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It is the policy of Epic Enterprise to ensure our procedures for temporary service suspension and service termination promote continuity of care and service coordination for persons receiving services. Epic will provide a copy of this policy to the person or the person's legal representative and case manager within five working days of service initiation.

Service Suspension

- 1. The use of temporary service suspension is limited to the following situations:
 - a. The person's conduct poses an imminent risk of physical harm to self or others and either:
 - 1) Positive support strategies have been implemented to resolve the issues leading to the temporary service suspension but have not been effective and additional positive support strategies would not achieve and maintain safety; or
 - 2) Less restrictive measures would not resolve the issues leading to the suspension; OR
 - b. The person has emergent medical issues that exceed Epic's ability to meet the person's needs; OR
 - c. Epic has not been paid for services.
- 2. Prior to giving notice of temporary service suspension, Epic will document actions taken to minimize or eliminate the need for service suspension. Actions taken by Epic will include, at a minimum:
 - a. Consultation with the person's support team or expanded support team to identify and resolve issues leading to issuance of the notice; and
 - b. A request to the case manager for intervention services identified, including behavioral support services, in-home specialist services, or other professional consultation or intervention services to support the person in the program.
 - c. If, based on the best interests of the person, the circumstances at the time of the notice were such that Epic was unable to consult with the person's team or request interventions services, Epic will document the specific circumstances and the reason for being unable to do so.
- 3. The notice of temporary service suspension will:
 - a. Notify the person or the person's legal representative and the case manager in writing of the intended temporary service suspension.
 - b. Be given on the first day of the service suspension.
 - c. Include the following:
 - 1) The reason for the action;
 - 2) A summary of actions taken to minimize or eliminate the need for temporary service suspension; and
 - 3) Why these measures failed to prevent the suspension.
- 4. During the temporary suspension period Epic will:
 - a. Provide information requested by the person or case manager;

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b. Work with the support team or expanded support team to develop reasonable alternatives to protect the person and others and to support continuity of care; and

- Maintain information about the service suspension, including the written notice of temporary service suspension in the person's record.
- 5. A person has the right to return to receiving services during or following a service suspension with the following conditions.
 - Based on a review by the person's support team or expanded support team, the person no longer poses an imminent risk of physical harm to self or others
 - b. If, at the time of the service suspension or at any time during the suspension, the person is receiving treatment related to the conduct that resulted in the service suspension, the support team or expanded support team must consider the recommendation of the licensed health professional, mental health professional, or other licensed professional involved in the person's care or treatment when determining whether the person no longer poses an imminent risk of physical harm to self or others
 - c. If the support team or expanded support team makes a determination that is contrary to the recommendation of a licensed professional treating the person, Epic must document the specific reasons why a contrary decision was made.

Service Termination

- 1. Epic will permit each person to remain in the program and will not terminate services unless:
 - a. The termination is necessary for the person's welfare and the person's needs cannot be met.
 - The safety of the person or others in the program is endangered and positive support strategies were attempted and have not achieved and effectively maintained safety for the person or others;
 - c. The health of the person or others in the program would otherwise be endangered;
 - d. Epic has not been paid for services;
 - e. Epic has ceased to operate:
 - f. The person has been terminated by the lead agency from waiver eligibility.
- 2. Prior to giving notice of service termination, Epic will document actions taken to minimize or eliminate the need for termination. Actions taken will include at a minimum:
 - a. Consultation with the person's support team or expanded support team to identify and resolve issues leading to the issuance of the notice; and
 - b. A request to the case manager for intervention services, including behavioral support services, specialist services, or other professional consultation or

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intervention services to support the person in the program. (The request for intervention services will not be made for service termination notices issued because Epic hasn't been paid for services.)

- c. If, based on the best interests of the person, the circumstances at the time of the notice were such that Epic was unable to consult with the person's team or request interventions services, Epic will document the specific circumstances and the reason for being unable to do so.
- 3. The notice of service termination will:
 - a. Notify the person or the person's legal representative and the case manager in writing of the intended service termination.
 - b. Include the following:
 - i. The reason for the action:
 - ii. A summary of actions taken to minimize or eliminate the need for service termination or temporary service suspension, and why these measures failed to prevent the termination or suspension. A summary of actions is not required when service termination is a result of Epic ceasing operation;
 - iii. The person's right to appeal the termination of services under Minnesota Statutes, section 256.045, subdivision 3, paragraph (a); and
 - iv. The person's right to seek a temporary order staying the termination of services according to the procedures in section 256.045, subdivision 4a or 6, paragraph (c).
 - c. The service termination notice may be given in conjunction with a notice of temporary service suspension.
- 4. During the service termination notice period, Epic will
 - a. Work with the support team or expanded support team to develop reasonable alternatives to protect the person and others and to support continuity of care;
 - b. Provide information requested by the person or case manager; and
 - c. Maintain information about the service termination, including the written notice of intended service termination, in the person's record.

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POLICY

 Epic will ensure that persons served retain the use and availability of personal funds or property unless restrictions are justified in the person's individual plan.

- 2. Epic will store small amounts of personal funds, when requested. This is intended only for funds to participate in activities during Epic's service time and not as a replacement for personal savings.
- 3. Service recipient funds should be kept separate from Epic funds or program staff funds.
- 4. Whenever Epic assists a person served with the safekeeping of funds or other property, Epic will:
 - Immediately document receipt and disbursement of the person's funds or other property at the time of receipt or disbursement, including the person's signature, or the signature of the conservator or payee;
 - b) Reconcile the account monthly, with documentation including recording staff's initials; and
 - c) Return to the person upon their request, funds and property in Epic's possession subject to restrictions in the person's treatment plan, as soon as possible, but no later than three working days after the date of the request.
- 5. Epic and individual program staff must not:
 - a) borrow money from a person served by Epic
 - b) purchase personal items from a person served;
 - c) sell merchandise or personal services to a person served
 - require a person served to purchase items for which Epic is eligible for reimbursement; or
 - e) use funds of persons served to purchase items for which Epic is already receiving public or private payments.

PROCEDURES

Upon service initiation, Epic will obtain written authorization to assist with funds from the person or the person's legal representative and the case manager. Authorization will be obtained within five working days of service initiation and renewed annually thereafter. At the time initial authorization is obtained, Epic will survey, document, and implement the preferences of the person or the person's legal representative and the case manager for frequency of receiving a statement that itemizes receipts and disbursements of funds or other property. Epic will document changes to these preferences when they are requested.

Epic staff may not accept powers-of-attorney from a person receiving services from Epic for any purpose. This does not apply to license holders that are Minnesota counties or other units of government or to staff persons employed by license holders who were acting as attorney-in-fact for specific individuals prior to implementation of 245D. Epic must maintain documentation of the power-of-attorney in the service recipient record.

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Upon the transfer or death of a person, any funds or other property of the person must be surrendered to the person or the person's legal representative, or given to the executor or administrator of the estate in exchange for an itemized receipt.

Section Number: 2-3.1 Section: Health and Safety

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OVERVIEW

It is the responsibility of Epic Enterprise Inc. to protect the individuals served from maltreatment; to assist in providing safe environments; and to provide safe services for vulnerable adults who have been maltreated. A further responsibility is to comply with the Vulnerable Adult Act (Minnesota Statutes 626.557) This policy, which includes the internal reporting procedures is available in the policy manual or upon request to mandated reporters, consumers and legal representatives.

WHO IS A VULNERABLE ADULT?

A vulnerable adult is any person who is 18 years of age or older:

- 1. Who lives in or receives services from a licensed facility like Epic Enterprise (see Minnesota Statute 626.5572 Subd. 21) OR
- 2. Who regardless of residence or whether any type of service is received, possesses a physical or mental infirminity or other physical, mental, or emotional dysfunction:
 - a. that impairs the individual's ability to provide adequately for their own care without assistance, including the provision of food, shelter, clothing, health care, or supervision; and
 - b. because of the dysfunction or infirmity and the need for assistance, the individual has an impaired ability to protect themselves from maltreatment.

WHAT IS MALTREATMENT?

Maltreatment means abuse, neglect, or financial exploitation.

- 1. Abuse means: (See Minnesota Statute 626.5572 Subdivision2 for complete definition)
 - a. An act that constitutes a violation of, an attempt to violate, or aiding and abetting violation of the statutes concerning physical assault, criminal use of drugs, prostitution or criminal sexual conduct, or
 - Conduct which is not an accident or therapeutic conduct as defined in this section, which produces or could reasonably be expected to produce physical pain or injury or emotional distress including, but not limited to, the following:
 - (1) hitting, slapping, kicking, pinching, biting, or corporal punishment of a vulnerable adult;
 - (2) use of repeated or malicious oral, written, or gestured language toward a vulnerable adult or the treatment of a vulnerable adult which could be considered by a reasonable person to be disparaging, derogatory, humiliating, harassing, or threatening;
 - (3) use of any aversive or deprivation procedure, unreasonable confinement, or involuntary seclusion, including the forced separation of the vulnerable adult from other persons against the will of the vulnerable adult or the legal representative of the vulnerable; and

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(4) use of any aversive or deprivation procedure for persons with developmental disabilities or related conditions not authorized under section 245.825.

- c. Any sexual contact between a staff and a person receiving services.
- d. The act of forcing, compelling, coercing, or enticing a vulnerable adult against their will to perform services for the advantage of another.
- 2. Neglect means: (See Minnesota Statute 626.5572 Subdivision 17 for complete definition)
 - a. The failure or omission by a caregiver to supply a vulnerable adult with care or services, including but not limited to, food, clothing, shelter, health care, or supervison which is:
 - reasonable and necessary to obtain or maintain the vulnerable adult's physical or mental health or safety, considering the physical and mental capacity or dysfunction of the vulnerable adult; and
 - (2) which is not the result of an accident or therapeutic conduct.
 - b. The absence or likelihood of absence of care or services, including but not limited to; food, clothing, shelter, health care, or supervision necessary to maintain the physical and mental health of the vulnerable adult which a reasonable person would deem essential to obtain or maintain the vulnerable adult's health, safety, or comfort considering the physical or mental capacity or dysfunction of the vulnerable adult.
- 3. Financial exploitation means: (See Minnesota Statute 626.5572 Subdivision 9 for complete definition)
 - a. In breach of a fiduciary obligation recognized elsewhere in law, including pertinent regulations, contractual obligations, documented consent by a competent person, or the obligations of a responsible party:
 - engages in unauthorized expenditures of funds entrusted to the actor by the vulnerable adult which results or is likely to result in detriment to the vulnerable adult; or
 - (2) fails to use the financial resources of the vulnerable adult to provide food, clothing, shelter, health care, therapeutic conduct or supervision for the vulnerable adult, and the failure results or is likely to result in detriment to the vulnerable adult.
 - b. In the absence of legal authority a person:
 - (1) willfully uses, withholds, or disposes of funds or property of a vulnerable adult;
 - (2) obtains for the actor or another the performance of services by a third person for the wrongful profit or advantage of the actor or another to the detriment of the vulnerable adult;

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(3) acquires possession or control of, or an interest in, funds or property of a vulnerable adult through the use of undue influence, harassment, duress, deception, or fraud, or

(4) forces, compels, coerces, or entices a vulnerable adult against the vulnerable adult's will to perform services for the profit or advantage of another.

Nothing in this definition requires a facility or caregiver to provide financial management or supervise financial management for a vulnerable adult except as otherwise required by law.

HOW TO PREVENT MALTREATMENT

It is the responsibility of Epic Enterprise, Inc. to protect the individuals served from maltreatment; to assist in providing safe environments; and to provide safe services for vulnerable adults who have been maltreated. It is the policy of the state of Minnesota to require the reporting of suspected maltreatment of vulnerable adults, to provide for the voluntary reporting of maltreatment of vulnerable adults, to require the investigation of the reports, and to provide protective and counseling services in appropriate cases.

1. Well informed and openly communicative staff and consumers is seen as the best prevention for any potential maltreatment of persons who are vulnerable adults.

Informing Staff

Orientation: All employees of Epic Enterprise are considered mandated reporters. All staff will receive training on this policy within 72 hours of first providing direct contact services.

Ongoing training: Epic Enterprise will conduct an in-service training session at least annually on Epic's Vulnerable Adult Protection Policy. All employees of Epic Enterprise will be expected to participate in this training each year.

Informing Consumers

Epic Enterprise will provide an orientation on this policy to all persons receiving services. This will be provided within 24 hours of admission, or for persons who would benefit more from a later orientation, the orientation may take place within 72 hours. If applicable, the person's legal representative must be notified of the orientation.

Posting

Epic Enterprise will post a copy of this policy in a prominent location in the Epic building. (It is currently stored in the Epic Policy and Procedure Manual kept in the hub and/or offices.) In addition, this policy should be available upon request to mandated reporters, persons receiving services, and legal representatives.

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2. Careful evaluation of physical environments and population served as well as individual areas of vulnerability result in development of a Program Abuse Prevention Plan for the Epic building and an Individual Abuse Prevention Plan for each individual served.

Program Abuse Prevention Plan

Epic will establish and enforce an ongoing written abuse prevention plan. The plan shall contain an assessment of the physical plant, its environment, and its population identifying factors which may encourage or permit abuse and a statement of specific measures to be taken to minimize the risk of abuse.

Individual Abuse Prevention Plan

Epic will develop an individual abuse prevention plan for each vulnerable adult receiving services. The plan will contain an individualized assessment of:

- (a) The person's susceptibilit to abuse by other individuals, including other vulnerable adults
- (b) The person's risk of abusing other vulnerable adults; and
- (c) Statements of the specific measures to be taken to minimize the risk of abuse to that person and othe vulnerable adults.
- (d) If Epic knows that the vulnerable adult has committed a crime or an act of physical aggression towards others, the individual abuse prevention plan must detail the measures to be taken to minimize the risk that the vulnerable adult might reasonably be expected to pose to visitors to the facility and persons outside the facility, if unsupervised.

HOW TO REPORT POSSIBLE MALTREATMENT

Clear reporting procedures and designation of responsibilities are critical to assure action when maltreatment of a vulnerable adult is suspected. All Epic Enterprise staff (including substitutes and volunteers) are "mandated reporters". A report is a statement concerning all the circumstances surrounding an alleged or suspected maltreatment of a vulnerable adult which are known to the reporter at the time the statement is made.

When:

- a. If a mandated reporter has reason to believe that a vulnerable adult is being or has been maltreated
- b. If a mandated reporter has knowledge that a vulnerable adult has sustained a physical injury which is not reasonably explained
- c. An individual makes an error in the provision of therapeutic conduct to a vulnerable adult that results in injury or harm, which requires the care of a physician. (see below. If Epic believes that an investigation by a lead

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investigative agency will determine that the reported error was not neglect, Epic may provide the lead investigative agency information explaining how the event meets the criteria below.)

d. Immediately (as soon as possible, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received)

To whom: A mandated reporter may report an incident either internally or externally.

a. Internal Reporting:

- (1) An immediate oral or written report of any suspected maltreatment should be made to one of Epic Enterprise designated Reporters. The following positions are identified as designated Reporters: Executive Director and Program Coordinators. In the absence of the Executive Director or if the Executive Director is the alleged or suspected perpetrator of the maltreatment, the report should be made to one of the other designated Reporters.
- (2) When a mandated reporter reports internally, they should receive a written notice (Notice of Status of Report of Suspected Maltreatment) stating whether Epic has reported the incident to the Minnesota Adult Abuse Reporting Center (MAARC). The written notice must be provided within two working days and in a manner that protects the confidentiality of the reporter. The written response to the mandated reporter shall note that if the mandated reporter is not satisfied with the action taken by the facility on whether to report the incident to the common entry point, then the mandated reporter may report externally. Epic does not prohibit a mandated reporter from reporting externally and will not retaliate against a mandated reporter who reports an incident externally in good faith. The written notice by Epic must inform the mandated reporter of this protection from retaliatory measures by Epic against the mandated reporter for reporting externally.
- (3) A person who makes a good faith report is immune from any civil or criminal liability that might otherwise result from making the report, or from participating in the investigation, or for failure to comply fully with the reporting obligation.
- (4) A person who knows or has reason to know a report has been made to MAARC and who in good faith participates in an investigation of alleged maltreatment is immune from civil or criminal liability that otherwise might result from making the report, or from failure to comply with the reporting obligation or from participating in the investigation.
- (5) The identity of any reporter may not be disclosed except as provided in Minnesota Statute 626.557 subdivision 12b.

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(6) A person or facility who intentionally makes a false report shall be liable in a civil suit for any actual damages suffered by the reported facility, person or persons and for punitive damages up to \$10,000 and attorney's fees.

(7) A mandated reporter who negligently or intentionally fails to report is liable for damages caused by the failure. Nothing in this policy imposes vicarious liability for the acts or omissions of others.

b. External reporting

(1) Any person having evidence of possible maltreatment who does not wish to report internally may report directly to the Minnesota Adult Abuse Reporting Center (MAARC) at 844-880-1574. MAARC is open 24 hours a day, seven days a week.

What happens with an internal report:

When a mandated reporter reports internally, Epic's designated reporter is responsible for complying with the following reporting requirements.

- a. Make a report to MAARC at 844-880-1574 or complete a report online. This should be done immediately (as soon as possible, but no longer than 24 hours from the time initial knowledge that the incident occurred has been received).
- b. Within 24 hours, notify the legal representative or designated emergency contact and case manager of the suspected maltreatment unless the incident has been reported by another license holder or if there is reason to believe that they were involved in the suspected maltreatment. The following should be included: Information about the nature of the activity or occurrence and the agency that received the report. A written report should be completed.
- c. A report may be found to substantiated, inconclusive, false or that no determination will be made. Nothing prohibits Epic Enterprise from holding to a stricter standard than the State of Minnesota statutes regarding maltreatment.
- d. A vulnerable adult is not neglected for the sole reason that:
 - (1) An individual makes an error in the provision of therapeutic conduct to a vulnerable adult which does not result in injury or harm which reasonably requires medical or mental health care; or
 - (2) An individual makes an error in the provision of therapeutic conduct to a vulnerable adult that results in injury or harm, which requires the care of a physician, and:
 - (a) The necessary care is provided in a timely fashion as dictated by the condition of the vulnerable adult
 - (b) If after receiving care, the health status of the vulnerable adult can be reasonably expected, as determined by the attending

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physician, to be restored to the vulnerable adult's preexisting condition

- (c) The error is not a pattern of errors by the individual
- (d) If in a facility, the error is immediately reported and recorded internally in the facility
- (e) If in a facility, the facility identifies and takes corrective action and implements measures designed to reduce the risk of further occurrence of this error and similar errors; and
- (f) If in a facility, the actions required under items (d) and (e) are sufficiently documented for review and evaluation by the facility and any applicable licensing, certification, and ombudsman agency
- e. The following events are not required to be reported under this policy:
 - (1) Verbal or physical aggression occurring between persons receiving services or self-abusive behavior by these persons does not constitute abuse unless the behavior causes serious harm. Incidents of aggression and self-abusive behavior should be documented on other forms.
 - (2) Accidents meaning a sudden, unforeseen, and unexpected occurrence or event which:
 - (a) is not likely to occur and which could not have been prevented by exercise of due care; and
 - (b) if occurring while a vulnerable adult is receiving services from a facility, happens when the facility and the employee or person providing services in the facility are in compliance with the laws and rules relevant to the occurrence or the event.
 - (3) An individual makes an error in the provision of therapeutic conduct to a vulnerable adult which does not result in injury or harm which reasonably requires medical or mental health care. (Should be documented on appropriate form.)
 - (4) If a physical injury has a reasonable explanation document the reasonable explanation. (Should be documented on appropriate form.)
 - (5) A report of known or suspected maltreatment does not need to be reported if the reporter knows or has reason to know that a report has been made to the Common Entry Point.

INVESTIGATING POSSIBLE MALTREATMENT

Internal investigation of maltreatment will be done by the Epic Executive Director. The investigation will be done by the lead Program Coordinator in the absence of the Executive Director or when there is reason to believe that the Executive Director was involved in the alleged or suspected maltreatment. An internal investigation will be completed and corrective action will be taken as necessary to protect the health and

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safety of vulnerable adults when Epic has reason to know that an internal or external report of alleged or suspected maltreatment has been made. The report of the investigation should include a summary of the following:

a. persons involved; including alleged victim, alleged perpetrator, witnesses

- b. persons interviewed
- c. findings of the investigation
- d. persons and investigation authorities notified
- e. conclusions and any action taken, including:
 - (1) evaluation of whether related policies and procedures were followed
 - (2) adequacy of Epic's policies and procedures
 - (3) whether there is a need for additional staff training
 - (4) whether the reported event is similar to past events with the vulnerable adults or the services involved
 - (5) whether there is a need for corrective action by Epic to protect the health and safety of vulnerable adults

Based on the results of this review, Epic will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or Epic, if any.

Epic Enterprise will document and make internal reviews accessible to the Commissioner upon the Commissioners request. The documentation provided to the Commissioner by Epic may consist of a completed checklist that verifies completion of each of the requirements of the review.

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INTRODUCTION

The operations and maintenance of all the 5310 buses owned by Epic Enterprise are under the direct control of the Executive Director.

The bus fleet of Epic Enterprise consists of 3 vehicles.

This fleet inventory is kept in the MnDOT Office of Transit database program, Black Cat Grants.

As per above, new replacement as well as disposed buses will be added and deleted as needed.

Buses are stored outside, in Epic's parking lot.

GOALS

- To preserve and maintain Federal assets being used by Epic Enterprise
- Promote a safe and secure transportation system.
- To meet or exceed all manufactures requirements on equipment.
- To maintain all equipment to the highest standards.
- To maintain positive working relationships with maintenance vendors in order to achieve quality service throughout the life-cycle of each vehicle in the fleet.

OBJECTIVES

- Vehicle reliability (measured by miles per road call)
- Vehicle operating efficiency (measured by maintenance cost per mile)

These objectives must be achieved with proper balance of maximum vehicle care and financial constraints of Epic Enterprise.

PREVENTATIVE MAINTENANCE

Preventative maintenance is done every 7,500 miles or every 6 months, whichever comes first (as recommended by the vehicle manufacturer). (This should be updated as buses are added and/or disposed of from the fleet.)

CORRECTIVE MAINTENANCE -

Epic Enterprise does not have a maintenance department. Maintenance and repair (with the exception of those general operator responsibilities listed above) is outsourced to CarTime Auto Center.

RECORD KEEPING

All vehicle records are kept on each individual vehicle by the Program Secretary.

Records contain all maintenance tasks performed, vehicle miles and maintenance cost.

Currently records are maintained manually and on computer. Records kept are pre-trip

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and post-trip inspections and the scheduled services and repair orders on all vehicles. In addition, the Epic's Administrative Assistant keeps an account activity report on all maintenance and repair costs for each vehicle, plus a description of service preformed.

VEHICLE INSPECTIONS:

Inspections will be performed on a daily basis. (see Vehicle Inspection-Daily at the end of this policy) On a weekly basis, CarTime technicians will do an inspection. Their checklist includes oil and transmission fluid level, tire wear, belts and hoses, battery, checking lights (brake, turn, reverse, headlights, marker) and topping off the windshield washer fluid. When required, commercial vehicle inspections will be done annually and the DPS wheel chair securement inspections will be done annually.

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Week of:	eek of: Vehicle:					
Mileage-beginn	ning of week Mileage end of w	Mileage end of week				
check each ar	, the driver of the vehicle should do the following daily in ea and initial at the bottom of the checklist. If any of the	items	have a	n issue	<u>,</u>	
	VEHICLE REPAIR/CONCERN SLIP LOCATED IN THE HUB. A week should turn this Vehicle Inspection form into the hu		end of	the we	ek, the	e last
unver or the v	week should full this vehicle inspection form into the hi	M	Т	W	Th	F
Inside the vehicle	Pick up all garbage. Bring miscellaneous items into building Be sure windows are clear	IVI	ı	VV		
	Floor does not need vacuum					
	First Aid Kit present					
	Insurance card & Accident Report form present					
	BUS ONLY - Fire Extinguisher present					
	BUS ONLY - Wheelchair tie downs present, clean & working					
	BUS ONLY - open emergency window once per week					
Start engine	Check Dash gauges					
	Heater / defrost / air conditioner					
	Windshield wipers & washer					
	Be sure mirrors are clear and adjusted					
	Horn					
Outside the vehicle	High beam indicator					
	Rear running lights					
	Visually check hazard lights in front & rear					
	Visually check tires in front & rear					
	Left & right signal indicator					
	Headlights					
	Be sure side mirrors are clear					

IF THERE ARE ISSUES WITH A VEHICLE A VEHICLE REPAIR/CONCERN SLIP, LOCATED IN THE HUB, NEEDS TO BE
COMPLETED AND TURNED IN TO THE PROGRAM SECRETARY.

Initial of driver checking each day

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It is the policy of Epic Enterprise to provide a safe environment for services.

Facility

Epic's building should be kept hazard-free and safe. This includes the building, equipment, furnishings, supplies and materials. Chemicals, detergents, and other hazardous or toxic substances must not be stored with food products or in any way that poses a hazard to persons receiving services.

Staff should complete minor repairs as they discover the need. If the repair requires additional expertise or extended time, staff should complete a written repair request and turn it in to the Building & Fleet Manager. Temporary measures should be taken if a needed repair is a potential hazard. A qualified external authority conducts a comprehensive inspection annually. A report should be completed that identifies the areas inspected, recommendations for areas needing improvement and actions taken to respond to the recommendations. Members of the Epic Safety Committee will complete a self-inspection at least two times a year. A report should be completed that includes the areas covered, recommendations cited, actions necessary for improvement and results from improvement actions.

In community job sites, a job coach should observe if the environment is maintained in a safe and hazard-free way. If not, a job coach should attempt to raise the issue with the employer or contact the Epic Employment Liaison to raise the issue with the employer.

Disposal of Hazardous Materials

Staff will dispose of hazardous materials (such as fluorescent light bulbs, oil-based paint, copier toner, etc.) as recommended via the instructions given by the manufacturer of each material.

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Subject: Medication Administration Effective Date: 12/8/15

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It is the policy of Epic Enterprise to provide safe medication setup, assistance and administration:

 when assigned responsibility to do so in the person's coordinated service and support plan (CSSP) or the CSSP addendum;

- using procedures established in consultation with a registered nurse, nurse practitioner, physician's assistant or medical doctor; and
- by staff who have successfully completed medication administration training before actually providing medication setup, assistance and administration.

For the purposes of this policy, medication assistance and administration includes, but is not limited to:

- 1. Providing medication-related services for a person;
- 2. Medication setup;
- 3. Medication administration:
- 4. Medication storage and security;
- 5. Medication documentation and charting;
- 6. Verification of monitoring of effectiveness of systems to ensure safe medication handling and administration;
- 7. Coordination of medication refills;
- 8. Handling changes to prescriptions and implementation of those changes;
- 9. Communicating with the pharmacy; or
- 10. Coordination and communication with the prescriber.

Definitions. For the purposes of this policy the following terms have these meanings:

- A. "Medication" means a prescription drug or over-the-counter drug and includes dietary supplements.
- B. "Medication administration" means following the procedures of this policy to ensure that a person takes their medications and treatments as prescribed
- C. "Medication assistance" means medication assistance is provided in a manner that enables the person to self-administer medication or treatment when the person is capable of directing the person's own care, or when the person's legal representative is present and able to direct care for the person.
- D. "Medication setup" means arranging medications, according to the instructions provided by the pharmacy, prescriber or licensed nurse, for later administration.

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E. "Over-the-counter drug" means a drug that is not required by federal law to bear the statement "Caution: Federal law prohibits dispensing without prescription."

F. "Prescriber" means a person who is authorized to prescribe drugs.

- G. "Prescriber's order and written instructions" means the current prescription order or written instructions from the prescriber. Either the prescription label or the prescriber's written or electronically recorded order for the prescription is sufficient to constitute written instructions from the prescriber.
- H. "Prescription drug" means a signed written order given by a practitioner licensed to prescribe drugs, issued for an individual patient and containing the following: the date of issue, name and address of the patient, name and quantity of the drug prescribed, directions for use, and the name and address of the prescriber.
- "Psychotropic medication" means any medication prescribed to treat the symptoms of mental illness that affect thought processes, mood, sleep, or behavior. The major classes of psychotropic medication are antipsychotic (neuroleptic), antidepressant, antianxiety, mood stabilizers, anticonvulsants, and stimulants and nonstimulants for the treatment of attention deficit/hyperactivity disorder. Other miscellaneous medications are considered to be a psychotropic medication when they are specifically prescribed to treat a mental illness or to control or alter behavior.

Procedures

A. Medication setup

When Epic is responsible for medication setup staff must document the following in the person's medication administration record:

- 1. Dates of set-up:
- 2. Name of medication;
- 3. Quantity of dose:
- 4. Times to be administered; and
- 5. Route of administration at time of set-up.
- 6. When the person receiving services will be away from home, the staff must document to whom the medications were given.

B. Medication assistance

When Epic is responsible for medication assistance staff may do any of the following (any one of these might be classified as medication assistance):

1. Bring to the person and open a container of previously set up medications;

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2. Empty the container into the person's hand;

- 3. Open and give the medications in the original container to the person;
- 4. Bring to the person liquids or food to accompany the medication; and
- 5. Provide reminders to take regularly scheduled medication or perform regularly scheduled treatments and exercises.

C. Medication administration

- 1. When Epic is responsible for medication administration, including psychotropic and injectable medications, a medication administration record will be maintained for the person that includes the following:
 - a. Information on the current prescription label or the prescriber's current written or electronically recorded order or prescription that includes the person's name, description of the medication or treatment to be provided, and the frequency and other information needed to safely and correctly administer the medication or treatment to ensure effectiveness;
 - Information on any risks or other side effects that are reasonable to expect, and any contraindications to its use. This information will be readily available to all staff administering the medication;
 - c. The possible consequences if the medication or treatment is not taken or administered as directed;
 - d. Instruction on when and to whom to report the following:
 - if a dose of medication is not administered or treatment is not performed as prescribed, whether by error by the staff or the person or by refusal by the person; and
 - 2) the occurrence of possible adverse reactions to the medication or treatment.
- 2. Staff will complete the following when responsible for medication administration:
 - a. Check the person's medication administration record;
 - b. Prepare the medications as necessary;
 - c. Administer the medication or treatment the person according to the prescriber's order;
 - d. Document in the medication administration record:
 - 1) the administration of the medication or treatment or the reason for not administering the medication or treatment;
 - notation of any occurrence of a dose of medication not being administered or treatment not performed as prescribed, whether by error by the staff or the person or by refusal by the person, or of adverse reactions, and when and to whom the report was made; and
 - 3) notation of when a medication or treatment is started, administered, changed, or discontinued;

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e. Report any concerns about the medication or treatment, including side effects, effectiveness, or a pattern of the person refusing to take the medication or treatment as prescribed, to the prescriber or a nurse; and

 Adverse reactions must be immediately reported to the prescriber or a nurse.

D. Injectable medications

Epic may administer injectable medications according to a prescriber's order and written instructions when one of the following conditions has been met:

- 1. Epic's registered nurse or licensed practical nurse will administer injections;
- Epic's supervising registered nurse with the physician's orders delegates the administration of injections to staff and has provided the necessary training; or
- 3. There is a an agreement signed by Epic, the prescriber and the person or the person's legal representative identifying which injectable medication may be given, when, and how and that the prescriber must retain responsibility for Epic administering the injection. A copy of the agreement will be maintained in the person's record.

Only licensed health professionals are allowed to administer psychotropic medications by injection.

E. Psychotropic medication use and monitoring

- 1. When Epic is responsible for administration of a psychotropic medication, Epic will develop, implement, and maintain the following documentation:
 - a. A description of the target symptoms the prescribed psychotropic medication is to alleviate. Epic will consult with the expanded support team to identify target symptoms. "Target symptom" refers to any perceptible diagnostic criteria for a person's diagnosed mental disorder, as defined by the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition Text Revision (DSM-IV-TR) or successive editions, that has been identified for alleviation; and
 - b. The documentation methods Epic will use to monitor and measure changes in target symptoms that are to be alleviated by the psychotropic medications if required by the prescriber.
- 2. Epic will collect and report on medication and symptom-related data as instructed by the prescriber.
- Epic will provide the monitoring data to the expanded support team for review every three months, or as otherwise requested by the person or the person's legal representative.

F. Written authorization

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Written authorization is required for medication administration or medication assistance, including psychotropic medications or injectable medications.

1. Epic will obtain written authorization from the person or the person's legal representative before providing assistance with or administration of medications or treatments, including psychotropic medications and injectable medications.

- 2. If the person or the person's legal representation refuses to authorize Epic to administer medication, the staff must not administer the medication.
- 3. Epic will report the refusal to authorize medication administration to the prescriber as expediently as possible.

G. Refusal to authorize psychotropic medication

- 1. If the person receiving services or their legal representative refuses to authorize the administration of a psychotropic medication. Epic will not administer the medication and report the refusal to authorize to the prescriber in 24 hours.
- 2. After reporting the refusal to authorize to the prescriber in 24 hours, Epic will follow and document all directives or orders given by the prescriber.
- 3. A court order must be obtained to override a refusal for psychotropic medication administration.
- 4. A refusal to authorize administration of a specific psychotropic medication is not grounds for service termination and does not constitute an emergency. A decision to terminate services must comply with the program's service suspension and termination policy.

H. Reviewing and reporting medication and treatment issues

- 1. When assigned responsibility for medication administration, including psychotropic medications and injectable medications. Epic will ensure that the information maintained in the medication administration record is current and is regularly reviewed to identify medication administration errors.
- 2. At a minimum, the review must be conducted every three months or more frequently as directed in the CSSP or CSSP addendum or as requested by the person or the person's legal representative.
- 3. Based on the review, Epic will develop and implement a plan to correct patterns of medication administration errors when identified.
- 4. When assigned responsibility for medication assistance or medication administration, Epic will report the following to the person's legal representative and case manager as they occur or as otherwise directed in the CSSP or CSSP addendum:
 - a. any reports made to the person's physician or prescriber required regarding injections (see D3 of this policy);

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b. a person's refusal or failure to take or receive medication or treatment as prescribed; or

c. concerns about a person's self-administration of medication or treatment.

I. Staff Training

- 1. Unlicensed staff may administer medications only after successful completion of a medication administration training using a training curriculum developed by a registered nurse, clinical nurse specialist in psychiatric and mental health nursing, certified nurse practitioner, physician's assistant, or physician. The training curriculum must incorporate an observed skill assessment conducted by the trainer to ensure staff demonstrate the ability to safely and correctly follow medication procedures
- 2. Staff will review and receive instruction on individual medication administration procedures established for each person when assigned responsibility for medication administration.
- 3. Staff may administer injectable medications only when the necessary training has been provided by a registered nurse.
- 4. Medication administration will be taught by a registered nurse, clinical nurse specialist, certified nurse practitioner, physician's assistant, or physician if, at the time of service initiation or any time thereafter, the person has or develops a health care condition that affects the service options available to the person because the condition requires:
 - a. specialized or intensive medical or nursing supervision; and
 - b. nonmedical service providers to adapt their services to accommodate the health and safety needs of the person.

J. Storage and disposal of medication.

Schedule II controlled substances that are named in section 152.02, subdivision 3, must be stored in a locked storage area permitting access only by persons and staff authorized to administer the medication. Medications must be disposed by returning them to the person's residence or according to the Environmental Protection Agency recommendations.