCK their wheels in a safe position. Tell the consumer to COVER their head and neck with their arms.</p> <p>If a consumer is confined to a bed- Tell the consumer to HOLD ON and PROTECT their head with a pillow.</p>
<input type="checkbox"/>	<p>Activate facility's EOP and appoint a Facility Supervisor designee if warranted.</p>
<input type="checkbox"/>	<p>Assign staff to assess consumers for any injuries that require immediate attention.</p>
<input type="checkbox"/>	<p>Assign staff to assess the facility for damage that requires immediate attention (e.g., gas leaks, fires, broken glass, spills, etc.). If a gas leak is suspected (e.g., you smell gas or hear a blowing or hissing noise), shut off gas and contact the proper utility company for restoration. Do not allow any flame source until you are certain the gas lines have not been affected. Inspect the facility for small fires (a common hazard after an earthquake); extinguish as necessary and/or call 9-1-1. Look for electrical system damage. If you see sparks or broken or frayed wires, or if you smell hot insulation, turn off the electricity at the main fuse box or circuit breaker. If you have to step in water to get to the fuse box or circuit breaker, call an electrician first for advice. Check for sewage and water lines damage. If you suspect sewage lines are damaged, avoid using the toilets and call a plumber. If water pipes are damaged, contact the water company and avoid using water from the tap. Heed public health notices/orders regarding water contamination (including the following notices: Boil Water, Do Not Drink Water, and Do Not Use Water).</p>

	Consider all flood water contaminated. Avoid walking through flood waters and wash hands thoroughly after contact. Do not use pre-packaged food and drink products that come into contact with flood water. When in doubt, throw it out! Report utility problems to appropriate utility company/agency. Activate your emergency water plan. See Appendix R – Disaster Water Supplies for further information.
<input type="checkbox"/>	If the facility has suffered structural damage, or if supporting utilities are compromised (e.g., power, water), consider the need for evacuation vs. shelter in place.
<input type="checkbox"/>	Notify the Arkansas Department of Health to report an unusual occurrence and activation of facility's EOP.
<input type="checkbox"/>	If facility evacuation is required, see RAPID RESPONSE - EVACUATION. If the decision is to shelter in place, see RAPID RESPONSE – SHELTER IN PLACE.

Disaster Supplies Kit

Prepare disaster supplies kit that includes the following:

- First aid kits/medical supplies
- Flashlights, batteries, lanterns and light sticks
- Portable AM/FM radio and extra batteries
- Emergency staff/consumer information notebook and rosters/attendance
- Basic tools such as hammers, wrenches and screw-drivers
- Additional supplies

Always contact Administration immediately. Account for all consumers and staff.

Evacuation

Initial Actions

<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Activate the Emergency Transportation aspect of the EOP and contact Executive Director of Operations. (See Appendix B – Facility Evacuation and Maps)
<input type="checkbox"/>	Assess which consumers might be able to go to families and contact in advance.
<input type="checkbox"/>	Assess number/types of beds needed, available staff to support transferred consumers (call supervisor for support), and potential transportation requirements based upon number of consumers, medical needs and mobility status.
<input type="checkbox"/>	If consumers need to be transferred to another facility, identify available beds by the following procedures: Coordinate with other facility supervisor and/or Executive Director of Operations.
<input type="checkbox"/>	Obtain transportation resources by contacting Executive Director of Operations.
<input type="checkbox"/>	Prepare for evacuation by: collecting and packing consumers' equipment and medications, collecting consumers for transport to evacuation location, preparing water/snacks to accompany consumers during transport period, and preparing copy of medical charts to accompany consumers.

<input type="checkbox"/>	If surrounding roads may be damaged, verify planned evacuation routes with the public safety agency.
<input type="checkbox"/>	Track consumers to destinations and notify family members of evacuation and planned destination. If needed, additional tools and information on Evacuation are included in the following Appendices: Appendix B – Facility Evacuation and Maps Appendix C – “Consumer Evacuation Tracking Form” Appendix D – “Consumer Evacuation Checklist” Appendix E –Face Sheet

Always contact Administration immediately. Account for all consumers and staff.

Facility Evacuation and Maps

It is the policy of Pathfinder, Inc. to pre-plan for all anticipated hazards with a goal to minimize the stress and danger to our consumers and staff. In light of recent research, that indicates the increased risks of mortality and morbidity related to the evacuation of people who are elderly and/or suffer from chronic health conditions, sheltering in place will always be our first response choice if it is at all feasible. When sheltering in place would put our consumers at greater risk than evacuation, or when given a mandatory order to do so by appropriate authorities, the Supervisor designee has the authority to activate our emergency evacuation plan.

Evacuation Terms

The following terms are important to understanding how we evacuate our facility:

- A. There are two (2) types of evacuation:
 - Emergent- which unfolds in minutes to hours
 - Urgent/Planned- which unfolds in hours to days
- B. There are two (2) types of partial evacuation:
 - Horizontal Evacuation- involves moving consumers, staff and visitors to a safe area on the same floor. Accomplished by compartmentalizing through the use of rated doors and rated assemblies – smoke partitions, fire walls, etc.) into an adjacent smoke/fire compartment.
 - Vertical Evacuation- involves moving consumers, staff and visitors off the floor and down stairs and elevators to safe area within the facility.
- C. Staging Area- this is the last place to move consumers before leaving the building. Consumers may be sent to a staging area based on level of acuity.
- D. Complete Evacuation- involves moving consumers, staff and visitors to a pre-designated area outside of the building.
- E. Emergency Shut Down- involves turning off electricity, gas, etc. to the facility.
- F. Relocation- involves moving consumers to an alternate facility (also called a receiving facility) offsite.

Logistics

Based on the unique needs of our consumers, including mobility status, cognitive abilities, and health status, Pathfinder, Inc. has developed evacuation logistics as part of our plan.

Transportation

Transporting consumers to evacuation sites will be coordinated with Pathfinder, Inc. Administration and Program Supervisor.

- A. Consumers who are independent in ambulation: may be evacuated first unless there are extenuating circumstances. They should load first on vehicles where there are multiple rows of seats and move to the back of the vehicle. They may be accompanied by a designated staff member to the designated mode of transportation. If safe and appropriate, families may be offered an opportunity to take their family member home for care during the anticipated period of disruption to services.
- B. Consumers who require assistance with ambulation: will be accompanied by designated staff member to the designated mode of transportation. If safe and appropriate, families may be offered an opportunity to take their family member home for care during the anticipated period of disruption to services. This may include consumers with assistive devices.
- C. Consumers who are non-ambulatory: will be transferred by designated staff members via the designated mode of transportation. This may include consumers in wheelchairs.
- D. Evacuation Forms and Tools: that we may use include: a *“Consumer Evacuation Checklist”* (a recommended list of items that accompany consumers during evacuation) and a *“Consumer Evacuation Tracking Form”*.
- E. Evacuation Maps: with primary and backup routes and destinations included at end of this Appendix.
- F. Medical Records: At a minimum, each consumer will be evacuated with the following forms: emergency book which will contain a face sheet for all consumers and staff, current medication administration record, and, if possible, a photo identification.
- G. Medications: If time allows, each consumer will be evacuated with a minimum of a three (3) day supply of medications if possible. If medications require refrigeration, a cooler will be sent if available to keep medications cool. ICF/IID and Residential locations will contact Premier Pharmacy about emergency medication if unable to evacuate with medication.
- H. Evacuation Supplies: Emergency equipment such as flashlights, cell phones, and first aid kits may be sent with staff accompanying consumers.
- I. Consumer Identification: Non-verbal consumers will be given name tags to assist in identification. Staff members of the facility will be assigned to assist with non-verbal consumer.
- J. Consumer Tracking: An attendance log/roster reflecting the names of consumers will be maintained.
- K. Designated staff assigned will be responsible for making a final check of medical records, medications, and head count of consumers to ensure all consumers have been evacuated.
- L. Important Safety Information:
 - Monitor consumers during transportation for change of condition.
 - The incident causing the evacuation – flood, fire, hazardous materials release – may continue to pose dangers to consumers being evacuated. Some conditions may pose significant risks to evacuated consumers, such as smoke. This should inform evacuation route planning.
 - Keeping emergency lights activated may increase visibility that is poor (due to rain, nighttime, or smoke).

Evacuation

(Note – in an emergent evacuation when consumers are in immediate danger, the Designee will direct all available staff to move consumers out of the building to safety as soon as possible)

The Designee may convene an Incident Management Team (IMT) meeting to brief the key leadership and delegate tasks for the preparation and staging of consumers for evacuation.

Suggested Assignments:

- A. *Supervisor Designee:* confer with local authorities, determine whether partial or complete evacuation is advisable, unless otherwise instructed the most able consumers should go first, delegate the duty to notify authorities/families/suppliers/corporate representatives, relocation of consumers, re-assignment of staff, and manage critical communications with Pathfinder, Inc. Administration and Program Supervisor.
- B. *Supervisor/Administration Staff:* arrange for staffing, transportation and critical equipment transport including bedding for relocation site if needed, monitor emergency progress, arrange for relocation sites, identify evacuation routes, prepare supplies/consumers/documentation for transport, secure funding of needed equipment/supplies, oversee the loading and movement of consumers to relocation sites in a safe and orderly fashion, and prepare the physical plant for shut down.

Extreme Weather: Cold

Initial Actions

<input type="checkbox"/>	Activate facility’s EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Assess consumers for signs of distress and/or discomfort.
<input type="checkbox"/>	Initiate actions to safely increase consumer comfort, e.g., utilize heating pads and electric blankets (be sure to carefully monitor the temperature of consumers); offer warm liquids (keeping in mind relevant dietary modifications/restrictions), etc. Contact supervisor and/or administration for additional heating units if appropriate
<input type="checkbox"/>	Do not leave consumers unattended near a heat source.
<input type="checkbox"/>	If the internal temperature of the facility remains low for an extended period of time, and potentially jeopardizes the safety and health of consumers, consider re-location to a warmer part of the facility or evacuation to another facility.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Extreme Weather- Heat

Initial Actions

<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Assess consumers for signs of distress and/or discomfort.
<input type="checkbox"/>	Call 9-1-1 if any consumer appears to be suffering from heat-related illness such as heat cramps, heat exhaustion or heat stroke.
<input type="checkbox"/>	Consider re-locating consumers to a cooler part of the facility.
<input type="checkbox"/>	If the outdoor temperature is cooler than the internal facility temperature, consider opening windows and using fans to bring cooler air into the building. If the outdoor temperature is not cooler, keep the windows closed and shades drawn. (Note: it may be necessary to increase security to accommodate open windows, etc.)
<input type="checkbox"/>	If the internal temperature of the facility remains high for an extended period of time and potentially jeopardizes the safety and health of consumers, consider evacuation to another facility.
<input type="checkbox"/>	Provide cool washcloths and cooling fans for air circulation.
<input type="checkbox"/>	Encourage consumers to drink fluids to maintain hydration.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Fire: External

Initial Actions

<input type="checkbox"/>	Monitor local alert system and local news for evacuation reports and instructions.
<input type="checkbox"/>	Monitor consumers and staff for complications related to smoke exposure.
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Preemptive methods to mitigate smoke and fire risk: close all windows/doors/vents, set to re-circulate indoor air (if using HVAC), use a high efficiency particulate air (HEPA) filter (if possible), prepare evacuation bags/records/emergency contact information, contact Director of Quality Assurance to alert him/her that you may need to evacuate.
<input type="checkbox"/>	In case of immediate threat : move consumers to a pre-designated staging area for rapid evacuation, if you smell gas, and it is safe to do so, shut off gas (do not do so unless it is certain as only the gas company can turn it back on), contact Director of Quality Assurance to arrange transportation needs, notify consumer families.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Fire: Internal

Initial Actions

<input type="checkbox"/>	Rescue anyone in immediate danger while protecting the safety of the rescuing staff member(s). Follow the facility's procedure for RACE, PASS and other urgent response to fire.
<input type="checkbox"/>	Alert consumers and staff members; pull the fire alarm.
<input type="checkbox"/>	Call 9-1-1 immediately to report a fire. Include the following information: name of facility, address and nearest cross street, location of fire (floor, room number, etc.), what is burning (electrical, kitchen, trash, etc.).
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Contain the fire if possible without undue risk to personal safety. If able: Shut off air flow, including gas lines, as much as possible, since oxygen feeds fires and distributes smoke. Close all fire doors and shut off fans, ventilation systems, and air conditioning/heating systems. Use available fire extinguishers if the fire is small and this can be done safely.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Fire Emergency

This procedure is designed to supplement the Rapid Response Guide and may be used in the event of an actual fire, hazardous smoke conditions, or when there is the smell of smoke in the facility.

The two (2) most important actions employees are familiar with in the initial moments of fire used as easy to remember acronyms. The first step is R.A.C.E. and the second, if time permits is P.A.S.S.

1. R.A.C.E.

- **R**escue everyone in immediate danger.
- **A**larm – Announce Code Red and the fire's location over the loudspeaker and pull the fire alarm.
- **C**onfine the room with the fire by closing appropriate doors.
- **E**xtinguish the fire only if the above steps have been taken and size of the fire has not exceeded the capacity of the extinguishing device.

2. P.A.S.S.

- **P**ull the pin.
- **A**im at the base of the fire.
- **S**queeze the handle.
- **S**weep the base of the fire.

Initial Response: Fire Internal or External

(See Rapid Response Guide – Fire Internal or External)

Intermediate Response: Fire Internal or External

If not already completed under Rapid Response:

- A. If anyone is in immediate danger, rescue them while protecting your safety and that of your co-workers.
- B. Alert consumer and staff members by announcing over a loudspeaker; pull the fire alarm.
- C. Call 9-1-1 immediately to report a fire. Include the following information: name of facility, address and nearest cross street, location of fire (floor, room number, etc.), what is burning (electrical, kitchen, trash, etc.).
- D. Activate facility's EOP and appoint an IC, if warranted.
- E. Contain the fire if possible without undue risk to personal safety. Shut off air flow, including gas lines, as much as possible, since oxygen feeds fires and distributes smoke. Close all fire doors and shut off fans, ventilation systems, and air conditioning/heating systems. Use available fire extinguishers if the fire is small and this can be done safely. Additional procedures for emergency shutdown are included in Appendix X – Emergency Shutdown.
- F. Utilize smoke doors to evacuate consumers from the impacted area. Use this method when consumers are in danger of smoke exposure.
- G. If not already completed, notify supervisor (s) to report an unusual occurrence and activation of facility's EOP.
- H. In a large-scale fire, the local fire department may ORDER EVACUATION of the facility. In which case, evacuate consumers from the building as quickly and safely as time permits.
- I. If time permits, a good rule of thumb is to evacuate ambulatory consumers first.
- J. Activate the recall roster, if additional staffing is needed or evacuation is issued.
- K. Periodically, brief staff on the incident, check-in on their well-being and perform assignments. Reassign as the situation changes.
- L. Communicate with supervisor (s) any situation changes.
- M. The "All-Clear" will be communicated after the crisis is over and the Fire Department has deemed that re-entry safe (see Appendix W – Return to Facility).

Initial Response: Evacuation

(See Rapid Response Guide – Evacuation)

Intermediate Response: Evacuation

- A. On sight key individuals will be assigned task.
- B. Periodically brief staff on the incident, check-in on their well-being and perform assignments. Reassign as the situation changes.
- C. Continue assessing and updating transportation requirements based on the number of consumers, medical needs, and mobility status.
- D. Obtain transportation resources by contacting Pathfinder, Inc.'s Transportation Department.
 - Request assistance from available resources.
 - Collect and package consumers' equipment and medications.
 - Secure outgoing pharmaceuticals and medical equipment, as appropriate.
 - Secure consumers' medical equipment.

- Collect and package consumers’ belongings for transport, including glasses, dentures, hearing aids, etc.
 - Prepare water and snacks to accompany consumers during transport period.
 - Prepare medical documentation to accompany consumer, as appropriate.
- E. Verify that planned evacuation routes are safe to travel with the Pathfinder, Inc. Transportation Department.
- Track consumers to destinations and continue to notify family members of evacuation and planned destination.
- F. Assign staff to each vehicle carrying a large numbers of consumers to ensure consumers are assessed and emergency medications are secured and safeguarded. Emergency medications may be transported and secured.
- G. Provide comfort and reassurance to consumers throughout the entire evacuation.
- H. Secure the facility. Ensure that all electronics have been powered down and unplugged. (See Appendix X—Emergency Shutdown)
- I. Designate an individual to stay behind and safeguard the facility, if it is safe to do so. (If staffing is available.)

Extended Response

(See Intermediate Response above)

- A. Maintain communication with appropriate supervisor(s).
- B. Inform the supervisor(s) if any change in facility status occurs.
- C. Determine whether it is safe to return (See Appendix W – Return to Facility).
- D. Notify supervisor (s) to obtain permission to return consumers to facility.
- E. Notify family and other appropriate contacts.

Flood

Initial Response

<input type="checkbox"/>	Rescue anyone in immediate danger while protecting the safety of rescuing staff member(s).
<input type="checkbox"/>	If the flood poses danger to consumers, staff or visitors, call 9-1-1 immediately and include the following information: name of facility, address and nearest cross street, describe flood situation (basement, room numbers, etc.).
<input type="checkbox"/>	Activate facility’s EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Alert consumers, staff, and visitors.
<input type="checkbox"/>	Contact Administration for direction.
<input type="checkbox"/>	Unplug non-essential appliances, equipment and computers.
<input type="checkbox"/>	Check for gas leaks, water line ruptures, sewage contamination, etc. If you smell gas, and it is safe to do so,

	shut off the gas. Do not do so unless the need is certain as only the gas company can turn it back on. Report utility problems to appropriate utility company/agency.
<input type="checkbox"/>	If water lines are disrupted, consider the water supply to be contaminated and follow the facility plan for emergency water. Heed public health notices regarding water contamination (including the following notices: <i>Boil Water</i> , <i>Do Not Drink Water</i> , and <i>Do Not Use Water</i>). Consider all flood water contaminated. Avoid walking through flood waters and wash hands thoroughly after contact. Do not use pre-packaged food and drink products that come into contact with flood water. When in doubt, throw it out! Report utility problems to appropriate utility company/agency.
<input type="checkbox"/>	Gather critical supplies to take to higher ground/evacuation (e.g., medications, drinking water, health records, important personal items, communication devices, blankets, etc.)
<input type="checkbox"/>	Do not allow electrical devices to come into contact with water.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION.

Always contact Administration immediately. Account for all consumers and staff.

Hazardous Material/Waste

Initial Actions

<input type="checkbox"/>	If a reportable hazardous material/waste spill or release occurs (or is threatened) on facility property, call 9-1-1 immediately to report the incident. The facility may also be required to notify local authorities. Include the following information: name of caller and facility, exact location/date/time of spill, release or threatened release, substance/quantity involved/isotope (if known), chemical name (if known), description of what happened.
<input type="checkbox"/>	Alternately, the facility may be notified by authorities of an external hazardous materials/waste spill or release that may affect the facility.
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Assess consumers for signs of distress; keep consumers, staff and visitors away from the site of the spill.
<input type="checkbox"/>	Access the <i>Safety Data Sheet</i> (formerly named the <i>Material Safety Data Sheet</i>) for the material spilled or released on the facility's property. Determine if the material/waste poses a safety or health risk to consumers, staff or visitors. All SDS's should be available on site, but if the SDS cannot be located on site, consider checking the internet.
<input type="checkbox"/>	Utilize appropriate Personal Protective Equipment (PPE) if warranted.
<input type="checkbox"/>	Close windows, doors, and ventilation systems as needed to protect air quality by preventing the spread of dangerous fumes or smoke.
<input type="checkbox"/>	Coordinate with public safety agencies (fire and law) and emergency management to determine if evacuation is necessary.
<input type="checkbox"/>	If the decision is made to evacuate, see RAPID RESPONSE – EVACUATION.
<input type="checkbox"/>	Follow public health advice regarding water or air contamination (including the following notices: Boil

Water, Do Not Drink Water, and Do Not Use Water).

Always contact Administration immediately. Account for all consumers and staff.

Infectious Disease

Initial Actions

<input type="checkbox"/>	If either the volume or severity of an infectious disease significantly threatens or impacts day-to-day operations, activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Notify Pathfinder, Inc. Administration, who will complete the required notification forms for the Arkansas Health Department.
<input type="checkbox"/>	Guidance from the local health department and/or the U.S. Centers for Disease Control and Prevention (CDC) will be obtained.
<input type="checkbox"/>	Notify consumer's parent/guardian.
<input type="checkbox"/>	Implement appropriate infection control policies and procedures.
<input type="checkbox"/>	Clearly post signs for cough etiquette, hand washing, and other hygiene measures in high visibility areas. Consider providing hand sanitizer and face/nose masks if practical.
<input type="checkbox"/>	Consider advising visitors to delay visits if needed to reduce exposure risk to consumers.
<input type="checkbox"/>	Advise staff to check for signs and symptoms of illness and to not work if sick. Activate emergency staffing strategies as needed.
<input type="checkbox"/>	Limit exposure between infected and non-infected persons; consider isolation of ill persons.
<input type="checkbox"/>	Conduct recommended cleaning/decontamination in response to the infectious disease.
<input type="checkbox"/>	If needed, the procedure for Emergency Admit is included in Appendix H and the Procedure for Handling Remains is included in Appendix I.

Always contact Administration immediately. Account for all consumers and staff.

Medical Emergency

Initial Action

<input type="checkbox"/>	Remain calm
<input type="checkbox"/>	If either the volume or severity of a medical emergency significantly threatens or impacts day-to-day operations, activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Call 911 if warranted. Briefly describe the incident, nature of injuries, and location of the injured person. Call facility supervisor.
<input type="checkbox"/>	Put on suitable Personal Protective Equipment before coming in contact with the victim.
<input type="checkbox"/>	If the victim appears to be unconscious, determine responsiveness by attempting to communicate in a loud voice. If the victim does not respond, place your hand near the victim's breathing zone to check for a sign

	of respiration. Do not move the person's head or neck in the process.
<input type="checkbox"/>	If you detect the victim is not breathing and the heart is not beating and you are properly trained in CPR establish a clear airway and begin CPR.
<input type="checkbox"/>	Do not move an injured person unless s/he is in further danger (e.g. advancing fire).

Always contact Administration immediately. Account for all consumers and staff.

Opioid Overdose

Initial Action

<input type="checkbox"/>	Remain calm
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Call 911 immediately. Briefly describe the incident, symptoms, and location of the injured person. Call facility supervisor.
<input type="checkbox"/>	Put on suitable Personal Protective Equipment before coming in contact with the victim.
<input type="checkbox"/>	If the victim appears to be unconscious, determine responsiveness by attempting to communicate in a loud voice. If the victim does not respond, place your hand near the victim's breathing zone to check for a sign of respiration.
<input type="checkbox"/>	If you detect the victim is not breathing and the heart is not beating and you are properly trained in CPR establish a clear airway and begin CPR.
<input type="checkbox"/>	Lay the person on their side to prevent choking.

Always contact Administration immediately. Account for all consumers and staff.

Missing Consumer

Initial Actions

<input type="checkbox"/>	Record the time that the consumer was discovered missing and when and where he/she was last seen.
<input type="checkbox"/>	Verify that the consumer has not signed out or been discharged.
<input type="checkbox"/>	Perform census verification and consumer roll call to determine if there are any other missing consumers.
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Search the facility's grounds for the consumer. If necessary, distribute copies of the consumer's photograph to the staff searching the grounds. Keep a record of the areas searched. Be sure to check: closets, storage rooms, under beds, and behind furniture.
<input type="checkbox"/>	If the missing consumer is not found following an expedient search, call 9-1-1 and provide: name and description of missing consumer, description of clothing/ambulation method/cognitive status, photo if available.

<input type="checkbox"/>	Notify the responsible party/next of kin that consumer is missing and search is underway. Notify Pathfinder, Inc Administration.
<input type="checkbox"/>	Coordinate with public safety agencies in searching for the missing consumer. Provide face sheet/picture as requested.
<input type="checkbox"/>	Once the consumer is found, notify the responsible party/next of kin, facility staff and public safety agency representative.

Alert Director of Quality Assurance immediately when consumer is discovered missing.

Adults (18-99): Alert police after two (2) hours

Children (0-18): Alert police immediately after property was searched

Always contact Administration immediately. Account for all consumers and staff.

Shelter in Place

Initial Actions

<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Identify safe and unsafe areas of the facility relative to the specific threat.
<input type="checkbox"/>	Move consumers from unsafe areas to safe areas. Be sure to include medications, important personal items, etc.
<input type="checkbox"/>	Increase the safety of "safe areas" by reducing hazards, e.g., close, lock and move away from windows (during extreme winds), exterior doors, and other openings that may create hazards.
<input type="checkbox"/>	Plan for the availability of food, water and other essential disaster supplies for consumers and staff during the time period anticipated for sheltering in place. In addition to non-perishable food and water and critical medications, consider battery-powered radios, first aid supplies, extra blankets, flashlights, batteries, duct tape, plastic sheeting, plastic garbage bags, and eating utensils.
<input type="checkbox"/>	Comfort and assess consumers for signs of distress.
<input type="checkbox"/>	Continually reassess the safety of sheltering in place and prepare to activate the facility evacuation plan if at any time the risk of sheltering in place is greater than the risk to evacuate (see Appendix B – Facility Evacuation and Maps).
<input type="checkbox"/>	If needed, extended shelter in place guidance is contained in Appendix J.

Always contact Administration immediately. Account for all consumers and staff.

Decision to Shelter in Place

The biggest decision our Supervisor designee (the Administrator or designee) may need to make is whether to stay or go in response to a threatened or actual emergency. This decision is always based on the best interests of the consumers; shelter in place is often the preferred method over facility evacuation due to the stress to consumers associated with evacuation to another facility or alternate care site.

If the threat is fast moving (e.g., an internal building fire), the decision may be made rapidly, without the opportunity to consult with local fire, law, or county emergency management officials. Situations that may warrant shelter in place include: severe weather, hazardous materials incidents, nuclear accidents, earthquakes, wildfires, etc. Once the Designee makes the decision to shelter in place, the following activities occur.

Initial

(See Rapid Response Guide – Shelter in Place)

Intermediate

- A. If not already completed, notify supervisor(s) to report an unusual occurrence and activation of facility's EOP, including shelter in place status.
- B. Complete staff notification and assignments.
- C. Assess consumers frequently and offer comfort and reassurance. Notify supervisor(s) ASAP if there is a change of condition with any consumer.
- D. Periodically, brief staff on the incident, check-in on their well-being and perform assignments. Reassign as the situation changes.
- E. Identify any unsafe areas related to the threat. If there are cracks and vents around doors and windows, they should be sealed with duct tape during a hazmat situation.
- F. If hazard areas are identified, move consumers to safety and clearly mark areas "Do Not Enter". Use tape and other signage to keep people away from threats.
- G. Suspend normal operations and close the facility.
- H. Advise and remind all consumers and visitors to stay inside the facility until further notice. They should be told why they are being asked to stay, the expected duration, and exactly what they should do to remain safe.
- I. If not already completed, secure access points. Close and lock all windows, exterior doors, and any other openings to the outdoors. Initiate Lockdown procedures – See Appendix K.
- J. If airborne irritants are present, turn off fans, heating and air conditioning systems.
- K. If there are visitors or other people onsite provide for their safety. Request and remind them that they stay until the all clear is given from authorities.
- L. Continue to account for all consumers and periodically assess them.
- M. Communicate with consumer families and provide updates.
- N. Secure pharmaceuticals and medical equipment, as appropriate. Secure patient valuables.
- O. Prepare for additional water supplies – fill available containers with water (e.g., tubs, larger containers, pitchers, etc.), unless there is a "Do Not Use Water", "Do Not Drink Water" or "Boil Water" order in place for water.
- P. Be on the lookout for broken windows, frayed or broken electrical wires, fire, or leaking water or gas.
- Q. Activate Hot or Cold Weather procedures, if needed (see Section 1 - Rapid Response).

Extended

- A. If shelter in place is to be prolonged, be prepared to access emergency supplies.
- B. Listen to the radio for instructions and updates from local officials.

- C. Continue coordination with local emergency management, and other response partners.
- D. Inform supervisor(s) if any change in facility status occurs.
- E. Notify families and staff of “All Clear”.

Lockdown

The ability to lockdown the facility in the case of an emergency which threatens the safety of consumers, staff, and visitors and/or facility operations is of paramount importance. Lockdown is the process by which the facility is secured and staff and visitors are channeled to specific entry/exit points.

The decision to lockdown the facility may be made by the Supervisor designee in consultation with the Incident Management Team (IMT) and/or the IC and the local public safety agency. In the event of an emergency that requires immediate intervention, such as a CODE; Lockdown, or active shooter, this action may be undertaken immediately.

Incidents That <u>May</u> Necessitate Lockdown	Prevent Entry	Prevent Exit
Power Failure	X	
Earthquake	X	
Flooding	X	
Fire	X	
Bomb Threat	X	
External Contamination	X	X
Civil Disturbance	X	X
Hostage Event	X	
Active Shooter	X	
Workplace Violence	X	

Procedures

- A. *Exit lockdown:* is for the purpose of preventing individuals from leaving due to an existing hazard outside, whether it is a civil disturbance, possible exposure to a hazardous substance, or the need to screen those leaving due to a missing consumer.
- B. *Entry lockdown:* is for the purpose of preserving the facility’s ability to operate and respond to a possible emergency event such as a fire, flood or keeping unauthorized individuals from entering the facility.

Power Outage

Initial Actions

<input type="checkbox"/>	Call 9-1-1 if the power outage causes or threatens a medical emergency
<input type="checkbox"/>	If the power outage poses a risk to the safety of consumers, staff, or visitors, take actions to reduce/eliminate the threat without jeopardizing the safety of staff.

<input type="checkbox"/>	Report the outage to the appropriate utility company or repair vendor.
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Activate back-up power and/or emergency lighting if necessary.
<input type="checkbox"/>	Comfort and assess consumers for signs of distress.
<input type="checkbox"/>	Account for all consumers.
<input type="checkbox"/>	To the extent possible, mobilize emergency back-up power generators and necessary fuel for operation.
<input type="checkbox"/>	Take all reasonable steps to protect food and water supplies and maintain a safe environment of care for consumers and staff.
<input type="checkbox"/>	If the decision is made to evacuate the facility, see RAPID RESPONSE – EVACUATION. If the decision is made to shelter in place, see RAPID RESPONSE – SHELTER IN PLACE. Consult other RAPID RESPONSE Guides as appropriate to the situation causing the power outage, e.g., flood.

Report after two (2) hours and complete a "DHS Incident Report Form."

Always contact Administration immediately. Account for all consumers and staff.

Workplace Violence

Initial Action

<input type="checkbox"/>	Dial 9-1-1 if there is any threat of workplace violence.
<input type="checkbox"/>	Announce to warn staff of situation and location of situation
<input type="checkbox"/>	Activate facility's EOP and appoint a Facility Supervisor designee if warranted.
<input type="checkbox"/>	Move consumers to the closest safe area.
<input type="checkbox"/>	If a dangerous or armed assailant is in the facility, flee the dangerous area if possible- Assist consumers and visitors to take cover behind doors, heavy furniture, or on floor. Take refuge behind locked doors. If possible, cover windows by drawing blinds or taping paper in the window. Maintain contact with 9-1-1 to provide and receive information. Silence the ringer on cell phones. If there is an argument without physical contact- De-escalate the situation: avoid threatening body language (e.g., don't stand with arms crossed), maintain a calm voice, avoid arguing). Ask the individual to leave the premises. If the individual does not immediately leave, dial 9-1-1 and request assistance.
<input type="checkbox"/>	Initiate Lockdown procedures if it is appropriate to control facility access.

Follow ACTIVE SHOOTER EMERGENCY PLAN

Always contact Administration immediately. Account for all consumers and staff.

Active Shooter

An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims.

Active shooter situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the shooting and mitigate harm to victims.

Because active shooter situations are often over within ten (10) to fifteen (15) minutes, before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

Good practices for coping with an active shooter situation:

- Be aware of your environment and any possible dangers.
- Take note of the two (2) nearest exits in any facility you visit.
- If you are in an office, stay there and secure the door.
- If you are in a hallway, get into a room and secure the door.
- As a last resort, attempt to take the active shooter down. When the shooter is at close range and you cannot flee, your chance of survival is much greater if you try to incapacitate him/her.
- CALL 911 WHEN IT IS SAFE TO DO SO!

How to Respond When Active Shooter is in Your Vicinity

Quickly determine the most reasonable way to protect your own life. Remember that students and visitors are likely to follow the lead of employees and managers during an active shooter situation.

1. Evacuate. If there is an accessible escape path, attempt to evacuate the premises. Be sure to:
 - Have an escape route and plan in mind.
 - Evacuate regardless of whether others agree to follow.
 - Leave your belongings behind.
 - Help others escape, if possible.
 - Prevent individuals from entering an area where the active shooter may be.
 - Keep your hands visible.
 - Follow the instructions of any police officers.
 - Do not attempt to move wounded people.
 - Call 911 when you are safe.
2. Hide out. If evacuation is not possible, find a place to hide where the active shooter is less likely to find you. Your hiding place should:
 - Be out of the active shooter's view.
 - Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door).

- Do not trap yourself or restrict your options for movement.
 - To prevent an active shooter from entering your hiding place: lock the door and blockade the door with heavy furniture.
 - If active shooter is nearby:
 - Lock the door.
 - Silence your cell phone and/or pager.
 - Turn off any source of noise (i.e., radios, televisions).
 - Hide behind large items (i.e., cabinets, desks).
 - Remain quiet.
 - If evacuation and hiding out are not possible:
 - Remain calm.
 - Dial 911, if possible, to alert police to the active shooter's location.
3. If you cannot speak, leave the line open and allow the dispatcher to listen.
- Take action against the active shooter. As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:
 - Acting as aggressively as possible against him/her.
 - Spraying him/her with the fire extinguisher and use the fire extinguisher to hit him/her.
 - Throwing items and improvising weapons.
 - Yelling.
 - Committing to your actions.

How to Respond When Law Enforcement Arrives

Law enforcement's purpose is to stop the active shooter as soon as possible. Officers will proceed directly to the area in which the last shots were heard.

- A. Officers usually arrive in teams of four (4).
- B. Officers may wear regular patrol uniforms or external bulletproof vests, Kevlar helmets, and other tactical equipment.
- C. Officers may be armed with rifles, shotguns, handguns.
- D. Officers may use pepper spray or tear gas to control the situation.
- E. Officers may shout commands, and may push individuals to the ground for their safety.

How to react when law enforcement arrives:

- Remain calm and follow officers' instructions.
- Put down any items in your hands (i.e., bags, jackets).
- Immediately raise hands and spread fingers.
- Keep hands visible at all times.
- Avoid making quick movements toward officers such as holding on to them for safety.
- Avoid pointing, screaming and/or yelling.
- Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises.

Information to provide to law enforcement or 911 operators:

- Location of the active shooter(s).
- Number of shooters, if more than one (1).
- Physical description of shooter(s).
- Number and type of weapons held by the shooter(s).
- Number of potential victims at the location

Notes: The first officers to arrive to the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the premises.

Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

Van Evacuation

Initial Action

<input type="checkbox"/>	Remain calm and secure the van.
<input type="checkbox"/>	Check for any indication of fire or smoke
<input type="checkbox"/>	Decide as quickly as possible if it is necessary to evacuate the van.
<input type="checkbox"/>	Check for injuries and monitor the consumers' physical and emotional condition
<input type="checkbox"/>	Cooperation fully with police and/or fire department paramedics
<input type="checkbox"/>	WHEELCHAIR EVACUATION PROCEDURE: Consumers who ride to and from programs in a wheelchair or other mobile seating device must be given special consideration when it is necessary to evacuate them from a van either in a drill or a real emergency. In an emergency, the driver and consumer's van attendant must remove the consumers from their chairs as quickly and safely as possible. The consumers must then be removed from the van by the most convenient and safest exit. Stand behind a passenger, put your arms under their armpits, and drag them off the bus if necessary. Since this procedure may cause injuries to very fragile consumers, this type of procedure should only be used in real emergencies when there is no other alternative method of evacuation.
<input type="checkbox"/>	The driver will evacuate the van if: there is an indication that the van is on fire or in danger of catching fire; the van cannot be moved to a safe place/out of the way of traffic; there is a natural emergency that requires evacuation. Should evacuation be necessary, the driver will instruct the consumers and attendant to move at least 100 feet away from the side of the school van; however, the consumers should not cross the roadway unless absolutely necessary. In most cases the driver will be able to determine the safest location for shelter from the emergency situation.

Always contact Administration immediately. Account for all consumers and staff.

Return to Facility

Authority to Call for Re-Entry

Following an emergency evacuation, re-entry into facility must be preceded by the approval of appropriate jurisdictional authorities (local, county, state, etc.).

Post Evacuation Transportation

Following a disaster, Pathfinder, Inc.'s Transportation Department will be contacted and arrangement made for delivery back to the facility. Drivers may be limited or unavailable and the entire community may be competing for the same resources, including fuel and specialized vehicles for transporting persons who are frail or have disabilities. This demand will likely outpace resources.

Return transportation will be arranged by the facility in collaboration with the Pathfinder, Inc. Transportation Department and/or emergency management agency. The post-evacuation return to the facility may need to occur in shifts over days or weeks.

The Administrator or his/her designee is responsible for determining the order in which consumers are returned to the facility.

Post Disaster Procedure

The Administrator or his/her designee along with Pathfinder, Inc. Administration will continue during the recovery phase to determine priorities for resuming operations, including:

- Physically secure the property.
- Protect undamaged property. Close up building openings. Remove smoke, water, and debris. Protect equipment against moisture.
- Restore power and ensure all equipment is functioning properly.
- Separate damaged repairable property from destroyed property. Keep damaged property on hand until insurance adjuster has visited the property.
- Report claim to insurance carrier.
- Take an inventory of damaged goods. (This is usually done with the insurance adjuster).

Emergency Shutdown

Before beginning this process, staff will need to contact Pathfinder, Inc. Administration and Director of Physical Plant for directions in this procedure. There are several instances where deactivation of facility systems may be required during a disaster/crisis. Examples include: severe weather, earthquake, civil disturbance, terrorism attack, accidental event (power spike, outage, gas leak, over-pressurization, etc.).

Specific steps need to be taken to ensure safe shutdown of a system. Mechanical equipment that may be

shutdown includes: water, natural gas, electric, heating, ventilating, and air conditioning (HVAC) equipment, boilers, computer equipment. These procedures should only be completed with the approval of the supervisor(s) or his/her designee at the time of the crisis Shutdown should only be employed during the most extreme of situations, if time permits call in an expert.

Vendors will be notified when their service is shut down by the facility. In addition, all staff members will be notified when services are shut down temporarily. A site map with the location of shutoffs, emergency exits, in-facility evacuation routes, fire extinguishers, fire doors is included in Appendix S – Site Map with Shutoffs, Fire Suppression and Emergency Supply locations; this is in addition to the checklist below which has a physical description of the location of various pieces of operational equipment (i.e., shutoffs, electrical breakers, switches, etc.).

Important Precautions

These procedures should be tested with key staff prior to being performed to ensure mechanical items are shutdown securely and safely. The following precautions must be followed: never stand in water or any fluids when shutting down equipment; if you see smoke, fire, gas, or electrical voltage near the area, do not attempt a mechanical shutdown.

CLIENT POLICIES AND PROCEDURES

Family Contact Policy

Family contact is under the direct supervision of the program coordinator for coordination with staff/counselor(s)/instructor(s) in compliance with the following:

- A. Family contact is made automatically when family member(s) are providing care for a minor individual (under age eighteen [18]) and when family member has been determined to be the legal guardian for adult individual (age eighteen [18]).
- B. Family contact for individuals who serve as their own guardian is made only if the individual requests it.
- C. Under normal circumstances, the family will be contacted when:
 - Family participation is requested in the development of the annual plan.
 - Review is conducted at least quarterly of the individual progress report(s).
 - Individual becomes physically injured or sick with a need for medical treatment.
 - Individual is in need of dental treatment. Employee or family may arrange dental appointment.
 - Individual demonstrates unruly behavior(s) resulting in the need for disciplinary actions or plans for discharge procedures.
 - Other circumstances occur for which the family request notification if deemed reasonable by the administrator or interdisciplinary team.
- D. Family contact will be made in person, by phone, by e-mail, or by letter. Documentation will be made.

Behavior Modification Policy

Purpose

To develop appropriate behaviors, forms of positive behavior modification and intervention are applied using basic concepts of socialization. Individuals served may have a positive programming behavior management plan used to reinforce methods as a means of promoting positive behavior. Employees will receive appropriate training in the management of the behavior management plan.

Behavior Support Training

Positive Behavior Support Training is offered to employees to assist in developing and implementing positive behavior plans. The form of behavior modification employed by Pathfinder, Inc.'s professional employees and aides is one of positive reinforcement. Desired behaviors are consistently reinforced. The use of seclusion or restraints in any Pathfinder, Inc. program is strictly prohibited. In order to ensure the most positive environment to prevent episodes of inappropriate behavior, staff should recognize personal stressors of the individual and work on promoting an environment free of those stressors. Socially acceptable behavior should be modeled and identified to the consumer. Consumers should be encouraged to focus on appropriate behaviors by use of positive intervention techniques.

Crisis Prevention Intervention (CPI)

Identified Pathfinder, Inc. personnel receive training in Non-Violent Crisis Prevention Intervention (CPI), an authorized national certification in non seclusion or restraint emergency hold intervention procedures. CPI is used only to protect consumers and employees from injury.

This emergency intervention is used only:

- A. In the least restrictive manner and minimal time frame to ensure the safety of all present
- B. Only by trained individuals
- C. Is assessed by the program director for trends

If an individual needs more than two (2) emergency holds per month their plan of care will be assessed by their team to determine any environmental causes, past trauma indicators, and appropriateness of placement.

Conscious Discipline

Pathfinder, Inc. utilizes "Conscious Discipline" in the Preschool Program. This multidisciplinary approach integrates all learning domains (social, emotional, physical, cultural, and cognitive) to establish a comprehensive system that promotes self control, conflict resolution, character development, and social skills.

Solving Consumer Issues

Supervisors, administrators and employees at all levels shall receive, and act promptly and fairly, upon consumer issues. Pathfinder, Inc. recognizes the importance of bringing to light and resolving grievances and/or complaints promptly. If you need further assistance at any time with bringing an issue, grievance, and/or complaint please contact the administrative office at [\(501\)982-0528](tel:501982-0528), an employee will be designated to assist you in any way possible with your issue, including information on external options.

Individual/Parent/Guardian Grievance Procedures

The following procedure is hereby established to handle individual/parent/guardian grievances:

- A. Any individual/parent/guardian expressing a grievance of any nature shall first present the grievance in writing to the program director of the facility within five (5) business days of knowledge of the incident. The consumer and/or the guardian/custodial parent, may present his/her grievance in good faith, without fear of any reprisal, retaliation or barrier to services.
- B. Within five (5) business days of the filing, the individual shall meet with the program director. Written notification and actions taken as a result of this meeting will be provided within five (5) business days of said meeting to the consumer or his/her representative.
- C. If the individual is not satisfied with the results of the meeting listed in B, they may contact the Director of Quality Assurance within five (5) business days.
- D. The Director of Quality Assurance will review all pertinent grievance information submitted and investigate the situation. The Director of Quality Assurance will render a final decision within five (5) business days of the meeting. The decision will include appropriate resource information for an external appeal and assistance.

An annual written report of all formal complaints and grievances will be conducted to determine trends, performance improvement and appropriate actions to be taken.

NOTE: Dismissal and Grievance Procedures are to be outlined in the Individual Policies and Procedures Manual. Preschool: If the individual is not satisfied with the decision from an IFSP or IPP conference, they may continue their case to the DDS Office of Appeals and Hearing under DDS Policy 1010 and 1076. This information can be obtained from the Director.

Individual Oriented Concerns Procedures

Policy

Pathfinder, Inc. provides an administrative procedure to assure that individuals, who believe that the rights of the program's individuals are not protected or observed, may file a formal grievance against the program or individual employees of the program. The administrative procedure shall assure a fair and thorough hearing for both the accuser(s) and the accused, with the right of legal representation and/or counsel, at one's own expense, throughout the process and shall be directed toward arriving at administrative actions that properly address the complaint. Utilization of the administrative procedure shall not result in any adverse management action against individuals filing complaints but shall be viewed by management as an amicable and constructive method for identifying and solving problems.

Nothing herein prohibits an individual's right to seek guidance and/or assistance from:

<p>Governor's Council on Developmental Disabilities 1515 W. 7th Street, Suite 320-330 Little Rock, AR 72201 Phone: 501-682-2897 ddcstaff@dfa.arkansas.gov www.gcdd.arkansas.gov</p>	OR	<p>Adult Protective Services Hotline 1-800-482-8049 Child Abuse Hotline 1-800-482-5964</p>
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Procedure

Concerned individuals shall report directly to the supervisor in charge of the program. Initial report may be verbal, but must be followed with a written, signed report within one (1) working day. Individual/resident statements may be taped in lieu of written report, or written report witnessed by third party component.

Investigation

A preliminary investigation is immediately initiated by the Director of Quality Assurance resulting in a written report of findings to the director. The investigation should be completed within five (5) working days unless extenuating circumstances exist that require additional time. If, at the end of the preliminary investigation, the Director of Quality Assurance determines the allegation is unfounded, the process is ended unless the charging party desires appeal. The findings of the investigation will be documented and maintained in the Administration Office. The entire process must be completed within ten (10) working days unless extenuating circumstances exist that require additional time. Notify and forward documentation to the appropriate overseeing authority.

Civil and Legal Responsibilities

If you are eighteen (18) years of age, you have the following responsibilities:

- A. If you agree to buy something, you must pay for it before it actually becomes yours.
- B. If you buy something on credit, you must make each payment on the correct day until all payments are made.
- C. If you sign your name to any kind of contract, you can be held to the terms of that contract.
- D. If you do not fulfill the terms of a contract you sign, you can be taken to court.
- E. If you break a law, you can be taken to court, and a judgment made as to your punishment.
- F. If you are accused of breaking a law, you will be given a trial to decide if you are guilty.
- G. If you wish, in the future, to own an automobile or motorcycle, and drive it, you must get a driver's license, buy a tag, get insurance, and obey all the rules listed in the driver's manual and those rules posted on streets and highways.
- H. It is against the policy of this agency for you to possess or consume alcohol while working or receiving day services. However, if you choose to do so off the premises, you are subject to all the laws governing drinking.
- I. Possession of drugs, except those prescribed by your doctor, is against the law.
- J. Buying or processing alcohol for yourself or anyone under twenty-one (21), or anyone who is not their own guardian, is against the law.

- K. If you are not eighteen (18), or you are not your own guardian, you must have your parent's or guardian's approval (by signature) before you sign any contracts, buy on credit, get a driver's license, or exercise other rights of majority. You are still subject to all laws, regardless of your status.

ENROLLMENT AND DISCHARGE POLICIES AND PROCEDURES

Application and Referrals

Pathfinder, Inc. has an online referral process where individuals can submit applications for all services provided within Pathfinder. Pathfinder uses a program called Form Site that logs the date and time of inquiries received through the program. This program allows for a centralized forum for entry into Pathfinder that be monitored.

Once the referral is received, funding is reviewed. If applicant funding meets Pathfinder, Inc. requirements, the referral is then forwarded to the area of interest marked on the application. Applicants are notified by email or phone when ICF/IID or Residential sites are full and the application will be maintained for future openings.

Each program will review the application and contact the individual/family and follow regulatory enrollment requirements for their programs. If the individual meets the regulatory requirement, tours dates are scheduled, enrollment process begins, and any necessary evaluations are scheduled. Refer to each individual program within the operational manual for specific information in regards to a particular programs procedures or policies for: enrollment, evaluation, conferences, transition, and discharge criteria.

In the Pathfinder Community Waiver Program and Residential Waiver Program individuals are approved by DDS and establish their choice to be Pathfinder, Inc. DDS will notify Pathfinder, Inc. by email and supply waiver application information as individuals choose Pathfinder, Inc. to provide their services.

DDS and Managed Care Referral

In the process of accepting referrals for admission to its DDS delivery system, Pathfinder, Inc. will adhere to the following DDS policies:

- DDS POLICY NO. 1020 Application and Service Referral
- DDS POLICY NO. 1035 Agency Definition of Disability/Eligibility For Services
- DDS POLICY NO. 1075 Testing Requirements to Determine Eligibility for DDS Services
- DDS POLICY NO. 1076 Appeals
- DDS POLICY NO. 1086 Human Development Center Admission and Discharge Rules
- DDS POLICY NO. 3018 Reporting of Denial of Access to Services
- DDS POLICY NO. 1043 Guardianship
- DDS POLICY NO. 3003-I Researching Involving Individuals Served

In the process for accepting referral for admission to its Managed Care delivery system, Pathfinder will adhere to the policies set forth by the individual PASSE's (Provider Led Arkansas Shared Saving Entity).

Waiting List

Waiting lists will be maintained as appropriate by program. Selection will be made without regard to age, sex, gender, gender identity, color, race, creed, and religion as the program permits.

Order of Acceptance

Criteria for order of acceptance are defined by our licensing entities and funding entities. Acceptance decisions are based upon appropriate documentation provided verifying that the person served is eligible for specific program services.

Pathfinder, Inc. will serve all individuals referred for services unless a concern for health and safety for the individual or other consumers under Pathfinder, Inc. care has been established AND provided services and funding is available. When more than one (1) individual applies to a single opening in a Pathfinder, Inc. Program Order of Acceptance will be based on severity, individual centered needs and appropriateness of requested Pathfinder, Inc. program, and ability of said program to meet the applicant's need.

Readmission

Readmission for services, after an individual has been discharged from a Pathfinder, Inc. program, may be allowed based upon the circumstances and needs of the individual concerned.

Procedures for readmission are as follows:

- A. Initial contact/interview with program staff for the program which individual is seeking readmission.
- B. Submission of "New Application Form" to program staff with reason stated for readmission as well as documentation of activities and circumstances of the applicant.
- C. Update sociological, psychological and medical information as needed. Documentation from other service agencies or from referral sources will be secured by utilizing a signed "Release of Information Form" to contact subsequent providers.
- D. All information will be reviewed and screened by program staff according to eligibility and admissions procedures as stated.
- E. The team will interview the applicant and consider input from staff members who have had previous experience in working with the individual. A decision for readmission will be made based upon all available information.
- F. If applicant has been determined eligible and appropriate for readmission into a program, then admissions procedures will be implemented as stated in program policies. Special considerations may be referred to outside sources. If an applicant has been dropped due to illness or circumstances beyond their control and they are readmitted with six (6) months, information will simply be updated.

Discharge

An individual will be discharged only after Pathfinder has exhausted all efforts to provide support/treatment.

Grounds for discharge of an individual shall consist of:

- A. Behavior disruptive to the program or endangering the health, safety, and welfare of themselves or others
- B. Consistent violation of any of the program requirements.
- C. An individual's needs become more complex than Pathfinder, Inc. can meet.
- D. Determined by a regulatory/funding source to be ineligible for services

A consensus of the interdisciplinary team will be required to discharge an individual. Program discharge will include documentation of efforts to assist an individual in acquiring alternate placement suitable for meeting individual needs. Follow-up services will be provided as appropriate to assist family and individual in adjustment to new placement.

CLIENT INFORMATION AND RECORDS

Individual Record Rules

All personnel responsible for maintaining records or making entries into the record should be held responsible for complying with the following rules/regulations:

- A. Individual's complete name must appear on every record.
- B. Entries into the record must be dated by day, month, and year.
- C. All entries into the record must be signed by the individual making the entry. The signature **MUST** include the complete name and title of the individual.
- D. No entries are to be made in pencil. Black or blue ink or electronic entry is the only acceptable means of making entries.
- E. No information is to be released from the record without consent from the individual/parent/guardian, as applicable.
- F. When corrections are necessary, the error need only be crossed out (with a single line), the correction made, dated, and initialed.

Confidentiality of Individual Records

Policy

Pathfinder, Inc. recognizes the confidentiality of all individual records and information and will implement safeguards possible to maintain confidentiality.

Procedure

- A. All records will be maintained in a secure location for protection against unauthorized use and stored under lock with protection against fire, water, and other hazards.
- B. Information in records will not be released, duplicated, or disseminated without proper authorization.
- C. *"Release of Information"* must be signed by the individual or by the guardian of an incompetent or minor individual.

- D. In conformance with common procedures as maintained in public and private agencies, requests from doctors, hospitals, social agencies, and institutions concerned with the care of a specific individual, may be honored by completing “*Consent to Release Information Form*”.
- E. Any information released to the press, radio, television or other news agencies, which could result in invasion of the resident or individual's right to privacy, must be approved by the individual, his/her guardian, and the Director and/or Designee.
- F. The Director and Supervisors are authorized to review master files. The Director may designate other employees who may be authorized to review master files; however, the Director must authorize, in writing, those designated individuals.
- G. The individual or guardian has a right to review the contents of the record but only at a scheduled time and with an employee present.
- H. Confidential information must be respected at all times by all employees. Cases should not be discussed in the presence of other individuals and inappropriate staff.
- I. An access sheet will be located in the front of each file to maintain confidentiality, according to the Privacy Act of 1974.
- J. The individual has the right to be informed of the confidential nature of all individual information and has the right to approve or deny the release of identifiable information.

Release of Individual Information

Policy

The purpose of this policy is to establish safeguards to preserve the privacy and confidentiality of consumer information. Pathfinder, Inc. will follow the combined requirements of the Health Information Portability and Accountability Act (HIPAA) and other regulatory agencies standards in order to release information from consumer’s records.

Procedure

Any requests for information must not be responded to by an employee of Pathfinder, Inc. except as permitted in accordance with regulatory agencies standards.

Employees need to consult with the Director of Quality Assurance concerning release of information of a legal nature.

Original records shall not be taken outside of program except upon receipt of a subpoena duces tecum, court order, or statute. When consumer’s records have been subpoenaed, every effort will be made to have the court accept a certified copy of the record. Where the judge orders that the original records be held, a receipt must be procured from the Clerk of the Court and filed in the folder until return of the records.

Consumers, parent(s)/guardian(s) have a right to request the restriction of the use and disclosure of information. Such restrictions must be submitted on the “*Release of Information Form*” and do not affect disclosures that have already taken place in good faith. The form will be filed in the consumer’s records.

Written authorization must be obtained for the release of consumer’s records.

Guidelines

Any release of confidential information must include the following:

- A. The release of information has been authorized by the person served and/or his or her legal representative using a "Release of Information Form".
- B. The "Release of Information" conforms to applicable laws and regulations and indicates what specific information can be released, to whom, how the information will be shared, and the purpose of requesting the information.

Individual Record Control

Policy

The control, access, and use of all individual records (master file) are a very serious matter and will be strictly adhered to as set out herein.

Procedure

- A. Each time a Master File is removed from the filing drawer, the individual who is reviewing the records completes the Records Review Log located in each Master File, noting the individual name and title, date of review, and specific purpose of review (name, title, date, purpose).
- B. Only appropriate personnel will retrieve master files from the filing drawer.
- C. Those individuals who have access to the individual's records are listed below and will be updated as needed. This list will be kept posted in the Records Room. Records access is allowed to those individuals on the Access List as follows: appropriate directors, vocational counselors, individual service coordinator, placement procurement officers, instructors, case managers, individual/parent/guardian, and appropriate representatives of funding sources.

Closure of Individual Records

Individual case files shall be closed when an individual is no longer attending the program.

- A. The record will contain a discharge summary upon termination of service. The summary will:
 - Indicate date
 - Indicate reason for termination of service
 - Be signed and dated by service provider
- B. A summary of diagnostic and treatment services is provided.
- C. A summary of the course and results of treatment in relation to problems is completed.
- D. If individual is placed on a job, individual file shall remain active during follow-up period (one year). At the end of that period, final statement of individual adjustment shall be entered, report filed with appropriate agency (Rehab, JTPA, etc.), and case file closed.
- E. If individual transfers to another center, records shall be made available to receiving center upon receipt of properly authorized "Release of Information Form", report filed with appropriate agency, and case closed.

- F. If individual withdraws or is suspended from Pathfinder, Inc. the department head or individual service coordinator shall prepare written statement indicating reason, and report shall be filed with appropriate agency, and case closed.

All discharged individual files are stored in a locked secure area. The following regulations for record destruction for Pathfinder, Inc. Programs:

	7 years following discharge	6 years following discharge	5 years following discharge	5 years following discharge or death	3 years following discharge	1 year after age of 18 or certification of completion
Behavioral Health		X				
Contracts			X			
ICF/IID				X		
NISH					X	
Preschool	X					
Residential				X		
Workshop			X			

When regulation period ends, media notification will be made advising readers that they should contact Pathfinder, Inc. if there is any reason that these records should not be destroyed. Inquiries should be received within a one (1) month period. The destruction of closed files will be completed by a HIPAA certified shredding company.

Individual case files shall be stored and maintained in completed file for a period of five (5) years, or until the contract covering the last period of service to the individual has been audited by the appropriate agencies. If disposal is necessary, the files will be shredded. Individual files shall not be disposed of without prior consent of the Executive Director even after that period of time.

MEDICATION MONITORING AND ADMINISTRATION

Each program within Pathfinder, Inc. has established guidelines regarding the administration, monitoring and maintenance of medication within that program which are listed by program below. In all programs where medication (except controlled medication) is maintained, discontinued or medication no longer needed, will be destroyed. The destruction shall be by means of mixing medications with kitty litter and then disposed of in the trash **or** mixing medications in with coffee grounds then disposed of in the trash. Medication destruction occurs only in the presence of one (1) licensed nurse and the consultant pharmacist in the ICF/IID programs and in the presence of one (1) licensed nurse and another designated supervisory employee in the other residential programs.

Controlled medications are subject to special handling, storage, disposal and recordkeeping in the facility in accordance with federal and state laws and regulations. When a single dose of a controlled medication is removed from the container and not given for any reason, it is destroyed using the above method for non-controlled medication, in the presence of two (2) licensed nurses in the ICF/IID programs and in the presence of one (1) licensed nurse and another designated supervisory employee in the other residential programs. The disposal is documented on the accountability record on the line representing that dose.

All discontinued controlled medications of more than one (1) dose are returned to the Arkansas State Health Department. All returned medications are listed on “Form PhA: DC-1(#645048)” website: <http://www.healthy.arkansas.gov/programsServices/pharmacyservices/Pages/DrugDestruction.aspx> and returned to: Pharmaceutical Division, Arkansas State Health Department, 4815 West Markham, Little Rock, AR 72205, via certified mail phone: 501-661-2325. A copy of the form should be retained by the facility.

BATHROOM CARE GUIDELINES

Bathing, grooming, and toileting care is typically completed by Pathfinder consumers. For consumers who need assistance, direct care staff will be responsible for assisting consumers based on individual needs. A goal for the specific bathroom care will be established in the individual’s Person-Centered Service Plan (PCSP). The plan should reflect individual circumstances and potential of the consumer. The PCSP must be designed to assure that the plan will change in response to changing needs or circumstances.

Methods for bathroom care will vary and be dependent on the consumer’s level of assistance. Methods may include:

- Adaptive Equipment (hoyer lifts, shower chairs, etc.)
- Specialized Medical Supplies (pull-ups, wipes, etc.)
- Environmental Modifications (grab bars, accessible bathrooms, etc.)
- Training from occupational therapists, physical therapists, vendors
- Tripping schedules for toileting, reminders for bathing/grooming

Progress notes are maintained for services a consumer receives and will include goals in person-centered service plans. Documentation includes services rendered, dates of service, time of service, name of individual providing services, updates on progress or lack thereof, and any other pertinent information relating to the consumer or the services provided. Supervisors are responsible for reviewing these documents.

Direct care staff must ensure privacy, dignity, communication, and safety of the consumer is provided during bathroom care. Dignity, privacy, and communication during bathroom care refers to providing assistance with bathroom needs while respecting an individual’s personal space and self-worth, ensuring they feel comfortable and not exposed during a potentially vulnerable activity. It is important to maintain safety during consumer personal care by conducting regular risk assessments of the environment, clear communication, fall prevention strategies, awareness of potential hazards, and following established care plans.

ANCILLARY SERVICES

Money Management Services

Purpose

The purpose of this policy is to provide instruction and information to staff, management, and beneficiaries regarding the acceptable practices in performing and serving as representative payees and money managers for individuals with developmental disabilities who are served by Pathfinder, Inc.

Establishing Accounts

Individual checking accounts will be set up in local banks with the approved account title “consumer’s name by Pathfinder, Inc. Representative Payee”. Direct access by the consumer to the funds in the account is not permitted. Information needed to open a new account is the consumer’s name, social security number, physical address and picture identification. The Residential Manager at the facility will be a signer on the account to ensure monthly financial obligations are met and to perform money management services. The Director of Residential Programs will designate two (2) staff that shall be included as a signer on the account. All monthly bank statements will be mailed directly to the accounting department for reconciliation. Consumers will be given an informed consent to sign when they move into a facility. The consent will explain that Pathfinder will serve as Representative Payee and it will address the expenditure of funds. In addition, consumers will review their account reconciliation monthly and they will keep a copy after it has been reviewed.

Receipt of Funds

Funds received will be set up through direct deposit and include, but are not necessarily limited to Social Security funds, Supplemental Security Income funds, and funds from work. Letters from Social Security stating monthly amount will serve as proof of the monthly amount to be deposited and direct deposit vouchers from work will be kept in the client files to serve as accountability of funds received.

For those instances where direct deposit is not available a copy of the check should be placed in the client file as accountability of funds received, i.e. family contributions. The full amount of the check should be deposited without receiving cash back at the time of deposit.

Allowance/Spending Money

Consumers living in ICF/IID Programs will receive forty (40) dollars per month allowance in cash that is tracked by ledger system and signed for by client receiving allowance. Consumers living in group homes receive designated amount of spending money per week through use of debit cards/debit entry then the cash is held in a cash account folder in the office of the facility. Consumers living in apartments receive spending money on a weekly basis (amount based on weekly needs of consumer but no more than fifty [50] dollars) through use of debit cards/debit entry. To make withdrawals effective while keeping Residential Managers safe, the managers fax their allowance requests to the bank so that they can pick up the funds from a bank teller. Afterwards, the manager then disburses the funds to consumers. The consumers must sign for the money they receive. To prove accountability of the allowances, the bank will provide either withdrawal receipts with these funds or return the

allowance spreadsheet back with an authorized bank teller's initials. The spreadsheet is kept in a folder labeled "Miscellaneous Bank Withdrawals for Facilities" by the Client Accounts Bookkeeper. "Miscellaneous" is used because clients may need withdrawals for other needs that could include parties and/or events, hygienic needs or other simple desires.

Representative Payee Services

Pathfinder, Inc. received approval from Social Security to charge consumers a monthly fee for Representative Payee Services performed by Pathfinder, Inc. effective December 1, 2019. The fee per consumer is ten (10) percent of their monthly benefit or thirty-eight (38) dollars, whichever is lower. This fee is paid to Pathfinder, Inc. on a monthly basis. Each year SSA sends a letter to FFS payees (Fee for Service) notifying them of any fee increase due to the annual Cost-of-Living Adjustment (COLA).

Other Monthly Obligations

Other repetitive expenditures include rent, utilities, and groceries, medical or dental bills. Following are the methods incorporated to pay the various monthly obligations:

Debit cards: Consumers use debit cards to pay for expenses such as groceries, supplies, physician visits, meals, etc. The merchants will provide receipts for all purchases. The Residential Managers will file these receipts in alphabetical order by consumer last name. The receipts are then sent to the Client Accounts Bookkeeper where they are reviewed for accuracy. They are then filed by consumer name and the month the purchase was incurred.

Online Bill Pay: To reduce the number of checks written on a monthly basis, most utility expenses are paid online by the Client Accounts Bookkeeper. Accounts are monitored to ensure funds are available for such expenses by the Client Accounts Bookkeeper.

Bill Pay: Centennial Bank offers a "Bill Pay" system that allows consumers to pay monthly rent, Social Security FFS, and reimbursements directly to various Pathfinder, Inc. bank accounts. This system allows for a quick turnover that aids in reducing spend down amounts and increasing rental payment processing to be completed in a timely manner each month. An ad hoc reporting system is used to keep HUD Accountant and management informed of such Pathfinder, Inc. transactions.

Vacations

Pathfinder, Inc. will use a travel agency for yearly group vacations planned for consumers. Consumers reimburse Pathfinder, Inc. for such planned activities. The Client Accounts Bookkeeper will be responsible for submitting payments to reimburse Pathfinder, Inc.

The following procedures will be followed prior to making travel arrangements for a facility vacation or trip:

1. A request for the trip will be completed and forwarded to the Program Director for approval. The request should include the following:
 - Destination

- Dates of trip
 - Names of clients attending
 - Names of clients not attending
 - Names of staff attending
 - Names of staff not attending
 - All expenses listed separately by: lodging, meals, activities, etc. per person
 - Amount each client will pay
 - All expenses listed separately for each staff
 - Amount of overtime required
 - Any purchases needed for trip
2. Upon approval by the program director, the request will be forwarded to Administration for review/approval by the Chief Financial Officer and Executive Director
 3. Once the request is approved, it will be returned to the program director.
 4. No reservations or commitments should be made prior to final approval.
 5. No more than one out of state trip bi-annually will be approved.
 6. Consideration should be given to activities that can be done in state or closely surrounding areas for cost savings.
 7. Consideration should be given to the desires and abilities of the clients attending the activity.

Loaning of Funds

Beneficiary funds cannot be spent on behalf of other beneficiaries or loaned to other beneficiaries in any form. There will be no borrowing of funds between consumers.

Checks Made Payable to "Cash"

There should never be any checks made payable to "CASH" from a consumer's checking account. All checks should be made payable to the consumer for weekly allowance/spending.

Checking Account Balance Maximum

If a consumer's checking account balance reaches \$1,900 the residential manager should look at the needs of the consumer closely to determine if clothing, furniture, or other personal items are needed. Consumer's checking account balances should be kept below \$2,000.

Inadvertent Use of Debit Cards

Should there be an instance of where a consumer's debit card was used inadvertently to pay for another consumer's purchase; the Client Accounts Bookkeeper will notify the Director of Residential Programs and the Residential Manager of the error. The Client Accounts Bookkeeper will then ensure that the consumer whose card was used in error will be reimbursed with a manual check from the other consumer's account.

Receipting of Expenditures/Reconciliation Procedures

Receipts/invoices will be collected and maintained for expenditures as supporting documentation for at least

two (2) calendar years. This documentation should be complete and accurate and kept in the beneficiaries' files. Monthly bank reconciliations will be prepared on all consumers by the accounting department. The receipts should be readily available upon request. Accounting may request individual receipts or full copies of all receipts as appropriate. Periodically the Financial Analyst will perform reviews of consumers' files to ensure adequate documentation is kept in consumers' files, reconciliations are balanced, and consumer ledgers are balanced.

Reporting Responsibilities

It is the responsibility of the Residential Manager to report any changes that may affect the beneficiary's eligibility for Social Security and/or SSI including, but not limited to, starting or stopping work, assets exceeding \$2,000, the beneficiary moves to or from a hospital, nursing home or other institution, the beneficiary marries or gets divorced, if someone moves into or out of their home, etc. (Please refer to Guide for Organizational Representative payees or contact the local Social Security office for clarification).

Annual Reports are completed by the Client Accounts Bookkeeper on how the funds were used and/or saved for the beneficiary. These reports will be completed, signed, dated, and sent to the Residential Services Specialist for electronic submission. Confirmation receipts are forwarded to the Client Accounts Bookkeeper to be maintained in the consumer's financial records and kept in the consumer's master files.

Food Services

ICF/IID

All ICF/IID Homes will use a dietician/nutritionist on a consultant basis, to help assure nutritional adequacy of menus and acceptable practices of food safety and sanitation. Menus will be prepared at least one (1) week in advance and kept on file for one (1) month. Meals will reflect an approved, adequate diet that conforms to the recommended dietary allowance. Preparation of menus may be used as a teaching tool for instruction of individuals, including development of menus by individuals. Meals shall be planned so that identical meals are not served on the same day of consecutive weeks. Provisions will be made for special diets as required by individuals. Food will not be stored with toxic items.

Preschool

Food service for Preschool Services is governed by USDA guidelines. The Pathfinder, Inc. Preschool has on contract a nutritionist that works with the kitchen staff to ensure all menus meet the required components. The kitchen staff and/or catering service prepares breakfast, lunch, and afternoon snack. Students with special diets or restrictions are posted in both the kitchen and the classroom. Meals are on a four (4) week cycle. All food preparation areas are monitored by the Arkansas Department of Health. Food will not be stored with toxic items.

Adult Development

Food Service for Adult Development Programs is governed by USDA guidelines. Individuals may choose to bring their own meals or eat the meals prepared. The catering service orders food and creates menus in accordance to USDA standards for adults. Lunch is prepared and transported to the Adult Development Programs. Breakfast is

prepared on site. Individuals with special diets or restrictions are accommodated. Meals are on a four (4) week schedule. All food preparation areas are monitored by the Arkansas Department of Health. Food will not be stored with toxic items.

Group Homes

Group home supervised living facilities are responsible for ensuring that three (3) meals a day are available for residents. Take-out food is kept on hand for preparing sack lunches, if appropriate. All residents will be assessed and trained in meal planning and meal preparation skills. As appropriate, these will be reflected in the Annual Plan. Food will not be stored with toxic items.

Supervised Apartments

Residents who live in the Supervised Apartment Program will be monitored for food related skills. Basic cooking skills may be included in the individual's training program, as needed. Pathfinder, Inc. staff are available to assist clients in meal planning and preparation to enhance good nutritional diets. Food will not be stored with toxic items.

Protective and Socio-Legal Services

Assistance shall be rendered in providing advice and guidance, if necessary, by actively intervening in social and legal processes on behalf of an adult with mental or physical disabilities by:

- A. Assisting individuals to insure that they receive all of the benefits, services, and rights to which they are entitled.
- B. Referring to the proper agencies in cases of abuse or neglect of either children or adults.
- C. Providing education to the individual and to the community, as it pertains to law enforcement, local bar associations, etc., concerning the nature of developmental disabilities and the specific needs of persons with developmental disabilities.
- D. Assuring the rights mentioned above shall include assisting individuals in exercising their specific rights in obtaining:
 - Equal access to educational opportunity.
 - The right to obtain and dispose of property.
 - The right to vote.
 - The right to marry.
 - The right to have children.
 - The right to the least restrictive living environment.
 - The right to life itself.
 - The right to due process.
 - The right to a fair trial.
 - The right to choice.

Transportation Services

The Transportation Department provides transportation for consumers that are enrolled in Pathfinder programs. Pathfinder has a fleet of over 200 vehicles that are maintained by our vehicle maintenance crew. Our door to door transportation service features customized vans and small buses, with drivers trained to assist individuals with developmental disabilities.

Transportation services include (but are not limited to):

- Pick-up and delivery of individuals to and from our Preschool and Adult Development Day Treatment Programs
- Transportation for individuals who live in our Residential Facilities
- Transportation for individuals in Waiver Services
- Transportation for Grounds Maintenance Services and Building Maintenance Services
- Transportation for individuals in Supportive Employment
- Transportation for individuals that are enrolled in Pathfinder yet have outside employment

Pathfinder employees will secure and protect sensitive confidential active records while transporting by: Ensuring that information about the records is entered into the Sensitive Confidential

- Active Record Tracking Log before and after transporting
- Information will not be removed from the transportation binder
- Records will be kept with the driver at all times.
- Records will not be left unattended in public areas.
- Employees will take the most direct route to the destination and avoiding stops in transit if possible, limiting the access to records by unauthorized individuals

PRESCHOOL SERVICES

Purpose

Pathfinder, Inc. is an approved provider of Early Intervention Day Treatment (EIDT). Pathfinder, Inc. Preschool serves children ages six (6) weeks to five (5) years of age who demonstrate developmental delays. The Preschool Program is designed to meet the needs of each child and provide instruction that is developmentally and individually appropriate.

Philosophy

All people, regardless of individual differences and intellectual abilities, have an inalienable right to an education which is consistent with their needs and helps them to achieve their maximum potential.

Educational Philosophy

We believe that children have the right to a nurturing, safe environment where they can feel comfortable and secure. We believe that children have a right to develop to their maximum abilities and that teachers have the

responsibility to provide opportunities for this development to occur.

We recognize that each child is an individual and that each child must be allowed to develop at his or her own pace. We accept and respect differences between children including developmental, physical, racial, and ethnic differences. Every child, regardless of sex, race, religion, or ethnic origin must have the same opportunities and advantages as every other child.

We believe that each child has the right to a positive self image to feel good about who they are. We hope that in treating each child with love and respect that they in turn will learn to treat others with the same love and respect.

Finally, children learn best through active participation with their environment and the teacher's job is to provide a variety of opportunities and experiences to promote growth in all areas. We will strive to thoughtfully plan activities that meet the needs of every child which follow early childhood developmental principals.

Funding Sources

Pathfinder, Inc. Preschool receives funding from the following sources: SSI, TEFRA, MEDICAID, TITLE 19, and EIDT.

Population Served

Pathfinder, Inc. Preschool serves children ages six (6) weeks to five (5) years of age who demonstrate developmental delays. The Preschool Program is designed to meet the needs of each child and provide instruction that is developmentally and individually appropriate.

Educational Goals

Personal and Social Skills

- Provide opportunities for children to grow as individuals and experience feelings of self worth.
- Promote a healthy self concept by encouraging the development of trust and security.
- Encourage the development of independence and self help skills.
- Encourage the development of social skills such as cooperation and respect for others.
- Encourage the interaction of children with other children and adults in small and large group settings.

Language

- Encourage children to develop the verbal skills necessary to communicate feelings, thoughts, and needs.
- Expose children to an accepting environment rich in language opportunities during the development of listening skills.

Physical Growth

- Provide a safe, secure environment in which children can explore the space around them and learn to use their bodies with control.

- Provide children with a variety of opportunities to practice fine and gross motor skills according to each child's developmental needs and abilities.

Active Learning

- Offer children a variety of activities that aid in their intellectual and cognitive growth.
- Allow children to actively explore the attributes and functions of materials with all their senses.
- Encourage the discovery of relations through direct experiences.
- Provide opportunities for predicting problems and devising ways to solve them.
- Encourage the development of creativity and imagination.

Eligibility

Children will be determined eligible for day habilitation services by demonstrating a significant delay in two (2) areas of development. Children zero (0) to two (2) years of age must demonstrate a 25% delay in two (2) domains on the developmental assessment and qualify for at least one (1) therapy service. Children three (3) to five (5) years of age must demonstrate a -2.00 standard deviation delay in two (2) domains on the developmental assessment and qualify for at least one (1) therapy.

In addition to the testing results, a child's medical and behavioral needs will be considered to ensure that day habilitation services are most appropriate for the child.

Application

Before a child can be admitted and enrolled, an active Medicaid/TEFRA number and a "Medicaid Referral Form", completed and signed by the child's Primary Care Physician, must be submitted. It is necessary that the following items be completed and/or submitted for review also:

- A. Patient Intake Form
- B. Child's Records Form
- C. Birth Certificate
- D. Emergency Information Form
- E. Consent to Treat Form
- F. Social Security Card
- G. Consent for Release of Information Form
- H. Third Party Coverage Record
- I. Updated Immunization Records
- J. Current EPSDT or health check (physical)
- K. Official legal court documents addressing custodial rights
- L. Other pertinent information not listed may/can be requested

The admission/enrollment process is non-discriminative with regard to race, ethnicity, national origin, gender, sexual orientation, or religion

Certified custody orders must be provided during the enrollment process. Any changes in custody orders

throughout the year should be submitted to the Preschool immediately.

Pathfinder, Inc. cannot deny parent(s)/guardian(s) the right to pick up a child unless there is a court order on file at the center. It is important this information remains updated.

Initial Screening

All children referred for day habilitation services at Pathfinder, Inc. Preschool will initially be given a developmental screening by a third (3) party assessor that evaluates the child in the five (5) main areas of development: personal social skills, adaptive behavior, language, motor (gross and fine), and cognition. The results of the screening will determine whether a child should be referred for further testing and/or day habilitation. A written prescription for specialized testing and day habilitation services must be sent to the child's primary care physician (PCP) and received back by the center. After testing is completed, the child's PCP must review the plan of care and write a prescription for the recommended/accepted therapy and services.

Intake

If it is determined that a child is eligible and a referral to receive day habilitation has been received by the PCP, the child is assigned to a classroom. Additionally, a referral/programming conference is held in order to coordinate and plan the services and provide the parent(s)/guardian(s) with pertinent information. If any therapies are necessary for the child, referrals will be made. If therapies are required, an amendment to the child's plan will be made in a timely manner to include the appropriate therapy plans.

Discharge

Students will be discharged for the following:

- A. Failure to meet DDS/CHMS (Child Health Management Services) eligibility criteria for disability funding
- B. Failure to maintain funding
- C. Failure to maintain medical information
- D. Absence for more than ten (10) consecutive days without giving proper notice (i.e., vacation or doctor's note)
- E. Doctor's orders due to a health condition
- F. Reaching public school age
- G. Determination by the team that Pathfinder, Inc. Preschool cannot provide the necessary services to promote a child's learning or medical needs
- H. Behaviors of such an alarming nature after behavior modifications and interventions have been exhausted
- I. Behaviors have become a danger to himself/herself or others
- J. Parent(s)/guardian(s) request
- K. Team Request
- L. Ineligible for services

Ineligibility

If a child receives a yearly evaluation that demonstrates that he/she is no longer qualified for the Preschool Program, a letter is sent home to the parent(s)/guardian(s) of the child informing them. The letter details why the child no longer qualifies, the date the services will end, and a date for the discharge conference. If a parent/guardian does not attend the discharge conference, the child's discharge date remains the same and the original letter sent to the parent(s)/guardian(s) serves as the team decision. Parent(s)/guardian(s) have the right to appeal the decision under the appeal process stated in Community Program and Certified Providers Complaint/Resolution Review and Process Policy 1010 and Developmental Disability Services Appeal Process Policy 1076.

Individualized Plan of Care

Evaluation

Depending upon the child's needs, specialized testing may include a developmental evaluation, a formal hearing screening, a speech language therapy evaluation, an occupational therapy evaluation, a physical therapy evaluation. The following professionals may assess the child: An Early Childhood Developmental Specialist (ECDS); an Audiologist, an Occupational Therapist, a Speech Language Pathologist, and a Physical Therapist. A child's functionality in vision and hearing must be considered as a part of the assessment process. Additionally, the child will be assessed in their native language. The professionals will use a combination of standardized, norm referenced testing and criterion referenced testing as well as parent/guardian interview and observation to determine eligibility. All tests used will be reliable measures given by the appropriate professionals and accepted instruments as outlined in the EIDT, and Medicaid manuals.

Professionals who conduct formalized testing will complete an evaluation report containing the following information: date(s) of evaluation, assessments given, medical/social history, clinical observations, strengths and needs of the child, evaluation scores, recommendations for services (nature, type, frequency), and eligibility determination.

Individual Treatment Plan

The child's individual treatment plan will be created by the child's team members, including (but not limited to), the child's parent(s)/guardian(s), early childhood developmental specialist, and therapy providers. Other professionals/stakeholders may be needed or be a part of the child's conference. The individualized plan of care must be reviewed quarterly and re-written at an annual review after updated testing is completed. A child's progress will be closely monitored by the professionals involved in the plan of care through data collection, observations, and progress notes.

Reassessments

Children must be re-assessed at least annually and eligibility must be re-established each year

Attendance and Absences

Hours of Operation

Children will not be allowed in the building before 7:30 A.M. and all children should be removed from the building by closing time at 4:30 P.M.

Days of Operation

The Preschool operates year round, Monday through Friday, with the exception of the following holidays: New Year's Day, Martin Luther King Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and the following Friday, and Christmas Day. When additional holidays are observed and the Preschool is closed, parent(s)/guardian(s) will be notified in writing and given advanced notice of the closing.

Authorized Pick Up/Drop Off

The Preschool requires that every child be escorted into and outside of the building by a parent/guardian of at least eighteen (18) years of age. The individual picking up the child must be listed on the "Authorized Pick Up List" in order to drop off or pick up a child. In a situation where special circumstances arise, a parent/guardian must notify the Director in writing stating that someone not included on the "Authorized Pick Up List" will be picking or dropping off the child. Photo Identification will be required in order to verify that the person picking up the child is either on the "Authorized Pick Up List" or has special written permission to ride home with the individual from a parent/guardian.

Arrival

Children may arrive at the Preschool from 7:30 A.M. to 8:30 A.M. Because of the daily schedules and routines of each classroom, it is mandatory that each student arrive to the Preschool by 8:30. Instructional time will begin at this point and late entries can be distracting and disruptive to other students.

Tardiness

Children who arrive after 8:30 A.M. will not be permitted to attend school that day. Exceptions will be permitted in the instance of an appointment with accompanying documentation and/or emergencies. If a child is going to be late due to an appointment or an emergency, a parent/guardian should call the office ahead of time to make the staff aware of the late arrival.

Sign In/Out

It is mandatory that each day a child is signed "in" upon arrival to the center and signed "out" when departing from the center. On the "*Sign In/Sign Out Form*", the following information should be completed: arrival time, departure time, signature of person bringing or departing with child. Only those who are authorized to pick up will be able to sign a child out.

Departure

Children should be picked up from the Preschool by 4:30. When a child remains at the Preschool after this time,

the parent/guardian is charged \$1.00 per minute that the child remains at the center in the care of the Preschool staff. This late fee must be paid upon arrival the day of occurrence or the following day. If the fee is not paid within this time frame, the child will be temporarily discharged from the program until the balance of the late fee has been paid. Although the Preschool understands that unforeseen circumstances may occur, a late fee will be issued in all circumstances. If a child remains at the Preschool one (1) hour past closing time and attempts to contact a parent/guardian have failed, the police will be contacted and a report will be made to Child Protective Services to report the child as “abandoned”. Excessive abuse of this policy can result in a child’s discharge from the center. Violations are subject to termination.

Attendance

Each child must attend every day after enrollment into the Preschool program. Each child’s attendance is closely monitored to ensure that they are attending daily. Regular attendance in the Preschool Program is important in order to accustom children to a regular and consistent schedule. In order to provide services to families with the greatest need, services to families may be discontinued based upon non-compliance with the attendance policy.

Absences

If a child is not going to be present, the parent/guardian should call the school prior to 8:00 A.M. the day of the absence. The parent/guardian must call the school and speak to a Preschool staff member or leave a message containing the following information: child’s first and last name, date of absence, and reason for absence. If an absence is not reported by 8:00 A.M., the absence will be recorded as unexcused.

Excused Absences

An absence due to the one (1) of the following reasons, and with the required supporting written documentation, is considered excused:

- A. The child was ill or the child’s attendance could jeopardize the health of other students. (Requires written documentation supporting absence in order to be excused.)
- B. The child’s immediate family member died or was seriously ill.
- C. The child was observing recognized holiday’s observed by their faith. (Requires prior approval from Director.)
- D. The child was attending an appointment with a government agency.
- E. The child was attending a medical or dental appointment. (Requires written documentation supporting absence in order to be excused.)
- F. Exceptional circumstances prohibited the child from attending. (Requires prior approval and written documentation supporting the absence in order to be excused.)

Unexcused Absences

Unexcused absences are absences that are not defined in the above “Excused Absences” section or do not have the accompanying documentation that is required.

- A. A child with an illness that lasts more than ten (10) days without verification by a medical doctor.

- B. The child did not want to go to school.
- C. The parent/guardian overslept.
- D. The child was absent without a specific reason/explanation given.

Ten (10) days of unexcused absences in a fiscal year will subject a family to termination of their child/children's services.

Safety

The safety of children in the Preschool Program is priority. After children have arrived for the day, all entrance and exit doors to the facility are locked and remained locked throughout the day.

Inclement Weather

During inclement weather, the Preschool will contact the three (3) major Little Rock television network stations (KARK, KATV, KHTV) to announce closings. On the television screen, the Preschool will be represented by the title "Pathfinder Schools". This message will cover Preschool Day Service Program and transportation to/from the Preschool Day Service Program. Dial My Calls will issue an announcement through provided telephone numbers.

When school is in session and inclement weather is pending or present, our normal procedure is to consider the decisions of local school systems within the area before making a decision to close. However, Pathfinder, Inc. reserves the right to remain open and continue day services when conditions warrant, regardless of the decisions of local schools. The Preschool will make every effort to open on time and remain open during inclement weather. However, in the case of extreme road conditions, it may be necessary to delay opening or close early in order to ensure the safety of families and staff.

Children's Services

Therapy

Therapy is an important aspect of the program. It is one (1) of the unique components of the Preschool and has greatly contributed to the overall success of the program.

Therapy services are provided for children who qualify for day habilitation services and meet eligibility requirements for therapy. Services available include occupational therapy, physical therapy, and speech therapy provided by licensed professionals.

Therapists work together in teams, along with classroom staff, to develop and carry out programming activities individualized for each child's specific needs. Our goal is to help each child learn to function as independently as possible before they leave for kindergarten.

Therapy is delivered using the following models:

- Individual therapy that is integrated into classroom activities
- Pull out individual therapy that is used based upon students' needs and limited time duration

Occupational Therapy

The objective of the Occupational Therapy Department is to help our students learn to perform activities of daily living as independently and safely as possible. Our therapists work to improve the development of fine motor and visual skills necessary for playing, writing, dressing, and other self-help skills. Areas targeted include sensory integration, upper extremity strength, range of motion, coordination, visual motor and visual perceptual skills, organizational skills, and handwriting.

Physical Therapy

The goal of the Physical Therapy Department is to encourage the development of our students' gross motor skills to enable them to become as independently mobile as possible. Areas targeted include gross motor strength and range of motion, balance and coordination, and posture and gait. Splinting, casting, orthotics, and specialized seating and positioning may be utilized.

Speech/Language Therapy

The Speech/Language Therapy Department works to develop and enhance our students' communication skills. Areas targeted include receptive language, expressive language, articulation, pragmatics or social language, oral motor/feeding skills, and the development of augmentative/alternative communication systems for those who cannot rely on speech alone.

Medication Monitoring and Administration

The Preschool Program will administer medications to children with written authorization from the parent/guardian on a "Request to Administer Medications Form" and the written order from a primary care physician (PCP) or medical director. Medications for children served in the Preschool Program will be checked and secured by the licensed nurse at the Preschool Program. Medications are stored in a designated location in the nurses' office that is inaccessible to children. The licensed nurse will administer medications to persons served as prescribed per physician's written order and in compliance with the laws governing licensed nurses within the state of Arkansas. Only licensed nurses will administer medication (prescription and non-prescription). The licensed nurse will document the medication administration on the Medication Administration Record (MAR). All prescribed medications must be in the original container in which it was prepared by the pharmacy with an unaltered label that states: the name of the medication, date, consumer name, prescribing physician and contact number, dispensing pharmacy and number, instructions for use, and dosage including strength and frequency. Any changes in medication, medication schedule, and/or dosing must be submitted in writing from the health care provider or in the form of a new prescription. This information can be faxed to (501)-533-6324. The Preschool will not accept verbal orders from a parent/guardian to change medications. A copy of all side effects and drug interactions will be kept in the consumer file. All medications will be checked in, secured, and locked to ensure the safety of all consumers. Medications requiring refrigeration and/or protection from light will be secured and stored appropriately. A parent/guardian will be contacted to pick up remaining prescriptions for disposal. The Pathfinder, Inc. Preschool will not dispose of medications at the facility.

Food Services

Breakfast, lunch, and snacks are served every day to each child during a designated time of the day. Each meal and snack menu is supervised by a certified nutritionist and meets all USDA/FDA Food Program regulations.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communications for program information (e.g. Braille, Large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form (AD-3027) found online at http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington D.C. 20250-9410; fax (202) 690 7442; or email: program.intake@usda.gov. This institution is an equal opportunity provider.

It is the responsibility of the parent(s)/guardian(s) to feed the child breakfast in circumstances when the child will be arriving to the Preschool after the designated time for breakfast/snack. Unfortunately, staff are not available to assist in this situation due to the start of classroom instruction and compliance with child to staff ratios.

Special diets need to be discussed with the School Nurse or Kitchen Supervisor before and throughout the enrollment period of the child. Any food allergies need to be noted by written documentation from the child's physician or allergist. These allergies will be posted in the classroom and in the kitchen. The Preschool is not allowed to serve food to a child that is prepared from someone's home. Store bought products for special occasions are acceptable and are addressed in further detail in the "Special Occasions" section.

Parent(s)/guardian(s) of infants may supply formula and/or food for their child. Please label such items with the infant's full name. Any changes to a child's diet need to be at age appropriate intervals or ordered by the child's PCP with written documentation supporting the diet change.

If a child requires thickened liquids, written documentation from the child's health care provider will be required. If a swallow study has been performed, the Preschool should be given a copy of the results. Parent(s)/guardian(s) are responsible for providing thickening products.

Pathfinder, Inc. Preschool is a "peanut free" facility. Some products used in preparation of meals may contain peanut or peanut products or be manufactured in a facility that is not a "peanut-free" facility.

Transportation

Transportation is available upon request. Some restrictions apply based on the distance or medical needs of a child. When a van placement is approved, a parent/guardian will receive an approximate time of van arrival/departure to/from the home of the child. Alternate destinations can be arranged with five (5) days' notice. Upon arrival to destination for "pick-up" of the child, the van will make its presence known and wait no more than three (3) minutes for the child to load the van. This is to help the vans stay on schedule to pick up other children who are assigned to the van route.

- A. Each child is signed on and off the vans by someone over the age of sixteen (16).
- B. All changes in information should be placed in writing for both Transportation and the Preschool and submitted to both locations.
- C. All children should be ready for the van at the arranged time by Pathfinder, Inc. Transportation.
- D. If a child is unable to attend, a parent/guardian is to contact Pathfinder, Inc. Transportation at 501-982-1885.
- E. If your child is absent for three (3) or more consecutive days, a parent/guardian will need to contact the Preschool to resume services.
- F. All children's belongings must be labeled with the child's full name.
- G. If a child is not riding the van in the afternoon, the Preschool must be contacted no later than 2:45 P.M.
- H. Food and drinks on vans must be approved by the Transportation Director.
- I. Current contact information must be on file with the Transportation Department at all times.
- J. It is the responsibility of a parent/guardian to ensure that someone over sixteen (16) is at the destination to receive the child when delivered. The Preschool Late Fee Policy will apply if no one is at the destination to receive the child.

All transportation inquiries are coordinated through Pathfinder, Inc. Transportation Office located in Jacksonville, Arkansas. The contact number is 501-982-1885.

BEHAVIOR MANAGEMENT-PRESCHOOL

Conscious Discipline

The Preschool Program staff are trained in the process of Conscious Discipline. This involves instructing children as to what they should do rather than what they cannot do. For example, children who are running inside the building are instructed "we should walk inside the building", rather than "do not run in the building".

This has a positive effect on improving the behaviors of children. Toddlers begin to learn self-control by observing the natural consequences of their behavior. Teachers will quickly intervene if a problem does occur and redirect the child to a more appropriate activity. Language is utilized to help toddlers begin to identify their feelings and learn to deal with them in a manner that is socially acceptable.

Preschoolers will be encouraged to learn problem solving skills and the ability to self-correct. They will be given the opportunity to choose alternatives that will enable them to participate in a socially acceptable manner without reinforcing negative behavior. For example, if a child is having difficulty sitting quietly during a story,

he/she will be asked to do a puzzle or draw a picture until he/she feels ready to rejoin the group. Teachers will assist in pointing out logical consequences to both positive and negative behavior.

Staff members will use positive enforcement while supervising children, encouraging them to cooperate and continue using appropriate behaviors. Children will be redirected to an alternate activity if their behavior continues to be inappropriate. This redirection will occur in instances where a child is a danger to their own safety or others safety or when the child is destroying property. Individual behavior plans will be implemented if a child's behavior becomes unmanageable. If this becomes necessary, parent(s)/guardian(s) will be consulted in order to help develop and implement a behavior plan.

Behavior Guidance

Behavior guidance shall be: individual and consistent for each child, appropriate to the child's level of understanding, and directed toward teaching the child acceptable behavior and self control.

Physical punishment shall not be administered to children. The length of time a child is placed in time out shall not exceed one minute per year of the child's age.

Acceptable behavior guidance techniques include:

- A. Look for appropriate behavior and reinforce the child with praise and encouragement when they are behaving well.
- B. Remind the child on a daily basis of the rules by using clear, positive statements regarding how they are expected to behave rather than what they are not supposed to do.
- C. Attempt to ignore any minor inappropriate behavior and concentrate on what the child is doing properly.
- D. Use brief supervised separation from the group only when the child does not respond to a verbal command which instructs the child as to how he or she is supposed to behave.
- E. When a misbehaving child begins to behave appropriately, encourage and praise small steps rather than waiting until the child has behaved for a long period of time.
- F. Attend to the children who are behaving appropriately and other children will follow their example in order to obtain attention.

The following activities or threats of such activities are unacceptable as behavior guidance measures and shall not be used for children. These include, but are not limited to, the following:

- A. Restraints (Restraining a child briefly by holding the child is allowed when the child's action place the child or others at risk of injury.)
- B. Washing mouth with soap
- C. Taping or obstructing a child's mouth
- D. Placing unpleasant or painful tasting substances in mouths, on lips, etc.
- E. Profane or abusive language
- F. Isolation without supervision
- G. Placing child in a dark area

- H. Inflicting physical pain, hitting, punching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.
- I. Yelling (This does not include a raised voice level to gain a child's attention to protect the child from risk of harm.)
- J. Forcing physical activity such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
- K. Associating punishment with rest, toilet training, or illness.
- L. Denying food (lunch or snack) as punishment or punishing children for not eating. Children should not be forced or bribed to eat.
- M. Shaming, humiliating, frightening, labeling, and physically or mentally harming children.
- N. Covering the faces of children with blankets or similar items.

Behavior guidance practices used by the center shall be discussed with each child's parent(s)/guardian(s) and provided to them in writing at the time of enrollment with a copy signed by a parent/guardian maintained in the child's record. The Preschool has adopted the Conscious Discipline Practices of Dr. Becky A. Bailey.

Infant and Toddler Behavior Guidance

- A. Time out shall not be used for children under two (2) years of age.
- B. The child may be placed in a supervised area away from the group or in a crib or playpen while staff attends to the situation. Brief separation from the group is acceptable when the child's behavior places the child or others at risk of harm. (Example: A child who has bitten another child will be removed from the group, briefly, while staff attends to the bitten child.)

Programming

Classroom

Each classroom is set up with regard to what is most conducive for optimal early childhood development for children with special needs. The classrooms are operated by Certified Early Childhood Special Education teachers and managed by teaching assistants.

Learning Through Play

The Preschool understands that children learn through play. Therefore, children are encouraged to choose freely from a wide range of play and learning experiences. In doing so, this approach affords the children the opportunity to recognize, understand and express their own emotions as well as sympathize with the emotions of others. The variety of experiences may include the development of self-discipline/control, positive self-image, intellectual and physical skills, small and large group activities as well as social and adaptive skills.

Curriculum

Each classroom is equipped with a comprehensive curriculum from the Arkansas Department of Health and Human Services, Division of Child Care and Early Childhood Education: Adventures for Toddlers, Infant, and Toddler Family Connection, Adventures in Learning, Handwriting without Tears, the STAR Program, and STAR

Autism Program. The curriculum provides foundations that allow the Preschool staff to build on each child's individual need. The core components of the program work intensively on language development using a multi-sensory, hands-on approach. Structures lesson plans involve activities that are developed around children's literature. The activities are taught to assist children with motor, play, social, problem solving, memory, and vocabulary skills.

Outside Play

Outdoor gross motor play is an important extension of the classroom. Outdoor play is scheduled every day, if conditions permit. Every child is expected to participate. Daily active outdoor play is essential for the health and well-being of young children and is a requirement of child care licensing. As a central part of the program, all children will go outside when the weather, air quality, and environmental safety conditions do not pose a health risk as determined by local weather advisories. Teachers and directors consider the temperature, humidity, precipitation, and wind chill factors when determining the suitability of outdoor play on a given day. Children who are too ill to participate in outdoor play should remain at home for the day. In order for a child to be excused from outside play, a doctor's note must be provided. All children should be dressed appropriately for the weather.

Rest Time

Rest time is scheduled daily. The requirements set forth by licensing are scheduled within the child's day. Toddlers are scheduled for rest according to regulations following their lunch schedules. Pathfinder, Inc. Preschool provides cribs for children birth to eleven (11) months and cots or mats for children twelve (12) months to three (3) years for the children to rest on. Parent(s)/guardian(s) are to supply a fitted crib sheet for their child's cot/mat and a blanket to make it more comfortable for the child. The child's name should be placed on all items sent to school including sheets and blankets.

Toilet Training

Most children show signs of readiness to begin toilet training between eighteen (18) months and three (3) years of age. Signs to look for in a child who is ready to potty train include staying dry for at least two (2) hours at a time, regular bowel movements, being able to verbalize the need to toilet, being uncomfortable with wet/soiled diapers, and following simple instructions. Toilet training with preschool children should be a collaborative effort between home and school. A parent/guardian should inform the Preschool when they are ready to begin the training process so that the Preschool staff can begin working with the child. Toilet training will be done in a relaxed manner with the cooperation of the family. The child must be kept in pull-ups or 5-ply training pants at all times. Children should not be sent to the Preschool in underwear until he/she has fully mastered staying dry during naptime/bedtime routine. When the Preschool notices that a child might be prepared to begin toilet training, staff will speak with a parent/guardian about beginning the process.

It is important to realize that there is no rush to begin toilet training. Potty training a child before he/she is ready can prolong the process.

During toilet training, it is essential that parent(s)/guardian(s) provide the Preschool with the following: three (3)

changes of clothing per day, an adequate supply of pull-ups per day, and clothing that can be easily pulled up and down by the child to learn the skill and work on gaining independence in the toileting process.

Community Involvement

Pathfinder, Inc. Preschool encourages community and parent/guardian involvement through events such as our yearly open house and two yearly family picnics. Open house consists of parent/guardian involvement in attendance and preparation. Various businesses throughout the community also attend our open house offering parent(s)/guardian(s) information pertaining to the issues they may be dealing with regarding their child and extracurricular activities that assist in promoting their child's development. Throughout the school year, various monthly activities are also provided for our children (based on monthly themes) that promote both parent/guardian involvement and community involvement. For example, a petting zoo is brought to the school for children and parent(s)/guardian(s) to enjoy and experience together and learn about various animals. Additional activities include the police and fire departments visiting children during community helpers' month and dental services being brought to children to provide dental screenings at no charge to the families. A yearly calendar is given to all parent(s)/guardian(s) at the beginning of each school year displaying the dates of each monthly event(s).

Special Occasions

The Director or Director's designee must first approve any celebrations or special occasions that take the children away from the daily curriculum. These celebrations will be planned after lunch to allow the children to eat their breakfast and lunch. Only food items/products that are prepared in the cafeteria or bought at the store will be served to children during these special occasions. Parent(s)/guardian(s) are always welcome to attend any special occasions that are coordinated by the Preschool.

Supplies

Parent(s)/guardian(s) are asked to provide at least one (1) complete extra set of clothing for their child. Clothing should be clearly marked with the child's name and updated to match the season/temperature. For infants and children in diapers, parent(s)/guardian(s) must provide disposable diapers and wipes. Children should be dressed in clothing that is manageable and will not be a hindrance in play activities. The Preschool encourages exploration, discovery, and sensory play that can be messy; therefore, it is requested that parent(s)/guardian(s) dress children in easily washed items. Children do wear paint smocks during art/sensory activities; however, there are times when clothing can still get dirty. For health and safety, children should wear comfortable, yet sturdy, shoes. Flip-flops are not considered appropriate, safe footwear.

- *Infants:* Crib sheet, blanket (if desired), feeding supplies, disposable diapers, wipes, extra set of clothing
- *Toddlers:* Crib sheet, blanket, pillow, , disposable diapers (if needed), wipes (if needed), extra set of clothing
- *Preschoolers:* Crib sheet, blanket, pillow, disposable diapers (if needed), wipes (if needed), extra set of clothing.

A supply list noting additional supplies will be given to a parent/guardian of each child. All items including

backpacks and diaper bags should be labeled with the child's name. The Preschool cannot be responsible for any lost article of clothing or personal belongings.

Personal belongings

To avoid personal belongings from getting lost or broken, the Preschool asks that children not bring toys from home except for special projects or activities. Any belongings brought from home should be clearly marked with the child's name.

Communication

Purpose

Communication between the child's home and the Preschool is extremely important in order to ensure the success of the child. Pathfinder, Inc. provides many opportunities for parent(s)/guardian(s) to receive information on the progress of their child and any activities or upcoming events at the Preschool. The following are types of communication between parent(s)/guardian(s) and the Preschool.

Daily Reports

A daily report will be prepared if requested by the parent/guardian. This will provide parent/guardian with an overview of the child's performance throughout the day. Information on meals, toileting, sleep, and child's overall mood will be included on the form.

Quarterly Progress

Quarterly progress notes are completed on each child that qualifies for day habilitation. Children ages zero (0) to three (3) will receive progress reports at three (3) month intervals from the Initial Individual Family Service Plan (IFSP). Children ages three (3) to five (5) will receive progress notes in March, June, September, and December. Parent(s)/guardian(s) will be issued two (2) copies of the progress notes at each quarter. One (1) copy is for the parent/guardian to keep as part of their personal records and one (1) must be signed by the parent/guardian and returned to the school. Parent(s)/guardian(s) are encouraged to make comments on these reports as they deem such necessary.

Conferences

Each conference convened will include parent(s)/guardian(s) and the child's interdisciplinary team which may include, but is not limited to, the service coordinator, certified teacher, therapists, nurses, social workers, and specialists. The Preschool recognizes the parent(s)/guardian(s) as an integral component of a child's learning and development; therefore, it is mandatory that parent(s)/guardian(s) attend the conference and sign off on their child's treatment plan. Failure to attend conferences can result in the child's temporary discharge. The time frames of these conferences are mandated by Developmental Disability Services (DDS), and the Preschool is required to adhere to these timeframes to maintain compliance.

Annual Conferences

Conferences for children zero (0) to three (3) years old are held twice (2) annually. Conferences for children three (3) to five (5) are held once (1) annually unless the team deems it necessary or a conference is called at the request of the family. The conference will summarize each child's progress in our program. Conferences are scheduled according to each child's individual start date.

Transition Conferences

Transition conferences are held at two different phases: when a child turns three (3) years of age and when a child reaches public school age. These conferences are intended to assist the parent(s)/guardian(s) prepare and plan for the transition of the child to the Early Child Program at age three (3) and public school at age five (5).

Ineligibility Conference

If a child receives a yearly evaluation that demonstrates that he/she is no longer qualified for the Preschool Program, a letter is sent home to the parent(s)/guardian(s) of the child informing them. The letter details why the child no longer qualifies, the date the services will end, and a date for the discharge conference. If a parent/guardian does not attend the discharge conference, the child's discharge date remains the same and the original letter sent to the parent(s)/guardian(s) serves as the team decision. Parent(s)/guardian(s) have the right to appeal the decision under the appeal process stated in Community Program and Certified Providers Complaint/Resolution Review and Process Policy 1010 and Developmental Disability Services Appeal Process Policy 1076.

Written Communication

Information about upcoming events and activities are posted in the lobby and classrooms and sent home with children. Please check your child's book bag each day for written correspondence from the Preschool.

Parent/Guardian Surveys

Parent/guardian input into the Preschool Program is very valuable. Input is gathered through annual surveys.

Questions or Concerns

During the hours of operation of the Preschool, teachers and staff are responsible for the direct supervision of the children in their care. Because of this, these individuals providing direct services may not be available to speak on the phone during instructional or treatment hours. Individuals will be asked to leave a message and the call will be returned as soon as possible. In addition, the parent/guardian may arrange to have a telephone conference or meeting scheduled. If a parent/guardian wishes to have questions or concerns addressed immediately, he/she may ask to speak to the Director or Service Coordinator.

Rights

Individual/Parent/Guardian Rights

Rights include, but are not limited to the following:

1. Client/parent/guardian have input into the program plan, and sign the plan.
2. Client/parent/guardian are aware that the program is voluntary.
3. Client/parent/guardian participation in campaigns for publicity efforts to raise funds for the organization is on a voluntary basis.
4. Client/parent/guardian have input into the rules of conduct utilized by the facility including a grievance procedure.
5. Client/parent/guardian is informed of the rights of majority.
6. Client/parent/guardian have the right to refuse any experimental or non-standard form of treatment.
7. Client/parent/guardian is informed of the confidential nature of all client information and the right to approve or deny the release of identifiable information.
8. Client/parent/guardian have the opportunity to observe the organization and discuss needs before enrollments.
9. The organization shall provide upon request a summary of any monitoring or evaluation reports of their facility prepared by or received from federal, state or local authorities.

United States Constitutional Rights

1. The right of freedom of speech and expression
2. The right of freedom to religion
3. The right to association
4. The right to marry, procreate, and raise children
5. The right to vote
6. The right to meaningful and fair access to courts, including legal representation
7. The right to contract and the right to own and dispose of property
8. The right to privacy
9. The right to be free from cruel and unusual punishment
10. The right to equal protection and due process of law
11. The right to fair and equal treatment by public agencies
12. The right to an equal educational opportunity
13. The right to have residential and educational services provided in a humane and least restrictive environment
14. The right to meet civil and legal responsibilities

Rights of Individuals with AIDS, HIV, or Hepatitis B

Individuals with AIDS or an HIV related condition (or those who may be perceived as having AIDS or AIDS related condition) are not discriminated against in accordance with 29 U.S.C. 706(8), 784(b); U.S.C. 12101 et. Seq. Each individual/parent/guardian shall be provided a copy of this procedure.

Pathfinder, Inc. will protect the confidentiality of records or computer data which is maintained related to Hepatitis B, HIV, or Aids.

Ineligibility

If a child receives a yearly evaluation that demonstrates that he/she is no longer qualifies for the Preschool Program, a letter is sent home to the parent(s)/guardian(s) of the child informing them. The letter details why the child no longer qualifies, the date the services will end, and a date for the discharge conference. If a parent/guardian does not attend the discharge conference, the child's discharge date remains the same and the original letter sent to the parent(s)/guardian(s) serves as the team decision. Parent(s)/guardian(s) have the right to appeal the decision under the appeal process stated in Community Program and Certified Providers Complaint/Resolution Review and Process Policy 1010 and Developmental Disability Services Appeal Process Policy 1076.

Transition

Pathfinder, Inc. provides services aimed at improving a child's transition from one program to the next.

Early Intervention Program

At the age of three (3), children transition from the Early Intervention Program to the Early Childhood Program. The following steps are followed:

1. A letter will be sent prior to a child's third (3) birthday
2. A transition planning conference is conducted shortly after the child's third birthday.
3. By the age of thirty-five (35) months, an Individualized Treatment Plan (ITP) conference must be conducted. If the child is eligible for the Early Childhood Program, the conference will be held with the child's area Coop to change paperwork. If a child is not eligible for the Early Childhood Program, the family will be provided options of alternate placement for the child.

Public School

At approximately five (5) years of age, children transition from the Early Childhood Program to public schools. The following steps are followed:

1. A referral is made to the public schools approximately six (6) months before August discharge (typically around February).
2. A referral conference is held with the public school, Pathfinder, Inc. Preschool, and the child's parent(s)/guardian(s) in the months of April and May. Each member of the team will provide input.
3. Before the end of the school year, parent(s)/guardian(s) are encouraged to visit the placement school that the child will be attending in the fall.
4. Signed releases will be necessary in order to ensure a smooth transition between Pathfinder, Inc. and the new school.
5. Discharge report(s) and copies are sent home to the family for their personal records.

Discharge Criteria

Students will be discharged for the following:

1. Failure to meet EIDT eligibility criteria for disability funding
2. Failure to maintain funding
3. Failure to maintain medical information
4. Absence for more than ten (10) days in a month without giving proper notice (i.e., vacation or doctor's note)
5. Doctor's orders due to a health condition
6. Reaching public school age
7. Determination by the team that Pathfinder, Inc. Preschool cannot provide the necessary services to promote a child's learning or medical needs
8. Behaviors of such an alarming nature after behavior modifications and interventions have been exhausted
9. Behaviors have become a danger to himself/herself or others
10. Parent(s)/guardian(s) request
11. Team Request
12. Ineligible for services

SUPPORTED EMPLOYMENT PROGRAM

Purpose

Supported Employment is a service provided to consumers to assist them in obtaining and maintaining employment in an integrated, community worksite. The Supported Employment Department will assess, train, and place individuals with disabilities in competitive jobs. The overall goal for the consumer is to foster growth towards maximum independence in the community and at their place of employment. Consumers will generally work fifteen (15) to twenty-five (25) hours per week and will be monetarily compensated at a rate equal to that of their peers.

Eligibility

To be eligible, a consumer must meet the criteria of being most significantly disabled. The Supported Employment Department works with individuals living in Pathfinder, Inc. facilities, attending Pathfinder, Inc. Adult Developmental Day Treatment Program and receiving other Pathfinder, Inc. Services.

Referral

Pathfinder, Inc. is proud to be a Supported Employment Vendor for Arkansas Rehabilitation Services (ARS). Pathfinder, Inc. and ARS work very closely together in sending referrals to each other. ARS may authorize the individual to remain in the program up to eighteen (18) months to ensure maximum personal development and skill acquisition necessary in maintaining competitive employment. A data sheet is completed with all demographic information concerning the consumer and sent to ARS. Once this information has been processed, a meeting is held to discuss the IEP. During this meeting, expectations are discussed concerning employment desires and goals.

Job Coaches

A job coach works with the consumer to determine the individual's plans for employment. The job coach serves as a teacher, mentor, and facilitator by assisting the consumer with the job search, interviews, and training of job duties at the work site. Additionally, the job coach helps the consumer look for jobs that interest them and match their abilities and skills. Discovery process is important in this program because it allows a job coach to assist with various skills processes such as: work habit skills, daily living skills, personal management skills, and interpersonal relation skills. Vocational Training is a planned program provided in a real work environment. It is designed for assisting those individuals who cannot secure or hold a job due to deficiencies in their work personality.

Arkansas Rehabilitation Services Process

There are four (4) milestones that must be followed for a consumer to complete the Arkansas Rehabilitation Services (ARS) process successfully.

- *Referral Milestone:* The ARS referral is received and accepted.
- *Job Match/Placement Milestone:* The consumer is placed in a job.
- *Stabilization Milestone:* The consumer is stabilized on the job for a period of thirty (30) days.
- *Closure Milestone:* The consumer has maintained employment for ninety (90) days or more.

The Supported Employment Program adheres to all admissions criteria and procedures of the Arkansas Rehabilitation Supported Employment Manual.

Closure

Closure is achieved when the consumer maintains successful employment or when eighteen (18) months of searching for employment is unsuccessful.

INTERMEDIATE CARE FACILITIES

Purpose

The central concept of Pathfinder, Inc. ICF/IID (15-bed or less) Program is that all people, regardless of individual differences, potential, or disability, have an inalienable right to an active treatment program and habilitation training which is consistent with their identified needs and enables them to achieve the highest level of adaptive and intellectual functioning possible. Pathfinder, Inc. ICF/IID seeks to provide the least restrictive environment, with the best available habilitative services, to the individuals with a developmental disability of Arkansas.

Program Description

The Pathfinder, Inc ICF/IID Program provides individuals with a twenty-four (24) hour, seven (7) days a week, continuous active treatment program based upon an individual program plan developed by an interdisciplinary team.

Eligibility

In order to be eligible for the ICF/IID program, consumers must reside in one of Arkansas' Human Development Centers, be a consumer of another ICF/IID program or be determined eligible for ICF/IID level of care by the Office of Long Term Care (OLTC). Individuals in HUD facilities must meet all the necessary HUD requirements.

Referral

Individuals are referred to the program through multiple sources including: family members, physicians, Human Development Centers, other ICF/IID programs, etc.

Application

For an individual to be considered for admission, they must submit an application. The application can be accessed through the Pathfinder, Inc. website or at the Administration Building. Additionally, the individual will be required to submit a psychological conducted within the last five (5) years, a physical within thirty (30) days of admission, and any other information that is deemed relevant or necessary.

Office of Long Term Care (OLTC) Approval

The Administrative Coordinator of the ICF/IID facility the individual is applying for will submit the client's application to the Office of Long Term Care (OLTC) to verify that they are eligible to receive the ICF/IID level of services. If it is determined that they are eligible, the intake process continues. If the Office of Long Term Care (OLTC) designates the individual as ineligible, the individual/parent(s)/guardian(s) are informed of this decision and given recommendations and/or referrals to other programs that might be able to serve the individual.

Evaluation

Consumers will be admitted to the facility only if they are in need of an aggressive active treatment program based on preliminary evaluation by the team. The preliminary evaluation will contain background information in addition to valid assessments of functional, developmental, behavioral, social, health, and nutritional status to determine the appropriateness of placement within the facility. The team will use all submitted information in order to determine if the ICF/IID program is an appropriate placement.

Determination/Pre-Admission Meeting

Once the team has determined if the individual's needs can be met by the ICF/IID program, a meeting is scheduled with the interdisciplinary team, the parent(s)/guardian(s), and any other relevant parties. This Pre-Admission meeting allows the individual/parent(s), guardian(s) to receive an explanation of the decision of the team.

If the team has determined that the ICF/IID program cannot meet the needs of the individual, the individual/parent(s)/guardian(s) are informed of the reasons, given an opportunity to discuss the decision and ask questions, and provided with alternate programs that might better suit the needs of the individual.

If the team has determined that the ICF/IID program is an appropriate placement for the individual, the

individual/parent(s)/guardian(s) discuss the decision and address any concerns or questions. Additionally, the individual/parent(s)/guardian(s) are given pertinent information regarding the individual moving into the facility. The Pre-Admission meeting marks the beginning of the thirty (30) day period in which the individual will receive evaluation and assessment.

Order of Acceptance

The admission/enrollment process is non-discriminative with regard to race, ethnicity, national origin, gender, sexual orientation, gender identity or religion. Applicants are admitted based on vacancies in age level, level of functioning, medical issues and behavioral consideration after review from the admission team. Compatibility to the services available, along with health and safety, are determining factors used to consider placement.

Referral List

When an individual applies to the program and there are no openings suitable for the individual, his/her name will be maintained on a referral list. When an opening becomes available, the team will consider the first individual on the list in comparison to the opening that is available and determine if that facility would be appropriate for that individual. In the instance that they decide that individual is not a fit for the opening, the team will move consecutively down the list until they reach the first person who is deemed appropriate for the opening.

Program Plan

Individually Tailored Program

Each individual will receive an individually tailored active treatment program directed toward acquiring skills to function with self determination and independence in the community if possible. Consumer's will be assessed and provided programming within the following areas: physical development, health, nutritional status, need, sensory motor development, effective development, speech and language development, intellectual and adaptive behavior, independent living skills and vocational skills. The program plan will be designed by a professional interdisciplinary team including an onsite employee(s), contracted licensed psychologist, physician, nurse, dietician, pharmacist, and any other parties that might be necessary in developing the individuals plan.

Objectives

The individual program plan objectives are expressed in separate, behavioral terms, assigned completion dates, assigned priority numbers, and organized to reflect the individualized developmental progression. The plan provides specific terms of what method is used, type of data collection, frequency of data collection, and employees responsible for training the individual on the objectives.

Services

Medication Monitoring and Administration

Pharmacy, nursing, and appropriate care employee within the ICF/IID Program will monitor resident's drug regimen in accordance with the State of Arkansas ICF/IID regulations and as ordered by the person's served

personal physician. The licensed nurse will administer medications to persons served as prescribed per physician's written order and in compliance with the laws governing licensed nurses within the State of Arkansas. All prescribed medication must have the name of the medication, date, consumer name, prescribing physician and pharmacy including contact information, instructions for use, and dosage including strength and frequency. A copy of side effects and drug interactions will be kept in the consumer file. Medications requiring refrigeration and/or protection from light will be secured and stored appropriately.

Drugs prescribed for the control of inappropriate behavior will be approved by the interdisciplinary team and will be a part of the resident's individual program plan. Additionally, all medications used to control inappropriate behavior will also be approved by the Human Rights Committee. All medications for persons served will be kept and secured in designated area of the ICF/IID to ensure the safety of person's served. All medication errors and adverse drug reactions will be reported immediately to the Facility Administrator and will be reviewed by the contract pharmacist, facility RN and prescribing medical director. Findings will be reported to the Human Rights Committee for monitoring and quality improvement.

All residents who are capable of participating in self-administration of medications will do so, with as much independence as possible during each medication pass. Resident's incapable of self-administering medications will be prompted by the ICF/IID nursing employee during each medication pass. Each medication will be identified to each resident and the licensed nurse will administer the medications as prescribed by the personal physician. Each medication administered will be documented in the resident's MAR. Medication administered to consumers off site while on ICF/IID outings, if necessary, will be supervised by licensed nursing staff or facility staff. Consumers leaving the ICF/IID site for home visit or other visits away from the facility will have their medications checked out to the guardian and/or responsible party during their time away from the facility.

A contract pharmacist will maintain appropriate records on consumer's medications, participate in individual residential staffing and provide appropriate training to facility employee on the monitoring of side effects. All medications will be secured from a licensed pharmacist and will be dispensed and filled by the licensed pharmacist and not on the ICF/IID site. Either the prescribing pharmacy or licensed nursing employee will transport and deliver the medications to the ICF/IID. All medications will be accounted for and securely stored according to policy by the licensed nurse. A sufficient supply of medications will be provided by the pharmacist to ensure for unplanned medication shortages on weekends or unanticipated events.

The prescribed and PRN medications including drug interactions are regularly reviewed and will be managed by the residents' personal physician. Unusual side effects of medications and drug interactions will be provided by the personal physician to ICF/IID staff. ICF/IID employee will notify the resident's personal physician immediately of any adverse side effects. The personal physician will review the medication use on a quarterly basis.

The nurse consultant and consultant pharmacist will coordinate ongoing training and education regarding medication administration for ICF/IID employee and consumers to include appropriate training to the consumer and employee regarding informed consent, the use of the medication, including advocacy and advocacy training in relationship to the medication use.

Ancillary

In addition to providing the above services, the following ancillary services are available to consumers: transportation (to work, recreational activities, and medical appointments), food services, diagnostic and evaluation, health services, information, referral, and follow up, protective and social-legal services, counseling services, planned recreational and community activities, and advocacy.

Self-Development

The staff members will help each consumer learn (in gradual steps) to live with the need for less supervision and encourage self-development through a plan program which provides services and learning opportunities in the following skills: personal appearance, socialization, communication, cognitive development, sensory motor, recreation, home management, community living, money management, prevocational, and health and hygiene related skills. Planned participation in community events will encourage community interaction and involvement.

Food Services

All ICF/IID Homes will use a dietician/nutritionist on a consultant basis, to help assure nutritional adequacy of menus and acceptable practices of food safety and sanitation. Menus will be prepared at least one (1) week in advance and kept on file for one (1) month. Meals will reflect an approved, adequate diet that conforms to the recommended dietary allowance. Preparation of menus may be used as a teaching tool for instruction of individuals, including development of menus by individuals. Meals shall be planned so that identical meals are not served on the same day of consecutive weeks. Provisions will be made for special diets as required by individuals. Food will not be stored with toxic items.

Transition

When an individual transitions out of the Pathfinder, Inc. ICF/IID program, the individual will be given a final summary regarding developmental health, behavioral health, social health, nutritional status, and any other pertinent information. This information will be forwarded to other agencies or parties upon consent by the individual. A post-discharge plan of care is developed and submitted to the individual in attempts to provide a smooth transition for the individual. Pathfinder, Inc. staff provides follow-up services to the individual at thirty (30), sixty (60), and ninety (90) days.

BEHAVIOR MANAGEMENT – ICF/IID

Behavior Management

Behavior management will be conducted in a humane and therapeutically acceptable method with the overall goal of promoting growth, development and independence. Preventing and minimizing un-adaptive behaviors by emotional manipulation and positive reinforcement techniques will be emphasized. A positive interaction between the individual and staff provides the staff the opportunity to demonstrate socially acceptable behavior, assist with de-escalation techniques, and empower the individual to control his/her behavior.

Individuals exhibiting maladaptive behaviors or responses will warrant an analysis of many components of the individual's behaviors such as patterns, settings, triggers, antecedents, and consequences. Each maladaptive behavior or response requires documentation on a "Behavior Incident Form". Adequate documentation of the individual's undesirable behavior will result in patterns and trends. Furthermore, it provides the Administrator the opportunity to review reports in order to ensure that staff are handling behavior incidents in an appropriate and therapeutic manner.

Clients exhibiting consistent or long-term maladaptive behaviors will have an individualized behavior treatment program developed by a QIDP. The plan will be reviewed by the facility Human Rights Committee prior to implementation. The committee must approve of the behavior treatment program. Furthermore, the client/parent/guardian must sign off on the behavior treatment plan. A client/parent/guardian's refusal to sign the behavior treatment plan may indicate the need for a different level of care for the individual.

Restraints

Pathfinder, Inc. ICF/IID will not use physical or mechanical restraints as a programmed method of behavior intervention techniques. Only in an emergency situation to protect human life or injury should properly trained employee use an ICF/IID approved physical restraint. Nor will the ICF/IID use painful or noxious stimuli to manage inappropriate behavior. Pathfinder, Inc. endorses positive interventions to achieve needed behavior changes.

Human Rights Committee

ICF/IID Facilities will designate a Behavioral Management/Human Rights Committee that meets once at least every six (6) months or more as required. This committee will be selected from facility staff, parents, legal guardians, consumers, and qualified individuals with experience in management and change of inappropriate behavior. Members with no controlling interest will review, approve, and monitor programs designed to manage inappropriate behavior and any other programs that might interfere with the consumers' rights and protections. Relevant practices the committee will review include: drug usage, physical restraints, time out rooms, application of painful or noxious stimuli, control of inappropriate behavior, protection of rights, medical procedures, funds, and other concerns the committee might have. The committee is responsible for ensuring that programs are implemented only after informed consent from the individual/parent(s)/guardian(s).

Consumer Conduct and Rules

Consumer Conduct

Rules and regulations are established in order to provide consumers and parents/guardians an understanding of the expectations of Pathfinder, Inc. ICF/IID. Normal social expectations and community morals of values will govern all consumers' behavior.

- A. Each consumer will follow his/her individual program plan and schedule.
- B. Each consumer will refrain from loud, disruptive, or inappropriate behavior which would be disturbing to others.
- C. Each consumer will abide by all community standards governing conduct.

- D. Each consumer will be granted privileges and freedoms consistent with their ability level and limitations.
- E. Any consumer-specific restriction to behavior and rights will be done only after a signed “*Informed Consent Form*” is obtained from the consumers and/or legal guardian. In addition, the Human Rights Committee must approve such restrictions. This will be incorporated into the Annual Plan, Behavioral Plan, or other appropriate documentation. Failure to sign such agreement may indicate a different level of care or type of facility is needed.
- F. Consumers will not discipline other consumers.

This policy will be available to staff, consumers, parents, and/or guardians. A resident council will be formed to promote therapeutic growth and provide feedback from peers concerning behavior at the facility with the overall goal of developing each consumer’s self-control and growth as an individual.

Consumer Rules and Regulations

- A. All consumers are expected to be involved in at least half-day activity leading to full day through gainful employment, participation in the Skills Training Center, Senior Life Enrichment Program, or an appropriate day treatment program.
- B. All consumers are responsible for being dressed at all times while in the community living area of the facility.
- C. Everyone is expected to share in the housekeeping duties of the facility. Tasks have been divided into these areas: preparation and cooking of food, table setting, clearing and washing dishes, sweeping and mopping, cleaning of all appliance and garbage removal, vacuuming, and cleaning outside area of patio. Each consumer will be assigned to one (1) of these areas. The work assignments are for one (1) week periods starting on Monday mornings. Each consumer is to familiarize themselves with the list of duties.
- D. Each consumer is expected to be responsible for his own: daily bed making, weekly washing of dirty garments and linens, hanging clothes and organizing rooms daily, and daily bathroom maintenance.
- E. All consumers are expected to behave as responsible law abiding citizens. The following will not be tolerated at Pathfinder, Inc. ICF/IID: fighting or verbal abuse with consumers or citizens of the community, behavior should be non-violent and never endanger the health or welfare of others, stealing, using illegal drugs, and driving a vehicle without a driver’s license and insurance.
- F. Consumers’ friends and relatives are welcome to visit. Please ask permission before entering an individual’s room.
- G. All consumers are expected to follow good safety rules. Please smoke only in designated smoking areas.
- H. Everyone is expected to use good manners at all times. Proper language is expected of all persons living in or visiting the facility.
- I. Due to the 24/7 supervision of consumers that is required, consumers should not leave the facility unless they are accompanied by a staff or an approved visitor.
- J. Telephone calls made from the facility should be limited to fifteen (15) minutes.
- K. Consumers must be willing to follow through with prescribed medication regimen and recommended treatment.
- L. Each consumer will be responsible for maintaining himself in his/her environment; however, if a consumer is unable to independently function in this capacity, assistance from the organization will be provided.

- M. Consumers discharge procedures from the facility for inappropriate behavior will include evidence and documentation of efforts to assist consumers and/or refers to acquire help.

Rights

Consumer Rights

Pathfinder, Inc. ICF/IID, in order to comply with federal standards and regulations, will adopt the following policy for consumer's rights. All consumers and/or parents/guardians will, at the time of admission or before, be fully informed of his/her rights and responsibilities and of all rules and regulations of the facility.

At the time of admission, the consumer, if capable of understanding, will be informed of his/her rights by his/her social worker, QDDP, and/or program administrator and will:

- A. Sign a statement that they were informed.
- B. Statement will be signed by a staff member.
- C. Statement must be witnessed by a third party.

If the consumer is not capable of comprehension, rights will be discussed with parent(s)/guardian(s) indicated by their signature and that of a staff member.

Consumer rights are as follows:

- A. Right to be informed of the services available, including any non-Title XIX reimbursable costs that he/she will be obligated to pay.
- B. Right to be informed by a physician of any health or medical condition (unless medically contraindicated) and be afforded an opportunity to participate in the development of his/her personal health or medical treatment plan.
- C. Right to refuse to participate in experimental research.
- D. Right to be transferred or discharged only for medical reasons, or for his/her own welfare or that of other consumers.
- E. Right to be encouraged and assisted in exercising his/her rights as a consumer and a citizen (including the right to voice grievances against facility policies without fear of reprisal).
- F. Right to be insured of confidential handling of his/her personal and health records.
- G. Right to be treated with consideration, respect, and full recognition of his/her dignity and individuality.
- H. Right to be allowed to refuse to perform services for the facility which are not a written part of his/her plan of therapy.
- I. Right to be permitted to associate and communicate with persons of his/her own choosing and to send and receive personal mail unopened.
- J. Right to be allowed to participate in social, religious, and community activities at his/her discretion, unless medically contraindicated.
- K. Right to be permitted to retain his/her personal clothing and possessions as space permits.
- L. Right to proper medical care and physical restoration and to such education, training, and habilitation to help develop the consumers to his/her maximum potential.

- M. Right to economic security and to a decent standard of living.
- N. Right to a qualified guardian when necessary to protect his/her personal well-being and interest.
- O. Right to the least restrictive alternative in activities of daily living and to function as independently as possible.
- P. Right not to be transferred or discharged unless it is for medical reasons or for his/her own welfare or the welfare of other consumers and then only when he/she and/or guardian has been fully informed and provided guidance for alternative services.
- Q. A copy of consumers' rights will be posted in living area.
- R. Consumers/guardians have input into program plan and sign the plan.
- S. Consumers/guardian participation in campaigns for publicity efforts to raise funds for the organization is on a voluntary basis, i.e., signed release for each occurrence.
- T. Consumers/parent/guardian is informed of the grievance procedure developed by the facility.
- U. Consumers/parent/guardian have input into the rules of conduct utilized by the facility.
- V. Employment of consumers shall be in compliance with Federal Wage and Hour Regulations. No consumers shall work as a substituted for any paid employee of Pathfinder, Inc. Supervised Living.
- W. Organization shall provide, upon request, a summary of any monitoring or evaluation reports of their facility prepared by and received from federal, state, or local authorities.
- X. Consumer bedrooms are not shown to visitors without the consumers' written permission.
- Y. Consumers/parents/guardians are informed of their legal responsibilities.
- Z. Consumers have the right to communicate which includes sending or receiving mail and conducting private conversations/visits with family and friends.
- AA. Organization will provide opportunities for recreational activities on a daily basis both inside and in the community
- BB. Organization will provide three (3) nutritional meals per day.

United States Constitutional Rights

1. The right of freedom of speech and expression
2. The right of freedom to religion
3. The right to association
4. The right to marry, procreate, and raise children
5. The right to vote
6. The right to meaningful and fair access to courts, including legal representation
7. The right to contract and the right to own and dispose of property
8. The right to privacy
9. The right to be free from cruel and unusual punishment
10. The right to equal protection and due process of law
11. The right to fair and equal treatment by public agencies
12. The right to an equal educational opportunity
13. The right to have residential and educational services provided in a humane and least restrictive environment
14. The right to meet civil and legal responsibilities

Rights of Individuals with AIDS, HIV, or Hepatitis B

Individuals with AIDS or an HIV related condition (or those who may be perceived as having AIDS or AIDS related condition) are not discriminated against in accordance with 29 U.S.C. 706(8), 784(b); U.S.C. 121010 et. Seq. Each individual/parent/guardian shall be provided a copy of this procedure.

Pathfinder, Inc. will protect the confidentiality of records or computer data which is maintained related to Hepatitis B, HIV, or Aids.

Costs

Non- Title XIX reimbursable costs must be paid by the client. This includes: haircuts, special personal items or supplies, and any chosen recreation activity.

Discharge/Transfers

An individual may be discharged at the request of the individual/parent(s)/guardian(s) or by the decision of Pathfinder, Inc. staff providing documentation of good cause. The documentation of good cause should be outlined in the individual's record. When a consumer is discharged with good cause, the individual/parent(s)/guardian(s) will be informed of the decision in a manner that they can understand. Pathfinder, Inc. ICF/IID Program will give a reasonable amount of notice of an individual's discharge in most circumstances to give the individual/parent(s)/guardian(s) the opportunity to make arrangements; however, emergency situations may not allow such notice.

A follow up with the consumers at his/her new living environment will be conducted thirty (30), sixty (60), and ninety (90) days after transfer or discharge.

ADULT DEVELOPMENTAL DAY TREATMENT PROGRAM (ADDT)

Purpose

The Adult Developmental Day Treatment Program provides a wide range of services that targets the enhancement of self care, socialization, employability, and cognitive skills towards greater independence. The menu of services and service environments is enhanced through carefully targeted individualized goals and objectives.

Each individual receives approximately five (5) hours of instruction per day, five (5) days a week. Individuals accepted into the program come from other agencies, community, or transition from public schools. The purpose and intent of these programs is to provide individuals with sufficient skills to function effectively in a community, home, and/or work environment. The program emphasizes instruction in academics, self-help skills, and social and behavioral development skills. These programs are provided in licensed Developmental Disabilities Services (DDS) facilities.

Funding Sources

The majority of individuals are funded by Developmental Disability Services (DDS). Other funding sources include Medicaid, Medicare, Arkansas Rehabilitation Services (ARS), Title XX, Title XIX, private insurance and private pay.

Facility

Individuals receive ADDT at various sites approved as Department of Human Services (DHS). These integrated sites provide individuals integrated environments with various opportunities and services.

Hours of Operation

The hours of operations for the Adult Developmental Day Treatment Program vary by location. Exceptions are made for individuals riding the later transportation routes in the morning and in the afternoon.

Days of Operation

The Adult Developmental Day Treatment Program is open Monday-Friday every week of the year with the exception of designated holidays.

Eligibility

Participants funded by DDS must be developmentally disabled. This program provides services for individuals with developmental disabilities who perform at a production level less than fifty (50) percent of the industrial norm and who cannot function effectively in the working community.

Referral

Referrals come through the community, public schools, Arkansas Rehabilitation Services, other providers, court orders and other state agencies. From the point of referral to admission the timeline is usually thirty (30) days.

Application

Financial information, demographics, social history, and other pertinent information from the prospective enrollee are obtained.

Information such as, but not limited to, the following is obtained: full name, address, phone number, marital status, sex, race, date of birth, legal status, name, address and phone number of parent(s)/guardian(s), emergency contact name, address and phone number, insurance benefits, primary language, primary disability, educational background, environmental variables, medical, health, emotional and behavioral factors.

Efforts are made to secure as much information about the individual as possible in order to create the most appropriate and accurate program plan. "*Release of Information Forms*" are signed to secure information from previously attended training programs, medical facilities, schools, etc. At intake, all necessary releases are signed and legal status (guardianship) is determined

Order of Acceptance

All individuals meeting Adult Development Center requirements will be admitted based on space availability.

Waiting List

The Adult Development Center does not maintain a waiting list at this time. In the instance that a waiting list would become necessary it would be maintained on a first come first serve basis.

Information Session

The Adult Development Center's Administrative Assistant/Designee arranges a time for the individual with a disability/parent/guardian to tour the facilities and briefly explain existing programs. If it is determined by the admission team that the Adult Development Center would be an appropriate placement for the prospective enrollee and if the prospective enrollee/parent/guardian requests entry into the training program, the procedure for admission continues.

Admission

Based on all of the information that is submitted, the admission team evaluates the individual and determines if the Adult Development Program is an appropriate placement for the individual. The individual/parent(s)/guardian(s) are contacted to inform them of the decision of the team. If it is determined that the individual is eligible for the Adult Development Program, an Orientation is scheduled for the individual to become familiar with the facility and the program. Additionally, a start date is scheduled. If the admission team determines that the Adult Development Program is not an appropriate fit for the individual, the individual/parent(s)/guardian(s) are informed of the reasons for this decision and given information regarding other resources or programs available that might better suit the needs of the individual.

Intake

On the scheduled day, the individual attends the Adult Development Program and begins his/her ten (10) day trial period. This trial period accustoms the individual to the environment and verifies that the program is an appropriate placement for the individual. The individual will receive a comprehensive assessment. This assessment is discussed with the individual and a report is sent to the parent(s)/guardian(s) and the referral sources, if applicable. This report contains the results, recommendations and future steps. If the trial period is successful, the individual continues attending the program and an Individual Program Plan (IPP) is created within thirty (30) days of admission. If the trial period proves unsuccessful and the team decides the individual is not a fit for the program, the individual/parent(s)/guardian(s) are informed of the reasons and given alternate placement suggestions.

Master File

Upon entering the program, a master file is created for the individual. The face sheet serves as the social history and will be updated and signed at least annually. Information concerning the individual's allergies, medical problems, and medication will be updated annually. A signed "Consent Form" authorizing the individual to

receive emergency medical services shall be accessible and updated annually. “*Release Forms*”, such as “*Photo Releases*”, are obtained on an as-needed basis.

Individual Program Plan/Annual Plan

Development of Plan

The initial Individual Program Plan (IPP) is developed after all necessary evaluations have taken place. The initial plan must be completed within thirty (30) days of admission.

Each IPP is reviewed annually. First, a Program Plan Annual Summary is filled out by the client to summarize their current abilities, preferences, and concerns. Additionally, the client is asked about his/her future preferences such as: home, work, community, recreation, people, etc. The intent is to determine how satisfied the individual is with his/her current plan and determine what the future plan should contain in order to best meet the needs and desires of the individual. Next, an IPP meeting is held with the interdisciplinary team and the client/parent(s)/guardian(s) to review the individual’s progress from the previous year and determine what goals and objectives are necessary for the upcoming year. The team discusses the individual’s strengths, needs, barriers, medical history, and the responses of his/her Program Plan Annual Summary in order to develop a plan that is individualized and appropriate for each individual.

Goals and Objectives

Based on the recommendations of the team, the parent(s)/guardian(s) input, and the preference and choice of the client, goals and objectives are created in order to assist the individual in attaining a higher level of independence. Goals and objectives are individualized to ensure they are reasonable in terms of the individual’s potential and abilities and that they are relevant to the individual’s future goals or desires.

Progress Evaluations

One important component of the IPP goals and objectives is progress evaluations. A progress evaluation assesses the progress or lack of progress that has occurred in regard to the individual goals and objectives. The results of these evaluations provide the opportunity for analysis to determine if the individual is progressing as expected or if accommodations or changes need to be made to the objectives in order to support the individual in obtaining his/her goal.

Activities and Services

Food Services

Food Service for Adult Development Programs is governed by USDA guidelines. Individuals may choose to bring their own meals or eat the meals prepared. The catering service orders food and creates menus in accordance to USDA standards for adults. Lunch is prepared and transported to the Adult Development Program. Breakfast is prepared on site. Individuals with special diets or restrictions are accommodated. Meals are on a four (4) week schedule. All food preparation areas are monitored by the Arkansas Department of Health. Food will not be stored with toxic items.

Speech Therapy

Speech/Language Pathologists provide evaluation of communication skills, direct intervention for articulation/language deficits, and development of alternative/augmentative communication systems. The goal of this service is to improve an individual's communication with others at the Adult Development Center, at home, and within the community.

Occupational Therapy

Occupational Therapists provide assessment and treatment of fine motor skills, activities of daily living, and sensory integration. Intervention focuses on improving the individual's ability to function as independently as possible.

Physical Therapy

Physical Therapists provide assessment and treatment of gross motor skills including ambulation, range motion, balance, and muscle tone. Recommendations may be made for assistive devices such as wheelchairs, walkers, or orthotics in situations that warrant such.

Protective and Socio-Legal Assistance

If necessary, assistance is provided through advice and guidance by actively intervening in social and legal processes on behalf of individuals with disabilities by:

- Assisting individuals to ensure that they receive all of the benefits, services, and rights to which they are entitled
- Referring individuals to the proper agencies in cases of abuse or neglect
- Providing education to individuals with disabilities and to the community, as pertains to law enforcement, local bar associations, etc. concerning the nature of disabilities and the specific needs of individuals with disabilities

Referral

The facility maintains a current directory of community resources that are available. In the instance that an individual needs services that are not provided by the Adult Development Program, individuals will be referred to other agencies that can provide the services. Staff members will assist individuals in other service options that are available.

Transportation

Transportation to and from domicile to the Adult Development Programs is provided daily in the Pathfinder, Inc. vans for no charge. Designated vehicles are staffed with a bus driver and one (1) aide. Bus routes are approximately one (1) mile to fifty (50) miles in length and are approximately two (2) hours in time. Attendance logs are maintained along with documentation of the provision of services. Mileage logs are required for the Transportation Department.

Medication Monitoring

Pathfinder, Inc. Adult Day Programs do not manage medications, but will monitor the consumers' self-administration of medications. Persons served in this program must be capable of Self-Administering Medications. Community consumers will notify intake coordinator of the medications brought to the program at which time a MAR will be created to be monitored. Clients in Pathfinder residential facilities will have their MAR brought to the Adult Development Center. All prescribed medications must have the name of the medication, date, consumer name, prescribing physician and pharmacy including contact information, instructions for use, and dosage including strength and frequency. A copy of side effects and drug interactions will be kept in the nurses' station. All medications will be checked in, secured and locked to ensure the safety of all consumers. Medications requiring refrigeration and/or protection from light will be secured and stored appropriately. The instructor will, upon prompt, provide the medication to the person served and appropriately document the self-administration on the "Medication Monitoring Form". Medications will be taken home and will not be stored nor disposed of at the facility.

All non-prescription medication must have the original label showing the recommended dosage as well as recommended treatment. Non-prescription medication will be treated as prescription medication by being kept in a locked cabinet to protect all individuals.

Schedule

Services are generally provided from 7:00 a.m. to 3:00 P.M (but may vary by location). five (5) days per week.

TRAINING PROGRAM

Developmental Day Treatment

This program provides services for adults with developmental disabilities. Each individual receives approximately five (5) hours of instruction per day, five (5) days a week. Individuals accepted into the program come from an institutional setting, community, or transition from public schools. The purpose and intent of these programs is to provide individuals with sufficient skills to function effectively in a community, home, and/or work environment. The program emphasizes instruction in academics, self-help skills, and social and behavioral development skills. These programs are provided in licensed Developmental Disabilities Services (DDS) facilities.

Curriculum

The Adult Curriculum Program provides adult instruction and activities that encourage independence and adult awareness of the community. There are five (5) areas that each individual rotates to throughout the day. These areas are focused around independent living, employment skills, job search/job readiness, appropriate socialization, etc. The classes are approximately one hour in length, totaling five (5) hours of class each day.

The five (5) main areas include:

- Health and wellness/exercise
- Activities of daily living

- Fine art
- Music
- Social/recreational

Additional training includes:

- Multi-media library
- Literacy and money management
- Culinary arts
- Computer classes
- Special Olympics

In order to qualify for classes and activities, individuals must have a need and desire for greater independence in the areas of employability, residential living, and the community.

Evaluation Program

The purpose of the Evaluation Program is to determine an individual's social and vocational assets and needs. Individuals are assessed in various skill areas including, but not limited to, vocational preparation, daily living skills, personal management skills, and interpersonal relation skills. The evaluation serves as a tool in developing the individual's vocational rehabilitation program.

Vocational Training

Vocational training is a planned program of instruction and task performance. It is designed for individuals with disabilities who require assistance in preparing for employment. During vocational preparation, improvement in areas of need is stressed with the goal of meeting standards of proficiency which are acceptable in competitive employment.

In order to qualify for Vocational Training, the individual must exhibit the ability and willingness to participate. In addition, the individual and/or guardian must give approval to participate.

Professional/Vocational Counseling

The Vocational Counselor counsels each individual regarding his/her program and adjustments into the work world. Counseling sessions are vocationally-oriented. All workers, including youth, must be regularly provided with career counseling and information about training opportunities as a condition of payment of a sub-minimum wage. Each individual must also be provided information regarding self-advocacy, self-determination, and peer mentoring training opportunities.

Job Placement

Once the requirements for full-time competitive employment are met, placement in public or private industry is pursued. The staff is responsible for on-site job coach services and follow-up services as appropriate and assigned. A minimum of one (1) contact per month for three (3) months is made once the work placement is stable.

Individuals are provided real work situations and settings in which they are paid at least the hourly minimum wage. These settings are in real businesses within the community. Individuals work with Pathfinder, Inc. staff that provides close instruction and quality assurance performance. These are integrated settings providing individuals the experience of working with on-site co-workers, company managers, and supervisory staff. Once adults secure competitive employment, they are still eligible to participate in day treatment and other service options.

Job Descriptions

Individuals at the Adult Developmental Day Treatment Program may be involved in various assembly and production tasks. They must meet the criteria established by WIOA. Each individual is assessed in regard to his/her ability and then a program is developed to incorporate tasks designed to meet that individual's specific training needs. Developing these specific training needs will allow the individual to prepare for employment in the community.

Consumer Pay

Individuals are paid on a commensurate wage basis for production tasks performed at Pathfinder, Inc. All tasks have different pay rates according to the job, the contract, and the specific time study for the job. The pay for the task is based on the Prevailing Wage Survey. The program is approved by the Department of Labor to pay a commensurate wage.

The Adult Developmental Day Treatment Program possesses a current certificate from the Wage and Hour Division of the United States Department of Labor. All time studies and payment of wages adhere to the regulations of the Department of Labor.

Individuals working under the title of "Production Assistant" will be paid at least minimum wage.

In addition, the Section W10A, the Workforce Innovation and Opportunity Act requires that individuals with disabilities twenty-four (24) years and younger cannot be employed at a sub-minimum wage; however, they may be employed at a minimum wage or higher level.

Individuals are paid every two (2) weeks. Pay checks will depend on tasks completed and the availability of production tasks for which Pathfinder, Inc. is compensated by an outside business.

Volunteer Work Opportunities

Volunteer work opportunities at community sites are available for individuals who are preparing for paid employment opportunities.

Individual Rights

1. Being free from physical or psychological abuse or neglect, retaliation, humiliation, and financial exploitation
2. Having control over their own financial resources
3. Being able to receive, purchase, have, and use their own personal property

4. Actively and meaningfully making decisions affecting their life
5. Access to information pertinent to the person served in sufficient time to facilitate his or her decision making
6. Having privacy
7. Participating in development of the program plan and receiving information periodically on progress
8. Being able to practice the religion of their choice
9. Being able to associate and communicate publicly or privately with any person or group of people of the individual's choice
10. Being free from the inappropriate use of a physical or chemical restraint, medication, or isolation as punishment, for the convenience of the provider or agent, in conflict with a physician's order or as a substitute for treatment
11. Not being required to work without compensation, except for the purposes of the upkeep of their own work space and of common working areas and grounds that the individual shares with others
12. Being treated with dignity and respect
13. Having due process
14. Having access to their own records, including information about how their funds are accessed and utilized and what services were billed for on the individual's behalf.
15. Informed participation including consent, refusal, or expression of choice regarding service delivery, release of information, composition of the service delivery team, involvement in research projects (if applicable), to decide whether or not family parties (or any interested party) can be involved in the planning and implementation of the individual's service plan (if own legal guardian).
16. Access or referral to legal entities for appropriate representation
 - Disability Rights Center 1-800-482-1174
 - DDS Licensure and Standards 1-501-682-8697
 - Adult Protective Services 1-800-482-8049
 - Department of Human Services 1-501-682-1001
 - Emergency Services 911
17. Access to self-help and advocacy support services
18. Investigation and resolution of alleged infringement of rights (The agency maintains documents of all investigations of alleged violations of individual's rights and actions taken to intervene in such situations. The organization ensures that the individual has been notified of his or her right to appeal according to DDS Policy 1076.)
19. Rights and responsibilities of citizenship
20. Other legal and constitutional rights
21. Say no to services (unless a court has taken that right away from the individual)
22. Participation in campaigns for publicity efforts or to raise funds is done on a voluntary basis only
23. To have input into the rules of conduct utilized by the facility and to be informed of the rules
24. To refuse any experimental or non-standard form of treatment
25. To be informed of the confidential nature of all individual information and have the right to approve or deny the release of identifiable information
26. To request and review a summary of any report of the facility done by local, state, or federal authorities
27. Know how services are supposed to help

28. Know why certain services are chosen over others
29. Receive services in ways that provide the most freedom (provide services that best fit the individual's needs)
30. Be informed of their rights in a way that they can understand
31. Exercise their rights without fear of punishment or denial of services
32. Choose to live in the community rather than a living facility, if appropriate
33. To be informed of the discharge and exit procedure
34. To be informed of the U.S. Constitutional Rights
35. To be informed of the grievance procedure

United States Constitutional Rights

1. The right of freedom of speech and expression
2. The right of freedom to religion
3. The right to association
4. The right to marry, procreate, and raise children
5. The right to vote
6. The right to meaningful and fair access to courts, including legal representation
7. The right to contract and the right to own and dispose of property
8. The right to privacy
9. The right to be free from cruel and unusual punishment
10. The right to equal protection and due process of law
11. The right to fair and equal treatment by public agencies
12. The right to an equal educational opportunity
13. The right to have residential and educational services provided in a humane and least restrictive environment
14. The right to meet civil and legal responsibilities

Rights of Individuals with AIDS, HIV, or Hepatitis B

Individuals with AIDS or an HIV related condition (or those who may be perceived as having AIDS or AIDS related condition) are not discriminated against in accordance with 29 U.S.C. 706(8), 784(b); U.S.C. 121010 et. Seq. Each individual/parent/guardian shall be provided a copy of this procedure.

Pathfinder, Inc. will protect the confidentiality of records or computer data which is maintained related to Hepatitis B, HIV, or Aids.

Discharge

An individual may be discharged or terminated when:

- Employment is secured and employment schedule prohibits participation in the program. Individuals are still eligible to participate during non-work hours.
- Individual is transferred to another center.

- Individual voluntarily withdraws from the center.
- There is a lack of funding.
- The individual was dismissed due to violation of established rules such as: unsatisfactory performance after repeated counseling, inability to cope with the training situation, refusal to perform job tasks, disruptive behavior, physically attacking other individuals, violation of any rules, absenteeism, other behaviors that represent a health and safety threat to others, and/or the identification of another program that more appropriately meets the needs of the individual.

Transition

School to Adult Developmental Day Treatment Program:

Adult Developmental Day Treatment Program staff attend Individualized Education Program (IEP) meetings of individuals during their junior or senior year. Individuals are provided with information regarding the services available at the Adult Developmental Day Treatment Program. School staff, families, and individuals may receive a tour of the center. Individuals who decide to transition to the Adult Developmental Day Treatment Program are given the assistance and guidance necessary to transition from high school to the Adult Developmental Day Treatment Program.

Adult Developmental Day Treatment Program to another program:

When individuals leave the Adult Developmental Day Treatment Program to attend another program, an exit summary and a discharge form are completed. The exit summary provides information regarding the satisfaction of the person served. The discharge form provides information regarding the reason for discharge, the services that were received, referral information, and the plan for follow-up activities.

Individuals/families are provided information about other programs or services that might be able to meet the needs of the individual. Once the individual has chosen another program and a release has been obtained, the Adult Developmental Day Treatment Program will send all of the individual's necessary documentation.

Adult Developmental Day Treatment Program to Employment:

The Adult Developmental Day Treatment Program provides clients with daily assistance in preparing for integrated employment. Once an individual is ready for integrated employment and a job opportunity becomes available, he/she is assisted in completing the job application. Additionally, assistance and guidance is given to the individual about the interview process to help him/her prepare. Individuals may be accompanied by a staff member to an interview. Once the individual secures a job, transportation and ongoing support is provided as necessary.

Active Day Treatment

Active Day Treatment is provided for those individuals with disabilities who reside in Intermediate Care Facilities (ICF/IID). In addition to adhering to all Adult Development Programs admissions criteria and procedures, individuals funded by ICF/IID must have a history of institutionalization or documentation that admission to the Adult Development Program would prevent such institutionalization. Active Day Treatment Services can be

provided at an Adult Development Facility or in integrated settings in the community.

BEHAVIOR MANAGEMENT - ADDT

Positive Behavior Support

The Adult Developmental Day Treatment Program implements Positive Behavior Support strategies in order to manage behavior. Positive behavior support provides the opportunity for individual growth and empowerment and renders more intrusive and negative forms of behavior management unnecessary. The core belief of the positive behavior support process is that the individual is likely behaving based on a desired outcome: the attempt to achieve or receive something or the attempt to avoid or resist something. Determining what the relationship is between the behaviors exhibited by the individual and aspects of the environment will likely reveal relevant information in managing behavior. In instances where doing so is feasible, efforts are made to limit the environmental stressors that provoke the individual's behavior. Another method used is positive reinforcement. The concept of positive reinforcement is that staff members provide positive feedback and response to the desirable behaviors resulting in increased occurrence of acceptable behavior and decreased occurrence of undesirable behavior.

Crisis Prevention Intervention

Staff members receive training in Crisis Prevention Intervention (CPI), a national certification for non-seclusion or emergency restraining hold intervention procedures. This intervention is only used in the least restrictive manner within a minimal time frame, only by trained and certified individuals, and only when needed to ensure the health and safety of individuals and staff. If an individual requires more than two (2) emergency holds per month, it will be necessary that the individual's Individual Program Plan be reevaluated to determine if additional supports are necessary to assist the behavior or if the behavior has reached a level that indicates the individual is no longer in the appropriate placement.

Persistent Behaviors

If behaviors continue, staff meetings will be conducted to assess and address further needs that may include modification of staffing area, activity, and/or other accommodations. Meetings may be held with families or guardians for direction. If all of these resources are exhausted, suspension or termination may be utilized to ensure other individuals' services are not negatively impacted. In cases where the health and welfare of the individual or other individuals is in danger, the person may be removed immediately. Maltreatment, restraints, or corporal punishment is prohibited. "Corporal punishment" refers to the application of painful stimuli to the body in an attempt to terminate behavior or as a penalty for behavior.

RESIDENTIAL SERVICES

Program Description

Purpose

It is the purpose of the Residential Program to provide a carefully balanced framework of home environment,

special professional services, and a gradual decrease of supervision to encourage self-respect, responsible judgment, and practical life experience.

Funding Sources

The funding sources of Pathfinder, Inc. Residential Services include: Title XX, Title XIX, Title XIX Therapy, State, State-Therapy, Local Funds, Joint Training Partnership Act Fund, Workshop, Individual Fee, Contract Services, PASSE, and State Medicaid.

Supportive Adult Living

Supervised Apartments

In the adult living apartments, staff is on-call twenty-four (24) hours per day and provides supervision and training in basic life skills focusing upon normalization and independent living skills of residents. Progress is monitored with the development of a program plan and through measurable outcomes that teach self development, decision making, and home management skills.

Group Homes

In the group homes, professional staff provide twenty-four (24) hour supervision and training in activities of daily living, focusing upon normalization and independent living skills of residents. Progress is monitored with the development of a program plan through measurable outcomes that teach self-development, decision making, home management, and community safety skills.

Waiver Homes

Pathfinder, Inc. Waiver Homes meet the special needs of residents within the normal framework of a home-like experience. The program provides twenty-four (24) hour supervision and an intensive training program which utilizes treatment encompassing the social, emotional, cognitive, and physical living. Individualized training is made available in all areas of daily living to assist residents toward independent living.

ADMISSION AND DISCHARGE - RESIDENTIAL SERVICES

Application for Medicaid Waiver

To apply for Waiver services please call DDS Intake and Referral [\(501\) 683-5687](tel:5016835687). There is a waiting list for Medicaid Waiver services so the sooner an application is placed on file the sooner an individual will be able to receive these valuable services.

Eligibility for Medicaid Waiver

In order for an individual to be eligible to receive Waiver Services, they will be required to complete the intake and assessment process of the Developmental Disability Services Waiver Program. This includes: determination of categorical eligibility, institution level-of care determination, comprehensive diagnosis and evaluation (including an independent assessment), development of a person-centered service plan (PCSP), cost comparison

to determine cost effectiveness, and notification of a choice between home and community based services and institutional services.

Eligibility for Pathfinder, Inc. Residential Program

To be eligible for program acceptance, an individual must meet the following criteria:

- A. The individual must be aware that Pathfinder, Inc. Residential Program is a voluntary program.
- B. The individual must be diagnosed as developmentally disabled and be twenty-two (22) years of age or eighteen (18) years of age with a certificate of completion.
- C. The condition of the individual's health must permit him/her to engage in at least a half day of activities leading to a full day.
- D. The individual must be willing to learn to be responsible for his/her own personal needs.
- E. The individual's behavior must not endanger the welfare or health of another resident and/or staff member.
- F. The individual should assume responsibilities of medication as needed. The Pathfinder, Inc. Residential Program does not administer medication. For individuals requiring medication, there is a locked cabinet/box for storage of medication within the facility. It is necessary for the resident to receive a physician's statement for prescription drugs and a medication management plan.
- G. The individual should assume apartment rental costs and financially be able to meet personal needs such as food, utilities, personal items, etc.
- H. Individuals MUST be approved for the Arkansas Medicaid Waiver Program.

Referral

All referrals must be approved for the Arkansas Medicaid Waiver Program. Referral can be made by individuals, parents, guardians, PASSE, physicians and other agencies.

Evaluation

Comprehensive evaluation should be completed prior to admission including:

- A. Social evaluation
- B. Medical evaluation
- C. Psychological evaluation report current and up to date

Application

Additional information on individual is required to determine eligibility including:

- A. Cover letter from source of referral
- B. Copy of survey interview including social security number, birth date and similar information
- C. Copy of any past rehabilitation, day treatment, residential, or related program
- D. General medical information to include: diagnosis of disability, medication and physician. (Within one [1] year.)

- E. Social history
- F. Psychological information
- G. Current assessment
- H. Any additional information or material which may be appropriate

Admission

- A. When an individual is considered for program admission, the referring agent, parent, or guardian and the individual are notified of the transition date, admission, and the Money Follows the Person Process. (Individual for consideration must be approved by DDS for Arkansas Medicaid Waiver.)
- B. Upon acceptance for the program admission, the individual attends a transition meeting intended to allow staff to gain information regarding the individual's strengths, weaknesses, and needed skills acquisition.
- C. The Individual Habilitation Program Plan (IHP) is developed during the transition meeting.
- D. A functional assessment will be completed on the individual.
- E. The individual will begin a thirty (30) day probationary period for assessment of appropriate placement into the program.

Orientation

After an individual is admitted and reports to the center on the pre-arranged date, the house manager/designee will give him/her a detailed orientation of the program.

The orientation will cover the following:

- A. Full explanation of the program
- B. Documentation of developmental disability
- C. Completion of necessary releases including the emergency medical release
- D. Completion of record face sheet
- E. Statement of legal status
- F. Review and explanation of Individual/Guardian Rights
- G. Review and explanation of rules and regulations including safety rules and precautions
- H. Purpose and procedures of money management system
- I. Self-preservation certificate within thirty (30) days
- J. Overall services provided by Pathfinder, Inc.

Discharge

Discharges may be made for the following reasons:

- Pathfinder, Inc.'s inability to ensure the health and safety of the resident
- Voluntary withdraw by the individual or legal guardian
- Inappropriate behavior or violation of rules

If an individual is dismissed due to inappropriate behavior or violation of rules, documentation will be made of

the incidents and the attempts to assist the individual through recommendations provided by the interdisciplinary team, counseling, and training methods. Documentation should indicate that such efforts failed to improve the severity of the infractions.

Referral/Follow-Up

Upon discharge, the individual will be assisted, if needed, with referrals to services most appropriate to meet his/her needs and wants.

Follow-up services provided through Pathfinder, Inc. will be made to assure adequate adjustment of the individual. The services include telephone calls and/or visits within at least thirty (30) days, sixty (60) days, and ninety (90) days post discharge.

Readmission

Upon request, individuals wanting readmission into the program must complete all admissions criteria as previously established.

PERSON-CENTERED SERVICE PLAN (PCSP)

Purpose

The PCSP Plan is a treatment plan that determines the services that an individual receives in order to enhance and maintain community living, support the person's major life activities, determine the individual's personal choices and preferences about their life, assist the individual in executing these choices, accessing employment services, and assisting the person with integrating into the community. The PCSP is a team process and the product of interdisciplinary team input. The team includes: the individual, family members (if applicable), guardian (if applicable), advocate (as requested by the individual), PASSE case manager, all relevant staff members including support staff, staff of other appropriate service agencies, and the Director of Residential Services.

The plan should reflect the individual circumstances and potential of the individual. The plan should assure that the beneficiary's rights are safeguarded and that the beneficiary and community's health and safety are assured. Furthermore, the plan must be designed to assure that the plan is changed in response to changing needs or circumstances. The plan should be developed while considering what options are the most cost-efficient.

Key Components

- A. The PCSP documents the individual's strengths, needs, and plan development based upon their needs assessment.
- B. The PCSP includes documentation of the necessary adaptations or modifications within the environment to assist him/her in achieving the maximum functional development possible.
- C. Service objectives to be implemented will be specified.

- D. Positive interventions and supports used prior to any modifications and less intrusive methods of meeting the client's needs that were not effective will be documented in the client's person centered service plan.
- E. A clear description of the condition that is directly related to the specific need identified in the assessment will be documented in the PCSP.

Documentation

Written documentation is made on each service an individual receives. Employees are required to maintain documentation to support each service for which billing is made. This documentation includes: the services rendered, date of service, time of service, name of individual providing service, updates about progress or lack thereof, and any other pertinent information relating to the consumer or the services provided.

Measuring Progress

Measurable objectives are completed at the end of each thirty (30) day period and will reflect daily progress notes. Objectives and outcomes are viewed on a quarterly basis to evaluate effectiveness and updated as necessary.

Annual Review

Each year an Annual Review Conference is held. The consumer chooses who he/she wants to attend the meeting. During this meeting, the individual's PCSP is reviewed to determine any necessary changes or additions.

SERVICES – RESIDENTIAL

Training Skills

Individuals who are served in the Adult Living component receive training in the following skills: personal appearance skills, socialization skills, communication skills, cognitive development skills, sensory motor skills, recreational skills, home management skills, homemaking skills, community living skills, money management skills, and health related skills.

Supportive Living

Supportive Living is an array of individually tailored services that allow the individual served to reside in the community. All Supportive Living Services are provided in an integrated community setting. The focus of this service is to assist individuals in acquiring, retaining, and improving self-help, socialization, and adaptive skills that are required for an individual to successfully live in a community based setting. Services are flexible to allow for unforeseen changes needed in schedules and times of service delivery.

Supported Employment

The Supported Employment component provides support to individuals with disabilities in reaching their goal of working in competitive, integrated work settings, receiving compensation of at least minimum wage. This

service typically helps individuals who have not traditionally been able to secure or retain competitive employment. The Supported Employment Service Array includes:

Discovery Career Planning: This portion involves the gathering of information about a consumer including interests, strengths, skills, most effective types of supports, and best fitting environment and activities. This information results in an Individual Career Profile which provides an individualized guide making recommendations regarding employment support.

Employment Path: Through this portion of the array, individuals are given the support and assistance necessary to achieve the employment goals included in their person centered service plan (PCSP). Activities conducted include those that will develop and teach soft skills that the individual needs in order to maintain integrated employment.

Employment Supports: The Job Development component functions to provide services specific in nature to obtaining a certain employment opportunity. Job Coaching is a support provided on-site to the individual once employment is obtained. Extended Services are provided to provide continued support to promote long-term employment for the individual.

Adaptive Equipment

Adaptive Equipment Services are available to individuals who require an item or piece of equipment to increase, maintain, or improve functional capabilities in order to perform daily life tasks. This provides the purchase, leasing, and necessary repair of adaptive, therapeutic, and augmentative equipment.

Specialized Medical Supplies

Specialized Medical Supplies are available with an order from a physician. Specialized Medical Supplies are included in the plan and may include:

- Items necessary for life support or to address physical conditions with ancillary supplies
- Durable and non-durable medical equipment that addresses beneficiaries functional limitations but is not available through Arkansas Medicaid State Plan
- Necessary medical supplies not available through Arkansas Medicaid State Plan to include nutritional supplements, non-prescription medications and out-of-pocket co-pays for prescription drugs.

Supplemental Support Services

Individuals are able to access supplemental supports in response to a crisis, emergency or life threatening situation. The situation, without the remedy provided through this support, must result in institutionalization.

Consultation

Consultation services are available and are clinical and therapeutic in nature. They are designed to help waiver beneficiaries, parents, guardians, legally responsible individuals, and service providers in fulfilling the requirements of the PCSP. Consultation activities may be provided by individuals licensed as: psychologists, psychological examiners, mastered social workers, professional counselors, speech pathologists, occupational

therapists, physical therapists, registered nurses, certified parent educators or provider trainers, certified communication and environmental control specialists, dieticians, rehabilitation counselors, recreational therapists, qualified developmental disabilities professionals, positive behavioral supports specialists, and behavior analysts.

Community Transition Services

This service is a non-recurring support that assists an individual with set-up expenses to transition to a living arrangement in a private residence. This service may provide assistance in paying for: security deposits required to obtain a lease, essential household furnishings and moving expenses, set up fees or deposits for utility or service access, services necessary for beneficiary's health and safety, and moving expenses.

Medication Monitoring and Administration

Pathfinder, Inc.'s Supportive Living Apartments and Group Homes do not manage medications, but will monitor the consumers' self-administration of medications, if necessary. Persons served in this program must be capable of self-administering medications or authorizing their direct care employee under the *Consumer Directed Care Act* to monitor the administration of medications. All prescribed medications must have the name of the medication, date, consumer name, prescribing physician and pharmacy including contact information, instructions for use, and dosage including strength and frequency. A copy of side effects and drug interactions will be kept in the consumer file. All medications will be secured and locked to ensure the consumer safety. Medications requiring refrigeration and/or protection from light will be secured and stored appropriately. If necessary, the employee will upon prompt provide the medication to the person served.

Residents must be willing and able to follow their prescribed medication regimen. Residents may choose to maintain and coordinate their own medication regimen without assistance or monitoring. Residential employees will monitor medications as necessary for those residents requesting assistance.

Ancillary Services

As well as training in the above areas, Pathfinder, Inc.'s Residential Services offers the following ancillary services to residents: transportation (to work, recreational activities, and medical appointments), food services/GSA custodial services, diagnostic and evaluation, health services, information, referral, and follow-up, learning skills (reading, writing math), protective and socio-legal services, counseling services, planned recreational and social activities, advocacy.

Emergency Respite

Plaza Group Home has one (1) respite bed available for a male or female. Services are provided for one (1) day or up to two (2) weeks, if space is available and the needs of the person requesting respite can be met.

Reservations for placement can be made by contacting the Director of Residential Services (501-982-0528). Once a date has been arranged, the respite individual will need to provide clothing, personal items, spending money, medication and a written schedule of dosage, time for self-administering medicines, a copy of his/her Medicaid card or other form of medical insurance, and the name, address, and phone number of a contact

person. During the respite period, all meals, transportation, and a variety of activities will be provided. Pathfinder, Inc. reserves the right to end the respite period before the scheduled time if the health and safety cannot be insured for the guest, residents, or staff.

Money Management

- A. In accordance with our policy, Pathfinder, Inc. will assume the following responsibilities and provide the following services at the time of moving:
- B. Pathfinder, Inc. will request to become the payee of SSI/SS benefits
- C. A bank account will be opened for the consumer which will be entitled “(Name) by Pathfinder, Inc. Representative Payee”.
- D. The funding source will be deposited directly into this bank account.
- E. Only Residential Manager’s and Administrative Secretaries in Residential Services will sign checks on the account (only one signature will be required).
- F. The client bookkeeper/administrative secretaries will assist with writing checks for bills (i.e. rent, phone, cable, groceries, co-pay for medical expenses, or personal spending, etc.).
- G. The client will receive personal spending (fun money) once a week to enjoy as he/she pleases. The amount will be determined in accordance with the individual’s budget.
- H. Receipts will be maintained and the Money Management Books will be readily available for resident/guardian(s) review.
- I. The bank statement will be sent directly to Pathfinder, Inc. accounting for monthly inspection of proper money management. Upon completion of Pathfinder, Inc. accounting reconciling accounts, the Money Management book will be retained in the Accounting Office at Pathfinder, Inc.’s Administration Building.
- J. Pathfinder, Inc. will be responsible for all Social Security audits.

FACILITY RULES - RESIDENTIAL

Supervised Apartment Living Rules

- A. *Rent*: Clients residing in Supervised Living Apartments are responsible for their own bills, to include: rent (ten [10] percent of their income—HUD), food, utilities, personal items, medications, medical bills, etc.).
- B. *General Conduct*: Good conduct is expected at all times. Residents should respect community laws and the rights of others.
- C. *Infractions on Other’s Rights*: All residents are expected to behave as responsible, law abiding citizens. The following infractions on other’s resident’s rights will not be tolerated: fighting, verbal abuse, stealing, any behaviors endangering the health/safety/welfare of others, bringing illegal substances or weapons onto Pathfinder, Inc.’s property, and lack of respect for the Residential Manager’s privacy when off duty. (However, if an emergency occurs, the Residential Manager should always be notified.)
- D. *Overnight Guests*: Guests may be allowed to stay overnight with proper notification to the manager. Visitors must follow rules of conduct. Overnight guests must meet HUD and DHS regulations for visits.
- E. *Client Out of Home Visit*: Clients may visit friends and/or relatives for an overnight, weekend, or vacation. To ensure medications and financial needs are provided timely, the Residential Manager should be informed of client’s out of home visits at least twenty-four (24) hours prior. This will assist in

making arrangements for when Pathfinder, Inc. transportation is requested. On the “*Sign Out Form*”, the individual should give the planned destination, emergency telephone number, and an estimated time of return in case of emergency.

- F. *HUD Guidelines*: Pathfinder, Inc. will follow HUD guidelines in all residential settings. All guests will be required to adhere to regulations and rules. Failure to do so could result in visitation restrictions by HUD.
- G. *Apartment Upkeep*: Residents are responsible for keeping their apartment and living areas neat and clean. The Residential Manager will conduct periodic unit inspections.
- H. *Household Furnishings*: Residents should take proper care of household furnishings. Costs of damages are to be reimbursed by the resident. Furnishings cannot be removed from the apartment if they are Pathfinder, Inc. property.
- I. *Electricity and Appliances*: Residents should be safe and conservative with electricity and appliances.
- J. *Smoking*: Due to HUD regulations, smoking is prohibited inside apartments and common areas. Smoking areas are designated.
- K. *General Areas*: General areas including laundry rooms, recreation areas, court yards, etc. should be kept clean and well maintained after use by residents.

Group Home Rules

- A. *Housekeeping Duties*: Everyone is expected to share in the housekeeping duties of the facility. Tasks have been divided into these areas: preparation and cooking of food, table setting, clearing and washing dishes, sweeping and mopping, cleaning of all appliances and garbage removal, vacuuming, and cleaning outside area including the patio. Each resident will be assigned to periods starting on Monday mornings. Each resident is to familiarize themselves with the list of duties.
- B. *Responsibilities*: Each resident is expected to be responsible for making his/her own bed daily, washing his/her dirty garments and linens at least weekly, hanging his/her clothing daily, organizing his/her room daily, and taking care of his/her bathing and personal hygiene daily.
- C. *Overnight Guests*: Each resident must schedule overnight visitors with the Residential Manager using the designated form due to limited space.
- D. *Finances*: Each resident will assume his or her percentage of cost of room and board.
 - Plaza Group Home: rent based on income (HUD facility)
- E. *Maintenance*: Each resident will be responsible for maintaining himself/herself in his/her environment; however, if a resident is unable to independently function in this capacity, the agency will assist and/or assess needs for additional training, services, or alternate placement. If a resident is terminated for inappropriate behavior, documentation and evidence will be kept of efforts to assist residents and/or referrals to acquire help or alternate placement.

General Rules

- A. Dumpsters are available and should be used regularly to dispose garbage and trash. Trash should not be piled in living quarters.
- B. Improper items shall not be flushed down the toilet.
- C. Cigarettes, trash, or other items shall not be thrown from patios or onto court yards.

Transportation Rules

- A. Transportation will be provided to and from work, recreational activities, shopping trips, and to doctor and dentist appointments. Individuals are responsible for getting themselves up and to the van.
- B. Van passengers must use safety belts at all times.
- C. Mannerly conduct is required during transport.
- D. All residents who own and operate a vehicle shall comply with applicable laws of the Arkansas State Department of Revenue, the Motor Vehicle Department, and Licensure Bureau.

Safety Drill Rules

Managers will hold fire, tornado, and other drills to insure protection of individuals in case of an emergency. Clients are responsible to participate in these drills for their health and safety.

Health and Medical Rules

- A. Residents must be willing and able to follow prescribed medication regimens. Residential staff can monitor medications as necessary to those who need assistance.
- B. Residents should notify Residential Managers when they are unable to attend work due to illness. Staff will assist to secure medical care, as needed.
- C. Residents should learn and apply first aid for minor accidents.
- D. All injuries should be reported to the Residential Manager.
- E. If a resident's health becomes a major problem, or if a terminal illness develops, a staffing will be held to decide the action to be taken with the client's best interest in mind.

Health and Safety Inspections

Health and safety inspections are conducted once a week by Pathfinder, Inc. staff to check for cleanliness (health) and proper operations of household and safety equipment. A record is kept of health and safety performance. HUD regulations require that residents in HUD assisted programs keep their apartment clean, safe, and in the same condition that the apartment was originally found.

Facility Phone Rules

- A. Telephone calls made from the facility phone should be limited to 10 minutes.
- B. With permission, long distance calls may be made and charged to the facility phone. The resident will be required to reimburse Pathfinder, Inc. for such calls.

Pet Policy

No animals shall be kept on the premises without Pathfinder, Inc.'s prior, written approval. After the client receives approval from the Director of Residential Services to keep the animal on the premises, the client will pay Pathfinder, Inc. three hundred (300) dollars per pet. This will be held by Pathfinder, Inc. and used against any damage done to the premises by the client's pet(s). The client agrees to pay, when billed, the full amount of any damage in order that the deposit will remain at three hundred (300) dollars. The security deposit shall be

returned to the client, without interest and less any deductions, upon the termination of their lease and completion of an inspection revealing no damages.

Overnight Guests

Overnight guests may be allowed after scheduling through the Residential Manager/designee and a guardian, if applicable. All overnight guests must complete and submit a visitation schedule request to the Residential Manager/designee.

Pathfinder, Inc. will follow HUD guidelines in all residential settings regarding overnight visitors. All guests will be required to adhere to regulations and rules. Failure to do so could result in visitation restrictions by HUD.

Any person visiting a Pathfinder, Inc. Residential Facility will be responsible for his/her own medication administration. Pathfinder, Inc. employees will not be responsible for any medication monitoring, medication documentation, or securing any medication for visitors.

Pathfinder, Inc. employees will not provide supervision to any visitors, except in ensuring the health and safety of all residents and staff present. Visitors assume responsibility for their own finances, medication, personal belongings, personal hygiene, and/or medical health needs.

BEHAVIOR MODIFICATION - RESIDENTIAL

Behavior Modification

To develop appropriate behaviors, forms of positive behavior modification and intervention are applied using basic concepts of socialization. Individuals served may have a positive programming behavior management plan used to reinforce methods as a means of promoting positive behavior. Employees will receive appropriate training in the management of the behavior management plan.

Positive Behavior Support (PBS)

Positive Behavior Support (PBS) Training is offered to employees to assist in developing and implementing positive behavior plans. The form of behavior modification employed by Pathfinder, Inc.'s professional employees and aides is one of positive reinforcement. Desired behaviors are consistently reinforced. The use of seclusion or restraints in any Pathfinder, Inc. program is strictly prohibited.

Evaluation of Personal Stressors and Environment

In order to ensure the most positive environment to prevent episodes of inappropriate behavior, staff should recognize personal stressors of the individual and work on promoting an environment free of those stressors. Socially acceptable behavior should be modeled and identified to the consumer. Consumers should be encouraged to focus on appropriate behaviors by use of positive intervention techniques.

Crisis Prevention Intervention (CPI)

Identified Pathfinder, Inc. personnel receive training in Non-Violent Crisis Prevention Intervention (CPI), an

authorized national certification in non-seclusion or restraint emergency hold intervention procedures. CPI is used only to protect consumers and employees from injury. This emergency intervention is used only:

- In the least restrictive manner and minimal time frame to ensure the safety of all present
- Only by trained individuals
- Is assessed by the program director for trends

If an individual needs more than two (2) emergency holds per month their plan of care will be assessed by their team to determine any environmental causes, past trauma indicators, and appropriateness of placement.

Individual/Parent/Guardian Rights

- A. Individual/parent/guardian will have input into the program plan and should sign the plan.
- B. Individual/parent/guardian is aware that the program is voluntary as evidenced by documentation signed upon admission.
- C. Individual/parent/guardian participation in campaigns for publicity efforts to raise funds for the organization is on a voluntary basis (i.e., signed release for each occurrence).
- D. Individual/parent/guardian has input into the rules of conduct utilized by the facility.
- E. Individual/parent/guardian is informed of the grievance procedure developed by the facility.
- F. Individual/parent/guardian is informed of the rights of majority and HUD rights and responsibilities.
- G. Individual/parent/guardian has the right to refuse any experimental or non-standard form of treatment, including restraint.
- H. Individual/parent/guardian is informed of the confidential nature of all resident's information and the right to approve or deny the release of identifiable information.
- I. Employment of individuals will be in compliance with Federal Wage and Hour Regulations. No resident shall work as a substitute for any paid employee of Pathfinder, Inc. Supervised Living.
- J. Organization will provide upon request a summary of any monitoring or evaluation reports of their facility prepared by and received from federal, state, or local authorities.
- K. Individual/parent/guardian has been informed as to the discharge/exit procedure developed by the facility.
- L. Individual/parent/guardian has been informed of their right to the least restrictive setting.
- M. Individuals have been informed of their right to be free from abuse, financial, or other exploitation, retaliation, humiliation, neglect and coercion.
- N. Individuals who are their own guardian have the right to decide whether or not their family is involved in the planning and implementation of their annual plan.
- O. Individuals have the right and opportunity to use generic services and resources in the community.
- P. Individuals have the right to obtain and retain personal property.
- Q. Individuals have the right to receive a current list of Pathfinder, Inc.'s Board Members and a list of current state funding sources.
- R. Client's apartment is not show to visitors in Supervised Living Facilities without written consent.
- S. Client/parent/guardian is informed of legal responsibilities.
- T. Client has the right to communicate, which includes sending or receiving mail and conducting private conversations and/or visits with family and friends.

- U. Privacy is made available to clients in their units with a lockable door that only the client and appropriate staff have key access to. All clients have privacy for personal hygiene. Mirrors are available for use as a grooming aid.
- V. Client/parent/guardian is given an orientation at the facility and the program provided by Pathfinder, Inc. Client/parent/guardian has the opportunity to observe the organization and to discuss needs, including employment, before enrollment.
- W. The organization will allow and nurture a home environment which will provide frequent opportunities for social interaction and family-like relationships. The clients have the support to control their own schedules and activities and have access to food, unless choosing to follow physician orders requiring special diets or control of food intake.
- X. The organization will provide opportunities for recreational activities on a regular basis both inside the facility and in the community.
- Y. The organization will provide or assist in the provision of transportation for planned leisure time and recreational activities, back and forth to job/daily programming, special events, medical and dental appointments, etc.
- Z. The organization group homes will have in attendance twenty-four (24) hours a day a responsible mature person to provide for the client's needs. This includes the ability to deal with medical emergencies and provide care for medically determined minor illnesses that are appropriate to be cared for in the facility. Clients in apartments will have access to an on-call staff twenty-four (24) hours a day.
- AA. All staff are provided with orientation for procedures regarding emergencies, appropriate community services, and reporting requirements to state agencies.
- BB. The organization will facilitate adequate medical/dental care as needed by residents and will provide necessary supervision by trained staff for the monitoring of prescribed medication(s). Accurate records will be kept on medications taken and documentation will be kept of unusual symptoms.
- CC. The organization will make available to the client/parent/guardian, upon request, a summary of any assessing, planning, coordination, monitoring, or updating of reports of services prepared by the designated authorities.
- DD. Individuals over the age of twenty-one (21) have the right to consume alcohol if they are their own legal guardian but must do so responsibly.
- EE. Client/parent/guardian has been informed of all of his/her rights.

Summary of Rights

Persons who have developmental disabilities have the same rights as all other citizens; these rights cannot be limited or taken away without due process. Individuals are entitled to individual considerations in the respect that they cannot be deprived of rights or denied them because of their disability alone; each case must be considered individual.

In addition to the rights all citizens have, individuals with developmental disabilities whom agencies serve have specific rights to be safe, secure, and not to be subjected to punishment. Specific procedures to safeguard rights have been established.

United States Constitutional Rights

- A. The right of freedom of speech and expression
- B. The right of freedom to religion
- C. The right to association
- D. The right to marry, procreate, and raise children
- E. The right to vote
- F. The right to meaningful and fair access to courts, including legal representation
- G. The right to contract and the right to own and dispose of property
- H. The right to privacy
- I. The right to be free from cruel and unusual punishment
- J. The right to equal protection and due process of law
- K. The right to fair and equal treatment by public agencies
- L. The right to an equal educational opportunity
- M. The right to have residential and educational services provided in a humane and least restrictive environment
- N. The right to meet civil and legal responsibilities.

Rights of Individuals with AIDS, HIV, or Hepatitis B

Individuals with AIDS or an HIV related condition (or those who may be perceived as having AIDS or AIDS related condition) are not discriminated against in accordance with 29 U.S.C. 706(8), 784(b); U.S.C. 121010 et. Seq. Each individual/parent/guardian shall be provided a copy of this procedure.

Pathfinder, Inc. will protect the confidentiality of records or computer data which is maintained related to Hepatitis B, HIV, or Aids.

Discharge

Discharges may be made for the following reasons:

- Pathfinder, Inc.'s inability to ensure the health and safety of the resident
- Voluntary withdraw by the individual or legal guardian
- Inappropriate behavior or violation of rules

(If an individual is dismissed due to inappropriate behavior or violation of rules, documentation will be made of the incidents and the attempts to assist the individual through recommendations provided by the interdisciplinary team, counseling, and training methods. Documentation should indicate that such efforts failed to improve the severity of the infractions.)

Referral/Follow-Up

Upon discharge, the individual will be assisted, if needed, with referrals to services most appropriate to meet his/her needs and wants.

Follow-up services provided through Pathfinder, Inc. will be made to assure adequate adjustment of the individual. The services include telephone calls and/or visits within at least thirty (30) days, sixty (60) days, and ninety (90) days post discharge.

Readmission

Upon request, individuals wanting readmission into the program must complete all admissions criteria as previously established.

HOME AND COMMUNITY BASED SERVICES (HCBS)

Purpose

Pathfinder, Inc. Home and Community Based Services is designed to provide individuals with disabilities the right to live in a home of his/her choice and to have a role as a participating and accepted member of his/her community. The planning, coordination, and implementation for support services are based upon consumer's individual needs and preferences to assist him/her in reaching maximum growth potentials toward independence.

The type and level of support is based upon evaluation, diagnosis, and an assessment of the needs and preferences of each individual receiving services. Person Centered Service Plan (PCSP) assures teamwork consistency in service delivery is discussed during the PCSP.

The program provides opportunities and avenues to learn from participation in daily life experiences. Individuals will learn most readily when they have the daily opportunity to face the challenges and consequences, while also experiencing the reward of the environment to which they are trying to adjust.

The consumer is an active participant in the service delivery plan. The program recognizes that individuals with developmental needs have a need, equal to that of any other citizen, to control their own lives, to manage their own affairs, and to make their own decisions concerning the present and future direction of their lives.

The program is designed to serve as a connecting force in the establishment of fulfilling and meaningful relationships for the individual. All individuals, regardless of their disability have the need to feel accepted within the community and to participate in activities, interactions, and mutually supported relationships with a variety of people in a variety of environments.

Mission

Individuals who have been diagnosed developmental disabilities are too often the victims of rejection and segregation from the mainstream of society. Without some assistance, they seldom have the adequate decision making capabilities, social skills, and resources needed to develop significant personal relationships aside from caring family members or professional personnel. Because of the stigma that can be attached to their disabilities, they may find themselves isolated from normal, everyday community activities and routines which non-handicap persons take for granted..

It is the intent of Pathfinder Home and Community Based Services to be a connecting force in integrating

individuals with disabilities into successful and fulfilling community life. The program seeks to help each consumer gain more control, competence, and confidence with things in their lives that are meaningful to them. Through personalized training, the individual gradually learns self-sufficient life skills including:

- Assuming greater responsibility for his/her life situation
- Being included in ordinary community experiences at the maximum capacity
- Developing lasting relationships with typical citizens and family members

Philosophy

The Home and Community Based Services component of Pathfinder, Inc. upholds the agency's basic concept that all people, regardless of individual differences and intellectual abilities, have an inalienable right to an education and vocational program which is consistent with their needs and helps them to achieve their maximum potential. The program also supports the belief that every person has the right to live in the community of his/her choice and to become integrated as an active, accepted member.

Service Goals

The services goals assist adults with developmental disabilities to lead meaningful lives in small, dispersed segments of the community through the following:

- A. To build self-esteem and self-confidence which will be carried over into all parts of his/her life.
- B. To acquire life skills and decision making capabilities in the control of one's life and to live as independently as possible.
- C. To send positive messages about the individual to the community associates for the encouragement of interaction and the development of mutually satisfying relationships.
- D. To protect the legal rights of the consumer and to advocate with community resources for the enhancement of quality of life.
- E. To develop effective teaching methods in promoting maximum participation and input from the consumer in establishment of his/her learning goals and the responsibilities to achieve these goals.
- F. To create growth-producing challenges and opportunities.
- G. To provide ongoing support as often and for as long as needed, so each individual may have a safe, healthy, and satisfying life experience as a contributing member of his/her community.

Funding Source

Pathfinder, Inc. Home and Community Based Services are funded through Developmental Disability Services Medicaid Waiver.

Accreditation

Pathfinder, Inc. has received accreditation from Commission on Accreditation of Rehabilitation Facilities (CARF).

ADMISSION/DISCHARGE - HCBS

Application for Home and Community Based Services

To apply for Home and Community Based Services please call DDS Intake and Referral [\(501\) 683-5687](tel:5016835687). There is a waiting list for HCBS Medicaid Waiver services so the sooner an application is placed on file the sooner an individual will be able to receive these valuable services.

Eligibility for Home and Community Based Services

In order for an individual to be eligible to receive Waiver Services, they will be required to complete the intake and assessment process of the Developmental Disability Services (DDS) Home and Community Based Services Program. This includes: determination of categorical eligibility, institution level-of-care determination, comprehensive diagnosis and evaluation (including an independent assessment), development of a person-centered service plan (PCSP), cost comparison to determine cost effectiveness, and notification of a choice between home and community based services and institutional services.

Waiting List

Pathfinder, Inc. Waiver Program does not maintain a waiting list. Applicants waiting for services are maintained by Department of Disability Services (DDS). An individual may be placed on one (1) of two (2) waiting lists:

- A. Regular Waiting List: All individuals not eligible for priority placement
- B. Specialized Waiting List: To include one (1) of the following: DCFS custody, State Hospital, ICF/IID resident with waiting waiver placement, applicant or resident DDS operated group home or apartment

Referral

Upon an individual being deemed eligible to receive Waiver Services, Pathfinder, Inc. will receive the referral from DDS. This referral will contain the information about the individual necessary for Pathfinder, Inc. Waiver Services to determine if they are able to provide the services the individual requires. In the instance that an individual's needs cannot be accommodated, an *"Unable to Serve Form"* will be submitted to DDS to inform them of the decision and the reasons for the decision.

Acceptance Decision

The committee will meet in order to review pertinent information about the individual to determine if the individual is eligible to receive services in the requested environment, either in their own home residence or family residence or a Waiver Home. Upon collaboration of the team, a decision will be made regarding the teams determination. If the individual is determined ineligible, the individual, parents/guardian, and referral source will be informed and given the reasons for the decision. Additionally, they will be provided recommendations of other programs or facilities that might be able to accommodate the needs of the individual.

If the individual is determined eligible for the requested environment, a date for admission will be arranged by the committee. The individual, parents/guardian, and referral source will be informed of the decision of the

team.

Discharge

An individual may be discharged for the following reasons:

- The health and safety of the individual, caregivers, workers cannot be assured
- The individual or legally responsible person has refused or refuses to participate in the plan of care development or to permit implementation of the plan of care
- The individual or legally responsible person refuses to permit the on-site entry of: the care coordinator to conduct required visits, caregivers to provide scheduled care, any other official acting in their role as oversight authority.
- The individual requires 24-hour nursing care on a continuous basis
- The individual is incarcerated or is an inmate in a state or local correctional facility
- The individual is deemed ineligible based on a DDS Psychological Team assessment
- The individual is deemed ineligible based on not meeting the Medicaid income eligibility
- The individual does not undergo an independent assessment by a third-party vendor

Upon discharge, the individual will be assisted, if needed, in referrals to services most appropriate to meet his/her needs and/or preferences. To ensure that a smooth transition takes place, the individual will receive follow-up services at thirty (30), sixty (60), and ninety (90) days. All efforts will be made to ensure that the individual is able to transition out of the program as smoothly and timely as possible.

SERVICES - HCBS

Concept

The service concept follows the overall principle: to do whatever is necessary to maintain the consumer living in the community life of his/her choice.

Supportive Living

Supportive Living is an array of individually tailored services that allow the individual served to reside in their own homes, with their family, or in alternative living residence or settings. All Supportive Living Services are provided in an integrated community setting. The focus of this service is to assist individuals in acquiring, retaining, and improving self-help, socialization, and adaptive skills that are required for an individual to successfully live in a home or community based setting. Services are flexible to allow for unforeseen changes needed in schedules and times of service delivery.

Respite services are provided on a short-term basis to consumers unable to care for themselves due to the absence of or need for relief of non-paid caregivers. Respite may be provided in the consumer's home, the private residence of a respite care giver, a foster home, group home or other licensed respite facility.

Supported Employment

The Supported Employment component provides support to individuals with disabilities in reaching their goal of working in competitive, integrated work settings, receiving compensation of at least minimum wage. This service typically helps individuals who have not traditionally been able to secure or retain competitive employment. The Supported Employment Service Array includes:

Discovery Career Planning: This portion involves the gathering of information about a consumer including interests, strengths, skills, most effective types of supports, and best fitting environment and activities. This information results in an Individual Career Profile which provides an individualized guide making recommendations regarding employment support.

Employment Path: Through this portion of the array, individuals are given the support and assistance necessary to achieve the employment goals included in their person centered service plan (PCSP). Activities conducted include those that will develop and teach soft skills that the individual needs in order to maintain integrated employment.

Employment Supports: The Job Development component functions to provide services specific in nature to obtaining a certain employment opportunity. Job Coaching is a support provided on-site to the individual once employment is obtained. Extended Services are provided to provide continued support to promote long-term employment for the individual.

Adaptive Equipment

Adaptive Equipment Services are available to individuals who require an item or piece of equipment to increase, maintain, or improve functional capabilities in order to perform daily life tasks. This provides the purchase, leasing, and necessary repair of adaptive, therapeutic, and augmentative equipment.

Environmental Modifications

This service allows for modifications to or at the beneficiaries home that are necessary to ensure the health, welfare, or safety of the beneficiary or that allow the beneficiary to function with greater independence and that without the individual would require institutionalization. Environmental accommodations may include the installation or building of grab-bars, wider doorways, accessible bathroom facilities, special electric and plumbing systems to accommodate ambulatory impairments, and home fencing.

Specialized Medical Supplies

Specialized Medical Supplies are available with an order from a physician. Specialized Medical Supplies are included in the plan and may include:

- Items necessary for life support or to address physical conditions with ancillary supplies
- Durable and non-durable medical equipment that addresses beneficiaries functional limitations but is not available through Arkansas Medicaid State Plan

- Necessary medical supplies not available through Arkansas Medicaid State Plan to include nutritional supplements, non-prescription medications and out-of-pocket co-pays for prescription drugs.

Supplemental Support Services

Individuals are able to access supplemental supports in response to a crisis, emergency or life threatening situation. The situation, without the remedy provided through this support, must result in institutionalization.

Direct Care Supervisor Services

Direct Care Supervisor works with the PASSE Care Coordinator to oversee an individual's services from coordination to delivery. These includes the following: health education and coaching, coordination with healthcare providers, assistance with social determinants of health, promotion of activities focused on the health of an individual and the community, and coordination of community-based management of medication therapy. An individual's Direct Care Supervisor works with the individuals' PASSE Care Coordinator who assist with the care including the Behavioral Health Treatment Plan, Person-Centered Service Plan, Primary Care Physician Care Plan, Individualized Education Program, Individual Treatment Plans for developmental individuals in day habilitation programs, Nutrition Plan, Housing Plan, Work Plan, Justice System related plans, Child Welfare Plan, Medication Management Plan, etc.

Consultation

Consultation services are available and are clinical and therapeutic in nature. They are designed to help waiver beneficiaries, parents, guardians, legally responsible individuals, and service providers in fulfilling the requirements of the PCSP. Consultation activities may be provided by individuals licensed as: psychologists, psychological examiners, mastered social workers, professional counselors, speech pathologists, occupational therapists, physical therapists, registered nurses, certified parent educators or provider trainers, certified communication and environmental control specialists, dieticians, rehabilitation counselors, recreational therapists, qualified developmental disabilities professionals, positive behavioral supports specialists, and behavior analysts.

Community Transition Services

This service is a non-recurring support that assists an individual with set-up expenses to transition to a living arrangement in a private residence. This service may provide assistance in paying for: security deposits required to obtain a lease, essential household furnishings and moving expenses, set up fees or deposits for utility or service access, services necessary for beneficiary's health and safety, and moving expenses.

BEHAVIOR MANAGEMENT - HCBS

Positive Behavior Support (PBS)

Positive Behavior Support (PBS) Training is offered to employees to assist in developing and implementing positive behavior plans. The form of behavior modification employed by Pathfinder, Inc.'s professional employees and aides is one of positive reinforcement. Desired behaviors are consistently reinforced. The use of

seclusion or restraints in any Pathfinder, Inc. program is strictly prohibited.

Evaluation of Personal Stressors and Environment

In order to ensure the most positive environment to prevent episodes of inappropriate behavior, staff should recognize personal stressors of the individual and work on promoting an environment free of those stressors. Socially acceptable behavior should be modeled and identified to the consumer. Consumers should be encouraged to focus on appropriate behaviors by use of positive intervention techniques.

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Identified Pathfinder, Inc. personnel receive training in Non-Violent Crisis Prevention Intervention (CPI), an authorized national certification in non seclusion or restraint emergency hold intervention procedures. CPI is used only to protect consumers and employees from injury. This emergency intervention is used only:

- In the least restrictive manner and minimal time frame to ensure the safety of all present
- Only by trained individuals
- Is assessed by the program director for trends

If an individual needs more than two (2) emergency holds per month their plan of care will be assessed by their team to determine any environmental causes, past trauma indicators, and appropriateness of placement.

COMMUNITY WAIVER

Medication Monitoring

Individuals receiving HCBS Waiver must be willing and able to follow their prescribed medication regimen. Waiver staff can monitor medications as necessary for those individuals needing assistance. However, they cannot administer any medications including, but not limited to, over-the counter medications, prescribed medications, and injections necessary for the health of the individual or any blood testing. The Waiver staff will ensure that medications are taken as prescribed during the time that they are providing services to the individual. Furthermore, a log is maintained for staff to document that the individual was observed taking his/her medication as prescribed.

WAIVER HOMES

Purpose

Pathfinder, Inc. has a Waiver Home that is designed to meet the special needs of individuals through a home-like experience. The individuals in this facility receive twenty-four (24) hour supervision and an intensive training program that encompasses social, emotional, cognitive, and physical skills in order to assist the individuals in living more independently.

Locations

Pathfinder, Inc. currently has one (1) Waiver Home:

Cave Springs Waiver Home
300 Hart Lane
Cave Springs, AR 72718

Eligibility

To be eligible for program acceptance into a Pathfinder, Inc. Waiver Home, an individual must meet the following criteria:

- The individual must be aware that the Waiver Home is a voluntary program.
- The individual must be developmentally disabled and be at least eighteen (18) years of age or older.
- The individual must be willing to learn to be responsible for his/her own personal needs.
- The individual's behavior must not endanger the welfare or health of another resident or staff person.

Admission

Before an individual is admitted to the Waiver Home, they must complete the following: social evaluation, medical evaluation, and psychological evaluation report (current within five [5] years). Upon reporting to the facility on the pre-arranged date, the individual will be given a detailed orientation of the program covering the following: full explanation of the program, a review of the documentation of developmental disability, completion of the record face sheet, completion of necessary releases including the emergency medical release, statement of legal status, review and explanation of client/guardian rights, review and explanation of rules and regulations including safety rules and precautions, purpose and procedures of money management system, and the overall services provided by Pathfinder, Inc.

Money Management

Pathfinder, Inc. provides Money Management Services to individuals living in the Waiver Homes. Pathfinder will assume the following responsibilities:

- A. Pathfinder, Inc. will request to become the payee for the individual's SSI/SS benefits
- B. A bank account will be opened on behalf of the resident entitled "(Individual's Name) by Pathfinder, Inc. Representative Payee".
- C. The individual's funding source will be deposited directly into this bank account.
- D. Only the house manager or Director of Waiver Services will be able to sign checks on the account.
- E. The designated Pathfinder, Inc. personnel will assist in writing checks for bills or other expenses.
- F. Individuals will receive spending money once a week to spend as they choose. The amount given to each individual is determined by his/her budget.
- G. Receipts will be maintained and money management books will be readily available for individual and parent/guardian review.
- H. The individual's bank statement will be sent directly to Pathfinder, Inc. auditors for monthly inspection of proper money management. Upon completion of Pathfinder, Inc. auditing, the individual's money management book will be retained in the Accounting Office at the Pathfinder, Inc. Administration Building

- I. Pathfinder, Inc. will be responsible for all Social Security Audits.

Medication Monitoring

Residents must be willing and able to follow their prescribed medication regimen. Waiver Home staff can monitor medications as necessary for those residents needing assistance. However, they cannot administer any medications including, but not limited to, over-the-counter medications, prescribed medications, and injections necessary for the health of the individual or any blood testing.

In order to assure the accuracy of doctor prescribed medications, Pathfinder, Inc. Waiver Homes use a commercial pharmacy to be the provider for all pharmacy needs for the Waiver Home residents. Daily, pre-packaged medications for each resident will be secured in a locked cabinet in the facility office. Waiver Home support staff will assist each resident with accessing their medications to ensure that they are taken at the prescribed times each day. A log will be maintained with the medications to document that staff observed each resident consume their medications as prescribed by their physician. Staff will also document on an *"Incident Report Form"* if a resident for any reason refuses to take their medication as prescribed by their physician.

Rights

Individual/Parent/Guardian Rights

- A. Individual/parent/guardian will have input into the program plan and should sign the plan.
- B. Individual/parent/guardian is aware that the program is voluntary as evidenced by documentation signed upon admission.
- C. Individual/parent/guardian participation in campaigns for publicity efforts to raise funds for the organization is on a voluntary basis (i.e., signed release for each occurrence).
- D. Individual/parent/guardian are informed of, and have input in, the rules of conduct utilized by the facility.
- E. Individual/parent/guardian is informed of the grievance procedure developed by the facility.
- F. Individual/parent/guardian is informed of the rights of majority.
- G. Individual/parent/guardian has the right to refuse any experimental or non-standard form of treatment.
- H. Individual/parent/guardian is informed of the confidential nature of all resident's information and the right to approve or deny the release of identifiable information.
- I. Organization will provide upon request a summary of any monitoring or evaluation reports of their facility prepared by and received from federal, state, or local authorities.
- J. Individual/parent/guardian has been informed as to the discharge/exit procedure developed by the facility.
- K. Individual/parent/guardian has been informed of their right to the least restrictive setting.
- L. Individual's employment will be in compliance with Federal Wage and Hour Regulations.
- M. Individual/parent/guardian has been informed of their right to be free from abuse, financial, or other exploitation, retaliation, humiliation, neglect and coercion.
- N. Individuals who are their own guardian have the right to decide whether or not their family is involved in the planning and implementation of their annual plan.

- O. Individual/parent/guardian is guaranteed to receive all financial interests due to them and to receive training to allow them to spend their income in a normalized fashion.
- P. Individuals have the right and opportunity to use generic services and resources in the community.
- Q. Individuals have the right to obtain and retain private property.
- R. Individual/parent/guardian has the right to receive a current list of Pathfinder, Inc.'s Board Members and a list of current state funding sources.
- S. Individual/parent/guardian has been informed of all of his/her rights.

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Pathfinder, Inc. will protect the confidentiality of records or computer data which is maintained related to

Hepatitis B, HIV, or Aids.

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An individual may be discharged for the following reasons:

- The health and safety of the individual, caregivers, workers cannot be assured
- The individual or legally responsible person has refused or refuses to participate in the plan of care development or to permit implementation of the plan of care
- The individual or legally responsible person refuses to permit the on-site entry of: the care coordinator to conduct required visits, caregivers to provide scheduled care, any other official acting in their role as oversight authority.
- The individual requires twenty-four (24) hour nursing care on a continuous basis
- The individual is incarcerated or is an inmate in a state or local correctional facility
- The individual is deemed ineligible based on a DDS Psychological Team assessment
- The individual is deemed ineligible based on not meeting the Medicaid income eligibility
- The individual does not undergo an independent assessment by a third-party vendor

Referral/Transition

Upon discharge, the individual will be assisted, if needed, in referrals to services most appropriate to meet his/her needs or needs and preferences. To ensure that a smooth transition takes place, the individual will receive follow-up services at thirty (30), sixty (60), and ninety (90) days. All efforts will be made to ensure that the individual is able to transition out of the program as smoothly and timely as possible.

EMPLOYMENT CONTRACTS

Contracts

- Food Service: Little Rock Air Force Base
- Custodial: Little Rock Air Force Base
- Mailroom: VA Support Services
- COE Mailroom: Federal Building Little Rock
- Litter Crew: Arkansas Highway Transportation Department

Purpose

The work and performance contracts aid the overall organizational goal by providing training and employment in an atmosphere that allows individuals to progress towards greater independence and an enhanced quality of life.

Applications

Applications are based on labor laws and regulations which mirrors the regular application and interview process.

Order of Acceptance

Pathfinder, Inc. contracts have a quota for disabled verses non-disabled. Compatibility to the work environment is taken into the account.

HOUSING AND URBAN DEVELOPMENT

Purpose

Pathfinder, Inc. is partnered with Housing and Urban Development (HUD) in an effort to provide healthy, safe, and affordable homes for consumers that live in our Residential Programs. The government gives funds directly to Pathfinder, Inc. for those who qualify for HUD assistance. HUD subsidies make up the difference between the amount a person can afford to pay (approximately 30% of the individual's gross monthly income) and the actual cost of the facility unit selected by the individual. Pathfinder, Inc. Residential Services follows HUD guidelines and has house rules for the health and safety of every consumer. Inspections are conducted routinely for cleanliness, safety, and necessary repairs.

Eligibility

Individuals must meet income requirements (at or below sixty [60] percent of the median income), be developmentally disabled and/or physically handicapped, and be twenty-one (21) years of age or older or eighteen (18) years of age with a completion of a school certificate. The condition of the individual's health must permit him/her to engage in at least a half day of activity leading to a full day.