# <u>ADAPT, Inc.</u> Policies and Procedures Manual

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#### Introduction

The policies and procedures of ADAPT are required by state regulations and laws, federal law, funding sources, Adapt's regional authority, Southwest Michigan Behavioral Health Authority (SWMBH), as well as those policies and procedures deemed necessary by Adapt administration to ensure the delivery of high-quality services and the existence of a pleasant work atmosphere.

- Adapt's policies and procedures are located in the following documents:
- Community Living Supports (Day Program) Consumer Handbook
- Residential Services Manual
- Employment Resources Worker Manual
- Policies and Procedures Manual

- Personnel Policies
- In-Home Supports Consumer Manual
- Outlook Clubhouse Handbook
- Individualized Emergency Plans for each Program/Site
- Abuse and Molestation Prevention Plan
- Corporate Compliance Plan
- Medication Manual

#### Code of Ethics - Financial Planning and Management

ADAPT is committed to fiscal stability and integrity. The financial practices of ADAPT will comply with legal requirements and sound business practice. Services will be provided in a manner which considers cost effectiveness, and avoids unnecessary duplication of services within the agency, and/or with other community service providers. Adherence to ethical standards will also apply to business practices and marketing of ADAPT's services and programs, personal fundraising, witnessing of documents, and human resource activities. All ADAPT staff must conduct themselves with honesty, transparency in actions, and integrity in all matters related to their work within the organization. There will be no reprisal or retaliatory action in the event an employee alleges a violation of the ethical code.

#### Cash Management Policy

It is the policy of ADAPT to authorize the Executive Director, with Board approval, to manage the funds of the Agency. The Executive Director will ensure sufficient working capital is kept on hand at all times. Investment funds shall only be placed on deposit with institutions approved by the Board of Directors. Planning for expenditures will be based on the Agency budget, which is to be approved, and amended as necessary, by the Board of Directors. The daily handling of receipts and disbursements incorporates a system of checks and balances. ADAPT shall commission an annual audit by a Certified Public Accountant (CPA). This audit will address and make recommendations concerning ADAPT cash management policies and procedures. These recommendations will be submitted to The Board of Directors on an annual Basis. In cases where ADAPT is responsible for consumer funds, separate ledgers will be maintained for each consumer, double signatures will be required for all funds dispersed, and accounting personnel will perform tasks. When ADAPT functions as official payee for consumers, the procedures above will be followed as well as any Probate Court guidelines and/or regulations.

#### Adapt Representative Payee Records of Consumer Funds

Guardians will direct requests for funds to home supervisors when needs arise for a purchase from the Adapt representative payee for a resident. Home supervisors can accept verbal consent from the guardians and will fill out a request for payee funds and submit it to the Adapt representative payee. Each month a reconciliation of the individual's account is submitted by the home supervisor, which is reviewed, approved, and returned to the home supervisors by the Representative Payee with a list of the transactions that occurred during that period. These records are available to all guardians upon request. In addition, some Probate courts (depending on the County) require the Adapt Representative Payee to provide them with an annual "Account of Fiduciary".

#### Risk Management Plan

It is vital to ADAPT that adequate planning, fiscal reserves, and insurance coverages are in place to ensure the financial health of the company. It is the responsibility of the Executive Director to develop, monitor, and ensure there are appropriate cash reserves, and that insurance coverage is appropriately maintained. This also includes regular assessments and reviews of coverage and maintaining loss control practices and procedures. Assessment will include an annual meeting with the insurance provider. Loss control procedures shall include but not be limited to, reviews by insuring companies, fire department inspection, worker's compensation training and ensuring that all subcontractors have appropriate coverage. Insurance coverage shall provide for protection of assets, potential defenses in the case of lawsuits, staff protection, directors and officers coverage, bonds, malpractice, and product and service coverage. Reports will be made to the Board of Directors detailing insurance coverage and cash balances. An annual audit, conducted by a Certified Public Accountant (CPA), is required; the report and management letter will be presented to the Board of Directors. Technology Policy/Plan

Employees are not permitted to use ADAPT owned technology for anything that is not work-related. New technology must not be installed onto any ADAPT computer without prior approval from the Chief Operating Officer or Financial Controller. SabreTech provides the company's IT services.

# System Controls and Procedures

*Licensing* - ADAPT will observe the terms of all copyrights, software licenses, and agreements. Unauthorized software is prohibited.

*Backup* - The Financial Controller of ADAPT is responsible for ensuring the network backup procedures are developed and followed. This system shall include off-site storage and backing up data. Data from individual workstations is automatically backed up daily.

*Virus Protection* - ADAPT utilizes Huntress Endpoint security on end user devices to protect against virus, malware, and other security threats. IT Services update this protection through continuous monitoring of threats. Windows updates occur automatically on a weekly basis.

*Physical Protection* - Anti-surge protectors shall be used on all computers; battery backup systems shall be in place for accounting workstations.

*Employee Terminations* – The Financial Controller will contact SabreTech to have the email address and any other potential access to the server discontinued. Password protection must be used on individual workstations.

*Ownership* - All information contained on ADAPT computers shall be the property of ADAPT. Non-employees, except authorized computer repair personnel, are prohibited from utilizing ADAPT computer equipment.

ADAPT uses computers and software for the management of consumer data and fiscal records. It is vital these systems be protected, backed-up, and maintained. The Executive Director is responsible for maintaining an arrangement with a certified computer service company and for the purchasing of all software (including Virus Protection) and hardware for the company. The Executive Director delegates specific

duties to the Financial Controller, but the ultimate responsibility rests with that position.

Confidentiality of all data is a high priority, and all employees should take appropriate steps to protect the information to which they have access. This may include:

- \* Locking office doors when leaving
- \* Establishing password protection other than the general file server access password
- \* Awareness of what is left on computer screens when others are in your office
- \* Ensuring confidentiality of emails

Employees are also instructed that the personal use of email and the Internet on company time is not permitted and may be grounds for corrective action. Internet sites, other than those used for business purposes, should not be visited. All staff members are specifically prohibited from downloading programs and/or adding unauthorized software without the permission of the Executive Director. This policy shall be reviewed annually if changes are necessary. A personnel policy on the acceptable use of technology is located in the Personnel Policies Manual.

# Purchasing Policies

It is the responsibility of the Executive Director to administer the purchasing system for ADAPT. Only the Executive Director can incur debt in the name of the Board. ADAPT will make purchases locally, provided goods of equal quality and competitive prices are available from local suppliers. The Executive Director is responsible for establishing, monitoring, and maintaining purchasing policies and practices that result in an effective and efficient operation. Safeguards have been established to ensure accountability and the proper management of ADAPT's funds. ADAPT may consider available services, quality, and delivery in determining successful bidder. ADAPT reserves the right to reject any and all bids.

#### **Donations**

Any donation, contribution, gift, or bequest made to ADAPT must be given to the Executive Director or Financial Controller. The Executive Director/Designee will issue a receipt to the person and/or organization making the donation.

#### Special Donations Fund

<u>Background</u>: These policies and procedures were adopted by the Board of Directors of ADAPT to provide for the administration and use of funds donated to ADAPT. The Executive Director of ADAPT is responsible for ensuring that these guidelines are followed.

<u>Procedures</u>: All donations, gifts, bequests, or endowments received by ADAPT shall be placed in a specially designated account. These funds shall be kept separate from ADAPT's general funds and all interest earned shall be deposited back into the fund. The funds in this account may only be used for projects described below and may only be withdrawn with the approval of the Executive Director. The Board of Directors must

approve any changes to these procedures.

<u>Funds may be used for</u>: Building projects, special purchases, program enhancements, and new program startups.

ADAPT is a non-profit corporation. Donations are tax deductible.

Marketing Practices

ADAPT shall proactively market its services in a manner which is fiscally and morally

responsible, which enables potential consumers to become a part of ADAPT services, and which promotes the organization locally and in the larger arena of human services. Exploitation of consumers, including the use of individual consumer information without consent, is not allowed.

# Fee Splitting

ADAPT shall not engage in fee splitting with either agencies or individuals for the purpose of obtaining consumer referrals.

# Contract Bidding Policy

All contracts bid on by the ADAPT workshop must comply with wage and hour policies. This includes accurate time studies based upon similar industrial and/or prevailing wage rates, appropriate charges for overhead, and an agency refusal to accept struck work. In most cases time studies performed by ADAPT will form the basis for worker wages. Production records of each shop worker must be maintained, and every effort made to increase worker productivity and earnings. On long-term contracts, prices shall be reviewed at least annually to ensure they remain accurate. It is the responsibility of the workshop supervisor to conduct regular time studies on larger contracts to ensure appropriate pricing of services and reduce financial liability.

#### Struck Work

ADAPT will not accept struck work or place workers into employment with business being struck. Exceptions may be allowed only by the approval of the Board of Directors. In Supported Employment sites, job coaches and ADAPT paid consumers will not remain at work sites which are being struck. Exceptions to this rule will be made only with the approval of the Board of Directors.

#### **Quality Control**

It is the responsibility of the workshop supervisor to ensure a quality control system is maintained for each subcontract. Customer specifications and requirements shall be adhered to at all times.

#### Human Resources

Because the quality of our employees is the organization's most important asset, ADAPT will endeavor to recruit, train, and retain individuals who are committed to meeting the needs of persons with disabilities, and who have skills which assist in achieving ADAPT's mission. This includes a commitment to secure employees with suitable qualifications, experience, and education, and to enable them to carry out their responsibilities, as set forth in their job descriptions. The organization seeks to provide needed support, supervision, training, and opportunities for professional growth to enable employees to reach their performance objectives.

All employees will receive upon, or prior to their employment, a copy of the Board approved Personnel Policies Manual, as well as other policies, handbooks, and plans, as deemed necessary for the complete training of employees. Each employee will be given an opportunity to thoroughly read the document prior to the acceptance of employment. The Personnel Policies will be reviewed periodically.

# Research Projects

ADAPT will adhere to ethical guidelines for research projects in which the agency may become involved. Consumers have the right to informed consent and the right to refuse to participate in research projects.

# Volunteers/Student Interns/Consultants

ADAPT may utilize volunteers/consultants/student interns as additional help in program settings. All volunteers/interns/consultants must complete an orientation session with their supervisor prior to consumer contact, receive Recipient Rights training, pass all required background checks, and have a TB test. ADAPT will comply with all AFC, state and federal requirements concerning criminal and reference checks.

This orientation shall be documented and will cover a specific listing of safety procedures, confidentiality, policies, and information that is important for the safety of consumers and volunteers/interns/consultants alike. Each volunteer/consultant/intern will be assigned to a specific supervisor who will be responsible for work assignments and for ensuring the volunteer/consultant/intern is performing in an acceptable manner. The assigned supervisor will provide necessary feedback, training, and education to assist with professional development.

# Accessibility

It is the policy of ADAPT to maximize accessibility for persons with disabilities, within the organization and the community. All ADAPT leadership will work to remove architectural, environmental, attitudinal, financial, employment, communication, and transportation barriers. ADAPT will provide accessible facilities to ensure all consumers may receive the full range of services offered. All ADAPT's services are available to qualified persons with disabilities. ADAPT's Accessibility Plan and review criteria is available and is to be reviewed periodically by the Board of Directors. An external review of accessibility will be conducted periodically.

# **Community Relations**

ADAPT will seek to establish and maintain a close and positive relationship with community agencies. ADAPT encourages employees to become involved in community efforts to improve the lifestyle of persons with disabilities. ADAPT will promote and help other community organizations in promoting integrated opportunities for community participation for persons with disabilities. A cooperative partnership with other community agencies, businesses, and resources is in the best interest of each person served as well as the overall reputation of the agency. This relationship shall be maintained through personal contact with agencies, and as appropriate, the sharing of information. Consent forms for securing information are available at ADAPT and must be completed prior to any disclosure of information.

#### Public Inspections/Tours

It is the policy of ADAPT to encourage visits and inspections by the public. Large groups should schedule appointments with the Director of Services. Financial information concerning the operation of ADAPT may also be available based upon the discretion of the Executive Director.

#### Legal Requirements

The operational practices of ADAPT will comply with applicable legal requirements and regulations. This includes legal requirements for doing business in the state of Michigan as a non-profit corporation, and specific applicable requirements of state and federal agencies, including Medicaid rules. Specific policies in relation to a number of these requirements are included in applicable sections of the Policies and Procedures Manual, program handbooks, and Personnel Policies. ADAPT retains an attorney for

# advice on legal requirements.

# Record Keeping

All current consumer records must be accessible to employees who provide treatment or care but must be stored in a secure manner when employees are not using the records. The majority of records are kept in locked cabinets. When consumers exit Adapt services, the record is retained in storage (on Adapt premises) for three (3) years. After the three (3) year-period, the record is placed in cold storage on Adapt property until the documents are scanned and stored electronically. Ideally, the records will be scanned as the three-year timeframe approaches so that storing paper copies is unnecessary. The administrative profile and exit summary are kept for 20 years after the last date of service. Recipient Rights records and all other documents pertaining to treatment are to be stored for 10 years after the last date of service.

Administrative and personnel records shall be kept in accordance with federal mandates. A copy of these requirements is located at the main office in Coldwater. Adapt will scan documents and maintain files to be accessible by computer whenever possible due to the storage challenges of maintaining paper files. Hard copies will be shredded as required to maintain confidentiality.

# **Outcomes Management**

#### Purpose

ADAPT's Program Outcome Management Information System is designed to assist the Board, management, and staff in measuring the results of our services to our consumers. Through the efforts of all employees, each program seeks positive movement towards ADAPT's primary goal, as listed in the mission statement, of assisting "individuals in maximizing their growth and becoming as self-sufficient as possible."

# The programs that are included in this Outcomes Management Information System are as follows:

Community Living Services Residential Services In-Home Supports Services Outlook Clubhouse (Branch)	
Employment Resources	

# **Evaluation Objectives**

We assess the programs in three areas:

- Consumer Satisfaction.
- Program effectiveness (Quality of Life measures)
- Program efficiency (Quality of Service measures)

The evaluation objectives include a description of the measurement process, specific outcome indicators and target levels for the programs. Evaluation objectives for the upcoming year are prepared, based on previous year performance, in <u>November</u> of each year.

In addition to the Evaluation System objectives, each program also has a program goal,

admission criteria, and an outline of services which that program provides.

# **External Evaluation Data**

ADAPT participates in the CARF accreditation process. CARF recommendations and other review results are incorporated into the Outcomes reporting process and the Quality Improvement Plan when such plans are required or will be beneficial to consumers. Examples of other external evaluating entities are the Regional Affiliation of CMH agencies, Department of Community Health (DCH), and foster care licensing by the State of Michigan.

# **Consumer Satisfaction Survey**

A consumer satisfaction survey is conducted annually. In <u>August</u>, surveys are mailed to guardians and homes of 50% of consumers, with a postage-paid return envelope. A 50% sample of consumers is interviewed by someone who is not a direct provider of service in <u>September</u> of each year. Data is collected, compiled, and analyzed, and comments and suggestions for improvement are summarized and distributed to Board, administration, and staff in late <u>November</u>.

# **Strategic Plan**

Each Fall/Winter ADAPT' Strategic Plan will be reviewed, and changes made as needed. The Strategic Plan shall be developed through the efforts of administrative staff and Board members and lay out a blueprint of future goals and objectives for the agency. The results of the strategic plan shall be conveyed to supervisory staff on an annual basis. The annual surveys and evaluation data will be considered in the development and revisions to the Strategic Plan. The timeframe for the goals of the plan will be determined upon the writing of the Plan and may be longer than one year if it is appropriate.

# **Outcomes Management Report**

Administration will prepare a Management Report in <u>December</u> each year on the results of the Program Evaluation Objectives, Consumer Satisfaction Survey, and External Evaluation Data. It will report, by program, on program effectiveness (Quality of Life measures), program efficiency (Quality of Service measures) and consumer satisfaction. Copies of the report will be provided to board members, program supervisors, and contracting agencies. The Report will be discussed at the board meeting, administrative and program staff meetings.

# **Quality Improvement Plan**

Quality Improvement goals, objectives, and strategies are developed in consultation with administration, program supervisors, and stakeholders (consumers, CMH staff, and family members) in <u>December</u>. The Quality Improvement Plan is developed immediately following the completion of the Outcomes Report, in order to demonstrate the agency's strategy for utilizing the information collected from the Outcomes Report.

#### **Use of Information**

The board and administration are able to use the information generated to set policy,

facilitate long-range and short-range planning, determine whether programs are effective, and need to be continued, improved, or discontinued, identify needs which may call for new programming or revised programming techniques, revision of admission/discharge/program transfer requirements, for allocating resources to the various programs, and for community marketing efforts. Each program will use the system to set program performance goals, determine whether program goals are met, exceeded, or below acceptable levels, improve program performance, facilitate followup, and monitor and document corrective actions taken.

# **Review of System**

The Program Evaluation System is reviewed and updated annually. Administration meets with the Board of Directors and Program supervisors to review the system and set program goals for the coming year. Each Program Supervisor discusses the goals for their program with their staff for their input and recommendations. The evaluation system document is drafted based on the information gathered. The following factors are considered in the review process:

- Data generated from the system, including the management report.
- Information from consumer satisfaction survey
- Information from stakeholder satisfaction survey
- Accessibility Reports
- Desired outcomes for program services.
- Increasing Quality of Life benefits (effectiveness) for persons served.
- Increasing Quality of Services (efficiency) to persons served.
- Increasing Consumer Satisfaction.
- Cost containment/Resource Allocation/Risk Management
- Improving or simplifying the methods of measurement.
- Characteristics of persons served.
- Staff Surveys
- Human resource activities, including training

# Consumer Record Reviews

All active consumer files shall be reviewed annually by a reviewer. The reviewer shall be appointed by the Director of Services in each county. Generally, home supervisors are responsible for reviewing the files for their residents and should be done at least annually prior to an individual's PCP meeting. Larger programs have different designated reviewers. The function of the reviewer is to examine consumer files in order to ensure:

- a. Required forms, documents, correspondence, reports, and tests are included.
  - The files are up to date and properly arranged.
  - Old documents are placed in an archive file or scanned and stored electronically.
  - The information included meets the standards held by Adapt, CMH, SWMBH, MDHHS, and CARF.

In addition, a review of agency policy and procedures concerning consumer files will occur as necessary. This review shall include an examination and analysis of record-keeping requirements and case file policies. Changes in requirements will prompt a review of the procedure by the administrative team.

#### Program Capacity Review

The program supervisors of ADAPT will monitor the number of program participants and the needs of individuals. The appropriateness of an individual will be assessed within the parameters of the following: staffing ratios, safety of the individual and peers, a willingness to participate in the program, the potential benefit to the individual, and service authorization by the funding source. The assessment will include consumer disabilities, living situations, work production, and learning needs as they relate to the original purposes of ADAPT. It is the responsibility of each program supervisor to communicate concerns regarding their roster or "case load" to their immediate supervisor. The Executive Director will be involved with program structure when significant concerns or changes regarding the capacity to serve, staffing constraints/ over staffing, budgetary issues, and as other issues arise. A guiding question in reviewing programs should be, "Is Adapt serving the population intended with services people want?"

# Coordination of Individual Care

The Director of Services for each county is responsible for ensuring the coordination of care for each individual receiving Adapt services. The individual program supervisors ensure the daily care and treatment of each person in his/her program using the Person-Centered Plan (PCP) to guide services. The program supervisors are responsible for reporting concerns to the Director of Services for the respective counties. Each program supervisor must ensure the correct implementation of PCP's, monitoring progress with the goals/objectives of the PCP, scheduling of meetings regarding service provision and individual care, communication regarding reassessment and revision of PCP's with the plan author, communication with doctors and other medical personnel, as well as guardians and authorized natural support people. The supervisor may assign specific responsibilities and/or duties to staff aides but must ensure these delegated tasks are completed. All individual consumer care is completed in coordination with the Community Mental Health (CMH) Case Manager/ Supports Coordinator.

#### **Quality Review of Services**

The following Quality Review mechanisms are in place:

# • Periodic Treatment Monitoring

An appropriate professional or their designee reviews each consumer goal. This includes review of consumer progress, whether the appropriate services are being provided for an adequate duration, begin in a timely manner, and are producing the desired results, as specified in the Person-Centered Plan. Deficiencies are communicated to the program supervisors and/or paraprofessionals who are implementing the program. The professional monitor verifies that corrections have been made.

#### • Periodic Review of Consumer Progress

The CMH Case Manager/Supports Coordinator reviews each consumer's progress towards service goals and recommends modifications in the individual programs as needed. This review includes an analysis of deficiencies and necessary corrective actions. Adapt personnel are responsible for implementing the plan modifications recommended by the CMH Case Manager/Supports

Coordinator.

# • Annual External Audit

The Michigan Department of Health and Human Services (MDHHS) requires periodic audits of a sampling of Medicaid consumer files. Some audits are driven by dates of service claims for which Adapt bills its funding sources. Various types of reviews are conducted by CMH, MDHHS, SWMBH, CARF, and for licensed residential programs, LARA. Reports are typically generated from these reviews with specific recommendations for action. Administrative staff and program supervisors review these, and corrections are implemented. Needed changes are incorporated into the treatment planning process, as appropriate.

• Annual Consumer and Stakeholder Survey Adapt administration uses the results of the annual Consumer and Stakeholder surveys to implement changes to services as needed.

# Program Supervisor Designation

Each program supervisor is responsible for obtaining all needed documents and information in order for a consumer to participate in that program. In some cases, a consumer participates in multiple Adapt programs. It is the responsibility of the program supervisor to address issues that arise in his/her respective program and to communicate directly with the other Adapt program supervisors, or to the Director of Services for the county, who will then communicate with the other program supervisors. Program supervisors have the responsibility of working cooperatively with each other to ensure the goals, health and safety, and preferences of the person served are honored.

# **Referral and Intake**

# Referrals from Community Mental Health Agencies

Generally speaking, referrals for Adapt services come directly from a Community Mental Health (CMH) agency as the Medicaid services funding source. The Case Manager/ Supports Coordinator will complete the respective intake/referral forms and provide assessments, demographic information, and other information that will be useful in planning initial program activity with the consumer. This information will be given to the respective program coordinator.

# Referrals Directly to ADAPT

Referrals directly to Adapt will be directed to the appropriate CMH agency. The CMH agency is responsible for determining if a prospective consumer meets initial eligibility and will assign the consumer a Case Manager/Supports Coordinator, who will then contact the respective program coordinator about the intake process.

In the case of a direct contact with ADAPT personnel, the ADAPT staff member will encourage the person making the referral to contact the CMH agency and will provide the necessary phone numbers and explanation of the purpose of intake/connection with the CMH agency. However, ADAPT personnel will assist those who are unable to contact the CMH agency on behalf of the consumer in need of services. In the case of walk-ins, a tour of the program will be offered in an attempt to determine if the service appears to be appropriate for the person.

For those people who contact ADAPT directly, but clearly do not meet eligibility criteria, the Director of Services for that county will attempt to make appropriate service referrals to external agencies. For those who do meet criteria but do not receive Medicaid funded services, a private pay arrangement may be possible.

# Private Pay Services

On a case-by-case basis, Adapt will consider providing private pay services to consumers. A private pay arrangement means the individual (or payee/guardian) will have the sole responsibility of paying for the services Adapt provides to the individual. Individuals who enter into a private pay arrangement will be charged the same rate as CMH (Medicaid) recipients for the service provided, unless a unique circumstance exists, and the Executive Director determines a lower rate is appropriate. An individual who enters into a private pay arrangement will never be charged more than the CMH/ Medicaid rate.

It is our intention to ensure all individuals understand their options for services and make informed choices. <u>Adapt has a process that must be followed prior to considering</u> a private pay arrangement with an individual for services:

#### MEDICAID RECIPIENTS RECEIVING SERVICES THROUGH COMMUNITY MENTAL HEALTH (CMH)

- If a consumer has Medicaid, services will be paid for by Medicaid (through CMH) <u>depending on what is deemed medically necessary for the individual</u>. The CMH agency determines what is medically necessary for each consumer through professional evaluation and the Person-Centered Planning process.
- Once services are authorized, Adapt receives confirmation from CMH and arrangements are made to begin or continue the authorized services. Communication between the CMH supports coordinator or case manager, the individual receiving services/guardian, and the appropriate Adapt program supervisor is necessary to ensure everyone understands the amount of services authorized prior to starting and/or continuing services.
- If services are denied or the consumer/guardian does not agree with the amount and/or type of services authorized by CMH, an appeal must be filed. If the individual does not have a guardian, an Adapt representative will help the individual file the appeal. Adapt will help guardians with appeals, as needed.
- From the appeal, the initial service authorization will either be upheld or there will be a change in the amount and/or type of services authorized. If the initial decision is upheld, Adapt will then consider private pay service arrangements if the individual/guardian makes the request for private pay services.
- Adapt will inform the individual that private pay services may be an option and will provide the rate per hour for the type of service being requested.
- Adapt will bill the individual/payee on a monthly basis. Payment is due upon receipt of the invoice. Adapt reserves the right to terminate services if balances are not paid as invoiced.

# MEDICAID RECIPIENTS NOT RECEIVING SERVICES FROM PINES/ST. JOSEPH

# СМН

All individuals who have Medicaid but do not receive services through their local CMH agency will be referred to their CMH agency by Adapt. Adapt will only consider a private pay arrangement with the individual after he or she has been evaluated by the CMH agency and services have been denied. The individual must provide Adapt with some form of documentation regarding the denial of services.

In some cases, an individual may choose to NOT seek services from his or her local CMH and desire a private pay service arrangement with Adapt. Although Adapt discourages this practice, the Executive Director maintains the authority to make exceptions. If such an exception is granted, the individual/payee/guardian will be counseled on service options and will be required to sign a statement acknowledging his or her financial responsibility.

# NON-MEDICAID RECIPIENTS

Any individual who seeks services through Adapt but does not have Medicaid will be referred to his or her local CMH agency to be evaluated for services. The local CMH will help individuals apply for benefits in some cases or make appropriate referrals. Adapt will only consider a private pay arrangement with the individual after he or she has been evaluated by the CMH agency and services have been denied. The individual must provide Adapt with some form of documentation regarding the denial of services. Adapt provides services to children and adults with intellectual/developmental disabilities and/or severe and persistent mental health issues. Individuals must meet criteria to be eligible for services. Documentation verifying a qualifying disability is required.

Adapt strives to ensure recipients receive all the benefits to which they are entitled and understand their service options. Adapt reserves the right to decline private pay services to individuals.

# **Consumer Program Orientation**

An orientation interview will be scheduled as quickly as possible and will include the individual receiving services, Case Manager/Supports Coordinator, caregiver/guardian, program supervisor, and any other desired support person. During this meeting, the consumer will be given a tour of the program if s/he has not had one already, will discuss the program activities, expectations, and the general routine of the program. A program handbook or packet will be given to the consumer/caregiver. Transportation, work, medication issues, and any other important topics will be discussed during this meeting. Any paperwork not completed prior to the orientation interview will be completed during this meeting, and minimally prior to the person beginning services. The individual may not begin services until all required documents and forms are received by Adapt personnel.

# Safety Committee

The Executive Director will appoint a Safety Committee which shall be responsible for monitoring the Health and Safety Program at all ADAPT locations. The Executive Director will designate a Chairperson who will be responsible for scheduling and conducting meetings, drills, and in-services. The responsibilities of the Safety Committee include:

- Conducting and Reporting on all Drills and Evacuations
- Quarterly meetings that include inspection of facility and report
- Annual Review and Report of Safety Policies and Procedures
- Review and Report on Accident and Incident Reports
- Safety In-Service Training for Staff

Minutes of each meeting should be kept which describe the discussion of the committee. Discussions should revolve around emergency drill schedules and procedures, vehicle condition, building safety, environmental safely, machine safety, etc. All aspects of the program as they relate to safety should be discussed. The committee will also regularly review accident and incident reports, and at least yearly, review emergency procedures and policies. Recommendations relating to any problems or concerns which were discussed should be included in the minutes. The minutes should be signed by the committee chairperson and forwarded to the Executive Director. The Director will review the minutes, indicate what action will be taken on the recommendations, and also sign the minutes. The safety chair will maintain the original copies of meeting minutes.

# Location of Safety Plans and Emergency Procedures

Adapt has several health and safety plans and emergency procedures. The following is a list of the areas covered and where those plans/procedures/policies are located:

# Personnel Policies Manual

- Transportation of Consumers (includes accidents)
- Medical Emergency Response While in Transit
- Behavioral Emergency Response While in Transit
- Medical Emergency

# Program Emergency Manuals (specific to each program – red book)

- Fire Evacuation
- Tornado
- Severe Thunderstorms
- Thunderstorms and Lightening
- Water Shortage
- Power Outage
- Workplace Violence/Violent Situation
- Other Threatening Situation (Terrorist Action, etc.)
- Bomb Threat Plan
- Carbon Monoxide Emergency
- Heating Failure
- Natural or Propane Gas Leak
- Flood
- Heavy Snow and/or Blizzard
- Poisoning
- Unauthorized Leave of Absence (ULOA)
- Alternate Housing Plan

#### Medication for Persons Served

Adapt will provide services related to medications depending on the identified needs of the individual served. Adapt does not prescribe medications to consumers. Adapt will obtain medications from a pharmacy or doctor on behalf of the person served, store medications in a secure manner, and administer medications. Adapt will also provide supervision, reminders, prompts, and physical set-up of medications for individuals served who are more independent with their medication regime.

Any staff held responsible for administering medication receives training prior to administering medication. Medication services are primarily provided in the Residential program. However, medication services are also available in the day program (Community Living Supports) and the In-Home Supports programs. Individuals participating in the Clubhouse and Supported Employment programs must be able to manage medications independently, although arrangements may be made on a caseby-case basis for an Adapt staff member to provide prompts or reminders.

Rev. 6/2008; 5/2009; 6/2010; 3/2012; 2/2013; 2/2014; 3/2015; 3/2016; 5/2017; 6/2017; 7/2020; 5/2023