Douglass Adult Program Parent Handbook

(UPDATED July 2017)

We are pleased to present you with this handbook which contains information that we feel will be useful. We hope you will take the time to read the information. If you have any questions or concerns, please feel free to call the DAP Behavior Analyst or the Program Coordinator at 848-932-4500.

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Program Philosophy

The Douglass Developmental Disabilities Center is a university-based facility providing specialized educational services for individuals with autism and their families. The largest single unit is the Douglass School Program, which operates a full day and extended school year program. The Center also offers comprehensive family involvement, which strives to facilitate cooperative planning, programming, and evaluation.

The Center strives:

□to educate individuals with autism using the best, current methodology
□to advance contemporary knowledge about appropriate treatment for autism
□to train parents in the skills necessary for home management of their child with autism

□to teach graduate and undergraduate students working at the Center the most advanced procedures known for the treatment of individuals with autism □to educate the general public and serve as a demonstration facility for the treatment of autism

The Center is in compliance with the New Jersey Division of Developmental Disabilities Standards for Adult Day Programs. This includes, but is not limited to planning, implementation and ongoing evaluation of Individualized Habilitation Plans; provisions for normalization and least restrictive alternatives; and accessibility to services by all clients. These goals are reviewed regularly by the Center's administrative and educational staff at regularly scheduled staff meetings and by families through meetings and consumer satisfaction surveys.

University-based Status

As a Rutgers University program, affiliated with the Graduate School of Applied and Professional Psychology, the Douglass Developmental Disabilities Center is governed fully by the University Board of Governors. Program operations reflect university policies in areas such as personnel, civil rights, etc. and budgets and policies are submitted annually to appropriate officials.

Affiliations

Affiliated with the Graduate School of Applied and Professional Psychology (GSAPP), the DDDC and, in turn, the Douglass Adult Program is governed fully by the Rutgers University Board of Governors.

The DDDC is also a member of the **Autism NJ** (formerly COSAC). **Autism NJ**, a non-profit organization, is a resource center providing information to parents and all interested persons about schools, services and programs available for individuals with autism in the state of New Jersey. **Autism NJ** also provides short-term emergency care to family members with autism and makes arrangements for speakers through the Speaker's Bureau. In addition, the DDDC is an affiliate of the New Jersey Association for Applied Behavior Analysis (NJABA), Applied Behavior Analysis International (ABAI), and a collaborative partner with Rutgers- Robert Wood Johnson University School of Medicine.

Policy on Research

The DDDC uses ABA teaching methods relying heavily on the use of precise instructional techniques. As you know, we use data to track your son's or daughter's progress and to make decisions regarding his or her educational program. We are committed to ensuring that your son or daughter is receiving the maximum benefit from his or her program at the DDDC.

As a program that uses the principles of ABA and relies on direct observation and data for decision—making, the DDDC research and training staff, as well as the supervisory staff of each division, regularly observe your son or daughter's classroom or teaching sessions, educational assessments and data over the course of each year to ensure quality of instruction. None of these activities interfere with or alter your son or daughter's educational program in any way. Occasionally, videotapes are used to minimize disruption to the classroom or teaching session and to allow for more extensive collection of data. These observations and data reviews are conducted to ensure that maximal educational opportunities are provided and that socialization is fostered. Whenever we identify issues that could be improved, we share the information with teaching staff.

In addition to the ongoing clinical use of the data gained by observation and assessments, we also sometimes use these data to document the effectiveness of our teaching technology. It is central to the mission of the DDDC to share information about the impact of our strategies with the professional ABA community and the autism community.

The teaching strategies used at the DDDC have empirical evidence for their success. Consistent with that goal, the staff of the DDDC seeks to identify new state-of-the-art teaching strategies. These new strategies are learned through professional conferences and research reports. It is our goal at the center to continually update our methods and utilize the most effective technology available. In some cases, there may be more than one method or procedural variation of a method for teaching skills to our learners. In an attempt to find the best teaching strategies for each student or client, our staff may wish to compare teaching methods. This is often done on a case-by-case basis as part of our teaching practices. Sometimes, we are interested in making broader comparisons of teaching methods across a number of students or clients.

Evaluations of teaching methods may sometimes require that students participate in specialized teaching or assessment sessions conducted by DDDC staff outside of the classroom in assessment space or workspace with minimal distractions. This alternate setting will be a location regularly used by students for assessments and/or work sessions that require less distracting environments. In these cases, sessions are coordinated with classroom staff to be minimally disruptive to daily classroom schedules. The information being evaluated in these sessions is directly relevant to the students' learning and will be shared with parents and staff in the ways that all programming information is shared (e.g., clinics, communication logs).

Data that are collected, analyzed and shared in the ways described above are always presented as group data, with no identifying information or the identification of particular students or clients is disguised. For any research project that requires a change or disruption to your son or daughter's regular educational activities or that involves data in any other way than described above, a specific description and letter requesting your informed consent will be sent to you according to the guidelines set forth by the University's Institutional Review Board (IRB).

Please call Kate Fiske Massey, Ph.D., Associate Director, Behavioral and Research Services at 848-932-4500 if you have any questions or would like additional information.

THE DOUGLASS ADULT PROGRAM

The Douglass Adult Program (DAP), a full-day, year-round special needs day program for adults with autism, operates under the auspices of Rutgers, The State University of New Jersey, and is a department of the Douglass Developmental Disabilities Center. The Douglass Adult Program provides comprehensive services to adults age 21 and beyond having a diagnosis of Autistic Spectrum Disorder. The program is located at 151 Ryders Lane New Brunswick, NJ.

Established in 1997 as a separate unit of the DDDC, the Douglass Adult Program provides employment and related day services to adults with autism. A major programmatic focus of the Douglass Adult Program is on training the skills necessary for life in the community. Utilizing an ABA model of skill development, the Douglass Adult Program endeavors to promote learning and work environments that recognize and support individual competencies, encourages skill development, minimize the need for display of problematic behavior, and respects, to whatever extent possible, appropriate consumer choice and control.

Members of the Douglass Adult Program staff include administrators, behavior analysts, coordinators, team leaders, a school nurse, teaching assistants/job coaches, clinical psychologists, and office personnel. Most of the administrators and supervisors are Board Certified Behavior Analysts (BCBAs) and several members of the instructional staff are taking certification classes.

The DAP provides services in accordance with the guidelines set forth by the New Jersey Division of Developmental Disabilities for Adult Day Programs within the state in that:

- the program operates year round (at least 230 days/year)
- the program provides a structured day, five hours a day, five days a week
- the program provides transportation within a defined geographic area
- the program has a minimum of a 1:3 staff to consumer ratio

Examples of day program activities include:

- □ activities of daily living
- volunteer activities in the community
- □ contract work with a crew of peers
- □ pre-employment skill training
- □ socialization/recreational activities

The Douglass Adult Program's curriculum is individually planned and committed to providing effective education to adults with autism in the least restrictive setting and in a manner that is appropriate for each individual. The program's primary goal is to encourage community integration via gainful employment, volunteering, and a wide variety of recreational outings. General goals of the Douglass Adult Program are:

1. To educate adults with autism using the most current, appropriate, and least intrusive methods available.

- 2. To teach university graduate and undergraduate students who work at the Center the latest techniques in the education and treatment of adults with autism.
- 3. To advance contemporary knowledge surrounding the etiology and treatment of the disorder.
- 4. To inform members of both the professional and lay communities about autism and to serve as a model for other educational facilities.

Evaluation of Progress

Client progress is evaluated daily by the use of discrete trial data, log data, pre-test/post-test data, and individual program graphs. This close monitoring of progress facilitates ongoing and active fine-tuning of programming in accordance with IHP specifications. Changes in services or substantial modifications of programming are shared both with the client's DDD case manager their parents/guardians.

General Information

The Douglass Adult Program is located on the Douglass Campus of Rutgers University at 151 Ryders Lane, New Brunswick, NJ 08901

Phone: 848-932-4500 FAX: 732-932-4509

- 1) Operating hours are 8:00 a.m. to 4:00 p.m. Professional staff are available 8:15 a.m. to 3:45 p.m., clients attend the program from 9:15 a.m. to 2:45 p.m.
- 2) Educational services are provided to individuals having a diagnosis of Autistic Spectrum Disorder or Asperger's Syndrome, age 21 and beyond.
- 3) There are 3 workrooms within the Adult program, each of which are overseen by a team leader. The program coordinator and Behavior Analyst oversee the three team leaders and all workrooms.
- 4) Administrators and supervisors are all certified professionals.
- 5) Clients are supervised at all times.
- 6) All medical emergencies, accidents, or unusual incidents are documented in Incident Reports. All such incidents are reported to the Division Director, the School Nurse, and if applicable, the NJ Division of Developmental Disabilities.
- 7) If a client arrives at the program ill or becomes ill during the day, staff contact the School Nurse/Administrator. Parents are contacted as necessary (see **Medical Procedures**).

- 8) For security purposes, all outer doors remain locked at the program. All visitors must report to the receptionist when entering the building. There is a sign-in/sign-out sheet at the reception desk and all visitors must wear a guest identification tag while in the building.
- 9) Telephone calls are an important means of communication; however, staff need to focus their attention on clients throughout the day. Therefore, parents are requested to call the program directly to speak to staff between 8:15 a.m. and 9:00 a.m., or after 3:00 p.m. unless it is an emergency. Due to staff meetings and professional development activities, some staff are only available at specific days/times. Please consult with your client's service staff to clarify their availability to receive telephone calls. Secretarial staff will put messages through to voice mail when staff are unavailable to take calls unless it is an **emergency**.
- 10) Clients are only allowed off program property with a qualified staff member.

Interdisciplinary Team (IDT)

It is central to the Douglass Adult Program's educational policy that parents, siblings, guardians, and/or group home service providers be fully involved in the education of the adult with autism. We follow a number of procedures to ensure that this policy is fully implemented.

- □ Parents/Legal guardians are invited to participate fully in the planning and evaluation of their child's IHP.
- □ Parents are free to review any files necessary to participate in the planning and evaluation of the child's IHP.
- □ Before any behavioral intervention is implemented, an individualized plan will be discussed with parents/guardians and their informed, written consent for implementation must be obtained.
- □ In order to facilitate communication between program and home, face-to-face visits between coordinators and parent(s)/guardians/group home personnel can be arranged on an as needed basis.

Policy on Home Consultation

The Douglass Adult Program **does not** provide any type of in-home services such as consultation, instruction, or behavior management services. It operates strictly as a day program in accordance with the guidelines set forth by the New Jersey Division of Developmental Disabilities.

To request behavioral services in the home environment, parents/guardians should contact their DDD case manager to discuss the possibility of acquiring additional support.

Policy on Behavior Management

Some individuals with autism may demonstrate challenging behavior(s) at one time or another. Behavior(s) could hinder an individual's opportunities to benefit from the educational environment, or may put the individual /staff at risk for injury. Behavioral challenges may occur regularly, sporadically, or without precedence.

Regularly occurring behaviors that negatively impact learning or which place the individual/staff at risk should be formally addressed through Functional Behavior Assessment prior to intervention. The assessment, which may include functional analysis of a behavior(s), will determine the strategies for intervention. All behavioral interventions require informed consent from parent(s)/guardian(s) before they can be implemented. No individual with behavioral challenges will be excluded from the Douglass Adult Program as long as their behavior can be contained without jeopardizing the safety of others in the environment.

In addition, at times a client may engage in a behavior that puts herself or himself or others at risk of injury, and a formal behavioral intervention may or may not be in place. In order to preserve the integrity of the educational setting for all clients the protocol for addressing a serious spontaneous aggressive or self-injurious behavior of a client whose behavior is momentarily unique, and/or whose behavior momentarily is not responding to the formal behavioral plan, will be addressed through **crisis management techniques**. Each year all staff are required to attend crisis management training and pass a test to obtain a certificate which allows them to utilize these techniques. It is a NJ State approved course taught by trained professionals.

Additionally, since the Douglass Adult Program provides its own transportation it may sometimes be necessary to take certain measures to ensure the safety of all clients and staff while riding on DAP vehicles. One such measure may involve the utilization of a "buckle buddy", a device that prevents the removal of an individual's seat belt in a vehicle, to ensure the safety of all clients and staff within our program in the event that an individual exhibits behavior that is dangerous to themselves or others that is not typical or characteristic. In some cases the regular use of a buckle buddy device may be necessary to ensure client safety. If this is the case, written consent will be obtained from the parent or guardian in order to do so.

Personal Protection Equipment (PPE)

Students/Clients

The use of PPEs with students is determined based on several factors including but not limited to:

- 1. Behavior that puts the student/client at risk for serious injury
- 2. Behavior that has not responded to less intrusive measures
- 3. An intervention that has the informed consent of the parents/guardians, child study team and the supervising behavior analyst(s)

Personal Protection Equipment available for use with students/clients at the DDDC:

- 1. A full or partial helmet with/without a face shield The use of this PPE will be determined as outlined above. It will be specifically marked for its use with one student/client only, cleaned with mild detergent and water daily, and stored out of sight in a clean location when not in use.
- 2. Arm/hand guards/gloves to protect students/clients from self-inflicted biting/scratching These PPEs are worn **by students/clients** (not staff as discussed below). Approved arm/hand guards/gloves will be provided by supervisors for students/clients who have known self-injurious

biting/scratching behavior(s) until such time as the behavior is remediated in frequency and intensity. A minimum of two pair of arm/hand guards/gloves per student/client will be specifically designated with the student/client's name, wiped down daily with mild detergent and water and left to dry overnight (no bleach). Clean, dry arm/hand/shin guards/gloves will be stored out of sight in a secure, clean location when not in use. Soiled arm/hand/shin guards/gloves will be kept in a separate bin away from the clean guards. **

Staff

Personal protective equipment (PPE) is worn by DDDC employees under specific conditions in keeping with industry standards for staff who work in healthcare, or other facilities serving developmentally/intellectually disabled, or behaviorally/mentally compromised individuals. Consistent with the DDDC Specific Exposure Control Plan (ECP) for Clinical Client Care developed in conjunction with Rutgers Environmental Health Services (REHS), and incorporating recommendations made by Rutgers Occupational Health Services, this equipment is worn for the purpose of protecting both students and staff from transmitting blood-borne pathogens, and/or to protect staff from other serious injuries. PPE use is specifically designated by an administrator, or in some instances the school nurse depending on the circumstances. Examples of this equipment include but may not be limited to:

- Non-latex protective gloves These are worn by any staff member in accordance with training on Blood-borne Pathogens when client care requires the handling of blood or other bodily fluids. Gloves will be removed and discarded according to protocol. A set of gloves will never be reused.
- 2. Eye goggles These are used to protect the eyes from the splatter of bodily fluids as necessary.
- 3. Gowns These are used when cleaning up a large accumulation of bodily fluids
- 4. *CPR mask* These are used to deliver CPR as necessary. They are sterile and used only once.
- 5. *Face shields* to protect the face against blood, saliva or feces. The use of shields will be determined by supervisory staff. These will be disinfected each day after use.
- 6. *Arm/hand guards and gloves* to protect against the exchange of bodily fluids (blood and saliva) from bites; and *shin guards* to protect staff from severe bruising. Approved guards will be provided by supervisors to staff who work with students/clients who have a known biting/scratching/kicking behavior(s) until such time as the behavior is remediated in frequency and intensity. A minimum of two pair of arm/hand/shin guards/gloves per student/client will be specifically designated with the student/client's name to be used by staff working with those students/clients. They must be wiped down daily with mild detergent and water and left to dry overnight (no bleach). Clean, dry arm/hand/shin guards will be stored out of sight in a secure, clean location when not in use. Soiled arm/hand/shin guards will be kept in a separate bin away from the clean guards. Staff will wear arm/hand/shin guards underneath clothing (which will be supplied to staff as necessary), and staff will apply and remove arm/hand/shin guards in private areas unless a crisis situation warrants their use in the moment. **
- 7. *Chest protectors. The use* of this PPE will be determined by supervisory staff. They will be cleaned routinely and stored properly.
 - ** NOTE: If any PPE is contaminated with student/client/staff blood, that equipment is to be replaced immediately with clean equipment, and the contaminated equipment must be given to the DDDC nurse for proper disposal.

Policy on Crisis Management

On occasion, an individual may engage in a serious behavior that requires intervention though a formal plan of action does not exist and/or parental consent is not available. The behavior must be serious, putting the individual or others at risk of injury. In such cases, **crisis management procedures** may be implemented by direction of the staff member in charge during the time of the incident. Crisis management intervention should be terminated as soon as the situation is under control. A supervisor should always be called when crisis management is deemed necessary.

Crisis Management training is required for all staff members during in-service training each year. It is a NJ State approved course taught by trained professionals. Staff are also trained in CPR/First Aid.

At times, an individual may engage in a behavior that is putting themselves or others at risk of injury. Though staff have crisis management training, and a formal behavioral intervention may be in place, the training and plan may not be enough to contain a serious aggressive behavior. In order to preserve the integrity of the educational setting for all individuals the protocol for addressing a serious spontaneous aggressive behavior of a whose behavior is momentarily unique, and/or whose behavior momentarily is not responding to the formal behavioral plan, will be as follows:

- Crisis management will be initiated by a certified staff member
- Crisis management restraint procedures will be utilized to contain the initial behavior
- The crisis management systematic release protocol will be utilized once the individual manifests a calm demeanor
- Restraint, where numerous opportunities for release are available but the aggressive behavior continues at a serious intensity level, will necessitate that the parent(s)/guardian(s) be called to remove the student from the program.
- The individual's case manager/support coordinator will be informed of the above and an Interdisciplinary Team Meeting (IDT) will be scheduled with the DDD representative, the parents and the professional staff to determine a plan of action which may require the advice of a medical professional or an alternative placement

The Douglass Adult Program Observation Policy and Procedures

We are pleased to be able to provide you with a live-video feed observation system so that you can make regular observations of your son or daughter in the classrooms at the DDDC. This equipment is used only for live observation; we do not record the images.

We will provide a staff member to accompany you during your observations to explain all programming and answer any questions. We are delighted to be able to provide this service, and we feel it will greatly enhance the quality of your observations.

For each family, a maximum of two observations per month can be accommodated to allow for staff availability. These visits should be arranged one week in advance unless an unusual circumstance warrants immediate access. Observations will be one-hour in length, and will include explanations from a staff member from the classroom.

Notice on quality of video

Because the video is live there will be times when there may be intermittent obstructions to your view, or noise that makes it difficult to hear specific responses. This is unavoidable. We hope you will understand that we cannot go into the classroom and rearrange things or ask instructors to move to different spaces. Those intrusions are costly in terms of learning opportunities for your son or daughter and for other learners who might be drawn off track by the commotion of rearranging the room.

Special Arrangements

Because the observations from the live-feed video system are not always clear, we are sometimes able to make special arrangements if there is a target behavior you wish to observe. You may request any of the following.

- ☐ If the arrangement of cameras does not allow you a very helpful view, we can arrange for your son or daughter to be **moved to a different location** for the interval while you are observing.
- □ Under specific circumstances, it may be possible to arrange an observation if your son or daughter is not distracted by your presence and it does not disrupt the staff or programming for other learner. However, space is limited in most instructional spaces and frequent requests of this kind cannot be accommodated.

Etiquette and other policies

There are expectations of courtesy and civility in using the observation equipment. Failure to follow these rules will result in the immediate termination of your observation privileges.

- A. Respect the privacy of other parents who are observing at the same time. Refrain from using loud or offensive language. You must also refrain from interrupting others who are observing.
- B. Video and sound recordings inside the DDDC are **prohibited** without written consent of the DDDC. This rule applies to the observation rooms and the classrooms.

Thank you in advance for your expected adherence to these guidelines. Please do not hesitate to contact us if you have any questions or concerns.

<u>Policy on the Delivery of Outside Related Services</u> (Occupational, Physical, or other therapies)

The DDDC is committed to working as members of each client's interdisciplinary team. When occupational and physical therapy services are indicated for a learner, the DDDC strives to coordinate with all related team members to ensure appropriate services can be provided in the most effective means possible.

To this end, we believe that it is in the best interest of the client, that whenever feasible, physical and occupational therapy objectives be implemented within a consultative model, so that target skills can be addressed throughout a client's typical work day and within as many functional environments as possible. The staff members are invested in collaborating to identify ways in which these objectives can be embedded into ongoing programming and activities, and to further advance the therapeutic goals of such services.

When specific assessment indicates that more intensive and direct therapeutic sessions in these disciplines are required, it is our expectation that service providers work collaboratively with the staff at our Center to identify and arrange the most appropriate schedule for the client so he or she can participate in individual sessions without compromising the integrity and intensity of the services provided at the DDDC. Specific considerations may depend on the setting within the DDDC, but typically involve factors such as scheduling individual sessions at times that are not disruptive to group recreational activities, skill training, or employment schedules. Often, the best times to schedule individual sessions by outside service providers are first thing in the morning, during break periods or after 2pm. Also, these sessions should not exceed 1 hour per week for each type of therapy.

There may also be circumstances which raise important issues of continuity of structure, programming or intervention. As an example, clients with serious challenging behavior concerns may require continuation of specific behavior intervention plans and instructional strategies, even throughout participation in related services. In some cases, this may be accomplished by having therapeutic sessions conducted within the workroom environment so that DDDC staff can implement specific behavioral strategies or support the service provider in implementing these plans.

Additionally, DDDC staff members are committed to working with team members providing related service to monitor progress toward specific objectives during individual sessions. We expect that goals identified in these domains will be measurable and observable; and our staff may be available to support the development of these objectives or assist with periodic data collection, if indicated. Such objectives and data are critical for assessing the effectiveness of intervention; the fine tuning of programming; and are extremely useful in circumstances requiring joint decision making among team members about the most effective strategies and scheduling for helping the team meet all of the client's programming needs.

Medical Procedures and Policies

General Information:

- 1. In order to provide appropriately trained emergency care, all DDDC Adult Program Staff shall participate in health and safety training to be conducted by the DDDC nurse or a NJDDD approved provider.
- 2. The telephone number of the poison control center and emergency services shall be posted in several locations throughout the DDDC, and staff shall be informed regarding procedures for calling these numbers.
- 3. In the event of a medical emergency, staff are expected to take life saving measures that are essential and to contact the rescue squad and DDDC administrative staff as rapidly as possible. Whenever feasible, one or more persons should render first aide while another individual makes the appropriate telephone calls. A client's team leader or coordinator will accompany the client to a medical facility. An administrative staff member will meet parents/guardian/group home provider if appropriate.
- 4. In the event of serious emergencies, the rescue squad will be contacted immediately. In the event of a lesser injury, the parent/guardian/group home provider will be notified and the client will be transported to the University Health Center by the Campus police or a Douglass van by a certified staff member and a driver. If the client requires emergency treatment at a local hospital emergency room, the parent(s) /guardian(s)/group home service provider must come at once to meet the staff at the hospital.
- 5. Any minor injuries such as scratches, bruises, splinters, etc., which occur at the DDDC, and are treated by the DDDC nurse, should be further treated by the parents/guardian/group home provider when the adult gets home. (Example: applying ointment/cream, changing the bandages, etc.)

NOTE: All major and moderate injuries are to be reported as Unusual Incident Reports by the DDDC UIR Coordinator according to NJDDD Circular #14 and Circular #15. See the Douglass Adult Program Manual for specific procedures, deadlines, and submission information.

- 6. If a client is absent from the Douglass Adult Program due to illness for a period of five (5) consecutive days, a physician's written approval/clearance is required prior to the individual's return to program in accordance with the New Jersey Division of Developmental Disabilities: Standards for Adult Day Programs.
- 7. A complete physical examination with an updated immunization record (including the Hepatitis "B" and Varicella (chickenpox) vaccination) is required before entering the program. Upon being accepted into the program, every other year a physical examination will be required.
 ** Annual physicals must be completed and documentation of the physical must be received by the DDDC by July 1st of every year. Fifteen days prior to the July 1st deadline a reminder will be sent. If the documentation is not received by July 1st the client will be suspended from the program until such documentation is provided.

- 8. Failure to meet the requirement for immunization against communicable disease will result in exclusion from the program unless:
 - □ A physician's written statement submitted to the DDDC indicates that an immunization is medically contraindicated.
 - □ A parent or guardian's written statement submitted to the DDDC explaining how the administration of immunizing agents conflicts with the client's exercise of bona fide religious tenets or practices
- 9. Medical package including:
 - □ Either Physical Examination or Health Information form
 - Permission to Diagnose and Treat form
 - □ Emergency Information Sheet

All the above forms will be sent home in the parent/guardian/group home packet by the end of April. Forms must be signed and/or updated and returned back to the DDDC nurse on or <u>before July 1st</u>.

Parents/guardians/group home provider of any client with known severe allergic reactions should complete the Emergency Health Care Plan (EHCP) in consultation with their child's physician, and have the physician cosign and authorize the emergency procedures (e.g. Epi-Pen). Please contact the nurse's office for the EHCP form.

For safety reasons, all clients should wear sneakers or rubber-soled shoes that are suitable for protecting their feet in program and at work, NO flip-flops or sandals are allowed unless the day's planned activities involve swimming or other beach-related outings.

Medical Appointments

Many of our clients benefit from being accompanied by one of our staff to outside medical and dental appointments. These appointments may be characterized as either "routine" check-ups or minor illness/injury; or, health crisis/medication related. In these circumstances, DDDC staff provides supplemental behavioral support or contributes relevant information to the medical provider regarding a client's behavior and skills.

In circumstances where DDDC staff support is requested, parent/guardians are asked to submit a request in writing, specifying the nature of the appointment, the location of the appointment and the type of support needed. Based on an advanced request, the DDDC will respond with availability and participate in the scheduling process. Additionally, a number of limitations will apply:

We ask that any "routine" outside appointments our staff are asked to attend be scheduled between September and April and that they be scheduled as early as possible in the morning (8:30-9:45am). In the event that one of our staff accompanies a client to a "routine" appointment and the appointment is not finished by the expected time, *barring a crisis*, our staff will need to excuse themselves as they must return to the program by 10:30 am to ensure staffing for all clients and scheduled commitments. In

addition, distance is a factor. Generally, "routine" appointments over 30 minutes away require more time and cannot be accommodated due to programming and job site commitments. If it is not possible to schedule routine appointments with the above restrictions, parent(s)/guardian(s) should contact the client's DDD case manager to discuss the possibility of acquiring additional outside assistance.

If a client needs to be accompanied to a medical appointment for a **health crisis or medication related issue impacting behavior both at home and in program**, the DDDC will make every effort to be flexible and available, though we cannot guarantee this support. These requests will be addressed on a case by case basis, and appointments scheduled in collaboration with the DAP Behavior Analyst or DAP Program Coordinator with approval by the supervising administrator.

Policy for Administering Medication:

The Douglass Developmental Disabilities Center (DDDC) disclaims any and all responsibility for the diagnosis and treatment of the illness of any client. The DDDC recognizes that the attendance of a client may be contingent upon the timely administration of medication duly prescribed by a physician, and will permit the dispensation of medication in DDDC only when the client's health and continuing attendance in DDDC so require and when the medication is administered in accordance with this policy.

For the purpose of this policy, "medication" means any prescribed drug or prescribed over-the-counter medication or nutritional supplement and includes, but is not limited to, aspirin and cough drops.

The following procedure must be followed before qualified personnel will be permitted to administer medication to a client:

- 1. The medication must be delivered to the DDDC in its original prescription labeled container with the client's name, date, name of medication, dosage, schedule, and physician's name. The label on the medication MUST match the written prescription. Non-prescription drugs are to be in original container.
- 2. Physician's written and signed statement of the medication's name, the purpose of its administration, the specific client for whom it is intended, and the time when its use will be discontinued must accompany medication. A copy of the original prescription must be submitted along with this form. The prescription must state the individual's name, date, name of the medication, dosage and the time of day that the medication should be administered.
- 3. Written medication request from a parent or guardian giving permission to administer the medication prescribed by the physician must accompany medication.
- 4. When a long term medication is discontinued or changed, a written statement is required by the parent or guardian.

All client medication will be appropriately maintained and secured by the DDDC nurse. The nurse may provide the DAP staff members concerned with the client's educational progress with such information about the medication and its administration which may be in the client's best educational progress or best educational interests. The nurse may report any client who appears to be adversely affected by the

administration of medication and recommend to the DDDC director that the client be referred back to the physician for a review of medication.

PROCEDURE for ADMINISTERING PRN medications:

Prior to administering any PRN medication the staff at the DDDC will make every attempt to contact the parent/guardian to inform them that the medication will be administered. If medication has been given a phone call to the parent/guardian/residential staff will be made to inform them if and when medication was administered. In addition a written note will be completed and placed in the communication log. (this written note indicates the name of the medication, the dose and the time it was given).

Medication:

The Parent/Guardian and Physician Permission to Administer Medication forms can be obtained in the nurse's office upon request.

- 1. All medication should be delivered to the DDDC by the parent or guardian, if you choose to send the medication with the client to the DDDC, please make sure the van driver keeps the medication in his/her possession. Upon arriving at the DDDC, the driver should deliver the medication to a coordinator.
- 2. Please notify the nurse immediately of any medication changes, especially in the event of an emergency.
- 3. Whenever a medication is discontinued, all remaining medication will be sent home. The medication will be securely placed in a sealed envelope inside your child's book bag, it is your responsibility to check and make sure that the medication has not been tampered with. For those who are on long term medication, the permission for administration of medication forms will be sent home with the parent packet in April and should be signed and renewed annually. Completed forms are due by July 1st.

Emergency Medication

As of September 1, 2011 all clients requiring medication/supplements during programming hours will need one prescription bottle with medication or supplements for the nurse (or an appropriate DDDC staff member) to administer on a daily basis *as well as* one additional prescription bottle with a *one day dose* in the event of an emergency. This second bottle will remain with the client in the classroom/community/work place at all times. In the event there is an emergency requiring the clients to be in a lock-down situation, or to be evacuated to a safe haven outside the building, your child will still get his/her necessary dose of medication. There are only two exceptions — Diastat and Epi-Pens. We do not need two of either of these as these will now be kept with the client during programming hours instead of with the nurse. Parents/Guardians are responsible to send in medications that will not expire for at least 12 months

Douglass Adult Program Attendance Policy

Clients attending the Douglass Adult Program do so according to the DAP calendar. The calendar is prepared in advance and sent to parents, group homes, and posted on the DDDC website.

If a client will not be attending program on a given day, the parent/guardian, or group home staff must call the DAP by 8:15 a.m. to advise the office that the client will not be in. In the event of an illness that is deemed to be contagious, it is advisable that the parent(s)/guardian also speak to the school nurse so that the nurse can alert other clients' families and staff. On the occasion that a clients will be late, the parent(s)/guardian, or group home staff should notify the DAP and make sure that appropriate transportation is arranged.

Attendance Policy (as it relates to illnesses):

The purpose of this policy is to protect and maintain a safe and healthy program environment for all individuals associated with the DDDC. Any client with a suspected or confirmed case of a communicable disease will be excluded from the program. The parent/guardian, or group home staff will be contacted immediately in the event of a suspected communicable disease and will be required to pick up their client as soon as possible from the DAP in accordance with the New jersey Division of Disabilities Standards for Adult Day Programs. For this reason in particular it is imperative that we have emergency numbers where we can reach you or a home representative at all times should your client become ill and need immediate transportation to their residence. The Douglass Adult Program will require that an individual be removed from the program for symptoms including, but not limited to:

- Fever
- Diarrhea more than 2 times within an hour
- Vomiting more than once without reasonable explanation
- Pink-eye with discharge
- Body Rash
- Yellowish skin or eyes
- Sore throat or swollen glands
- Severe coughing
- Runny nose with heavy greenish discharge
- Uncovered weeping skin lesions
- Injury required to be evaluated by the physician at Rutgers Health Center
- The individual is too weak or tired to participate in routine daily activity
 - *Please note that the list is not to be considered all-inclusive and that the supervisor and nurse may use their discretion in contacting parents.
- The client cannot return to the day program until symptoms subside (or he/she has been treated with medication for 24 hours, or has a physician's note to return to the program.
- If the client is at the DAP in apparent ill health for two (2) consecutive days, they may be sent home and temporarily suspended. The DAP will:

- Obtain approval from the Regional AT/SE Coordinator for suspension
- Notify the DDD Case Manager
- Document the illness & any action taken and place in the individual record
- A Physician's note will be <u>required</u> for the return of any client following:
 - o absences that last for a period of five (5) days

Illnesses:

- 1. When your client is ill, please call the DDDC between 8:00 and 8:30 a.m. to say he/she will not be in.
- 2. If the illness is known to be contagious, it is even more important that you notify the DDDC so that the other parents can be alerted to the symptoms of the illness (e.g., pink-eye, chicken pox, strep throat, Roseola, etc.).
- 3. When your client has a fever, diarrhea, or any other kind of illness, he/she cannot return to school until symptoms subside or he/she has been treated with medication for 24 hours, or has a physician's note to return to the program. (Also see attendance policy).
- 4. If your client is ill or has a seizure before the day program, or during the day, and is unable to participate in program activities your client will need to be picked up by you or your designated emergency contact person. This decision is up to the discretion of the nurse and/or supervising administrator.
- 5. If your client has a seizure for 5 minutes or more *and/or* requires that we administer Diastat while at the DAP, 911 will be called. The decision to transport your client to the hospital for further treatment will be determined by the nurse or medical supervisor in conjunction with the paramedics on site. Our number one priority is the safety of your client.

Policy on Missing Clients or Suspicion of Abuse, Neglect, or Exploitation

PURPOSE:

The purpose of this policy is to ensure that any suspicion that a client may be missing, abused, neglected or exploited must be reported to the NJ Division of Developmental Disabilities. It is the responsibility of any individual associated with the Douglass Adult Program (DAP) to make the directors and supervisors aware of any client who does not arrive at program when expected and without explanation; or, any reasonable suspicion of client abuse, neglect or exploitation. Furthermore, the reporting individual is obligated by law to ensure that a report is filed with the appropriate governmental authorities.

ACTION REQUIRED:

All staff members will:

• Be vigilant regarding the release of clients to non-family members, and to be aware of custody rights where there are custody issues;

- Call to determine the nature of an absence if a client is absent from program without a contact from home.
- Report any concerns or suspicions of abuse, neglect or exploitation to their immediate supervisor
 - o Abuse: Physical, Verbal or both
 - Neglect: Physical, medical (i.e., a pattern of failure to distribute appropriate meds), social (i.e., severely restricted, isolated, unengaged for lengthy periods of time, etc.)
 - Exploitation: working for the benefit of another without compensation for extended periods of time (other than volunteer for a charitable organization); taking advantage of client's vulnerability due to disability (e.g., appropriating clients possessions, money, etc.)
- The DAP coordinator will inform the Director of the program and will submit an Unusual Incident Report (UIR) to the UIR Coordinator and to the DDD per NJDDD Circular 14 requirements.
 - o The school nurse will:
 - Log any unusual bruising or patterns of bruising
 - Take pictures as appropriate
 - Notify the parent/guardian

NOTE: See special procedures for A+ and A level UIRs in DAP Manual.

LUNCH

Depending upon individual programming needs of the clients at the DAP, they can either bring a prepared lunch (cold or hot) or the can prepare simple lunches at the center. Specifics pertaining to each individual will be discussed and determined by the staff at the DAP and the parent/guardian/ or home representative. This may include dietary restrictions, allergies, or food preferences. Additionally, on occasion the clients may go out into the community to purchase lunch at a local restaurant or they may be on a trip that requires they bring a cold bagged lunch, if this type of activity is scheduled, the DAP will communicate to the parent/guardian/home representative what is required.

Procedure for Delayed Openings or Closings

The DDDC uses the **Connect-Ed system** of notification. This system notifies all families/group homes and staff when a delayed opening, early dismissal or unscheduled closing is imminent (email, phone and text).* By completing information forms, we will get you connected. In addition, you can listen to **WCYC (1450 AM)** - **WMGQ (98.3 FM)** – or **NJ1015 (101.5 FM)** between 6:15 AM and 7:30 AM for school/program closing information. It will be announced under <u>Special Facilities Closings</u>.

If the DAP is on a delayed opening, there will be no AM transportation services provided. Staff will report at 10 AM, and clients will be admitted as of 10:30 AM. Staff are expected to come to work even if no clients come to the Center.

If the Douglass Adult Program is open during inclement weather and the conditions do not improve before midday, we will have an early dismissal at 1:15 PM. In most cases involving an early

dismissal, the DAP will provide normal transportation for clients from the DAP to their places of residence. If we have a delayed opening, we will not have an early dismissal. It will be one or the other.

Building emergencies are unpleasant but inevitably they do occur. We will also use the Connect-Ed notification system to inform you when the program is experiencing utility or phone problems.

*Especially for unscheduled early dismissals, it is imperative that we have emergency numbers where we can reach you should the program have an early dismissal. We cannot release clients to depart the program without having your permission and assurance that someone will be home to receive your child. If we are unable to contact you and the van must leave without your child, you will then become responsible for your child's transportation to his/her place of residence, and a DAP staff member will have to wait with your child at the program until your arrival.

Transportation Guidelines and Arrival and Dismissal Procedures

Most of the clients who attend **the Douglass Adult Day Program a**re transported by DAP staff via Rutgers' vans. The following transportation standards are those provided by the New Jersey Division of Developmental Disabilities for Adult Day Programs with the state:

- If it is established by the transportation sign-off form that someone must be home to receive an individual at the end of the day and no one is home when the vehicle arrives, the vehicle will continue on its usual route and bring the individual back to the day service site or an authorized location. The home representative is then responsible to transport the individual back home on this day.
- Day service participants are responsible for being ready to board the vehicle when it arrives at their home in the morning. The waiting period for picking up an individual is **three** (3) **minutes**. If there is no response from within the home during that time, the vehicle shall continue on its route and will not return that day. It is then the responsibility of the home representative to transport the individual to the program site.
- If there are repeated problems with pick up or drop off of the individual, transportation may be suspended until a corrective plan of action is implemented.
 - Transportation is provided on a curb to curb basis. Transportation staff are not responsible for escorting individuals to and from the home. The day service and/or transportation provider's responsibility for the individual ceases when they step off the vehicle.

** These transportation guidelines are in accordance with the DDD Standards for Adult Day Programs (Chapter 17, A3:3)

There are circumstances where others transport clients to the Douglass Adult Program. Having a Center on the campus of a large university is difficult. Parking and traffic are major issues. In order to provide for the safety of our clients and make arrival and dismissal more manageable we have established rules that **everyone** must follow. Please be mindful of the following:

• The staff unload clients from vehicles beginning at 9:15 AM. If you are transporting a client and you will be late on a given day, please call the program as soon as possible to provide an

estimated time of arrival so that our staff can be prepared to receive your child. If you dropoff your child, **you must not leave** your vehicle. A staff member will remove your child from the car and walk him/her inside.

Dismissal is very similar. We will begin loading vehicles at 2:45 PM. Please do not leave your vehicle. Someone will bring your child to you.

• If your child is being picked up by someone other than the typical driver please notify the program regarding the person's name, description, and the time of arrival.

The Policy on Respite

If parents/guardians are interested in obtaining respite services from DAP staff they should contact the DAP Program Coordinator or the Behavior Analyst who will either post a flyer of your own creation or make an announcement during the next monthly staff meeting. The flyer should NOT include any specific identifying information related to the potential client. Information like the individual's age, gender, preferences, the hours and days of the week needed, and rate of pay would all be appropriate in addition to the contact information for the parent/guardian. Should parents/guardians receive assistance from anyone as a result of a flyer posted at the DDDC or from announcements made at staff meetings, it would be a private, fee for service agreement between individuals, independent of the DDDC. Again, the DDDC does not assume any responsibility for these employment arrangements.

Policy on Gift Giving

There is sometimes discomfort about the appropriateness of gift giving to staff within the school context or the feeling that gifts might be expected, especially at holiday time or at the end of a school year. Some families use gift giving as a means to say "thanks," but not all families are in a position to do so though they equally appreciate staff effort. At the DDDC gifts are **never** expected. The DDDC is ethically bound to ensure that all of our students and clients are treated equally and that no one has or might be perceived to have special advantages or influence. For those of you who want to give staff members a token of your appreciation, we recommend a card or letter, or small token such as homemade treat; or, you might consider a donation to a charity or organization such as the DDDC, Autism NJ or D.O.O.R.S. in honor of the staff member(s). However, if you are inclined to give any other kind of gift to any staff member it is our policy that the value of the gift be restricted to a maximum value of \$25.

Policy on Parties

The DDDC faculty and staff recognize that, on occasion, it is appropriate for our communities to celebrate together as a group to mark a special event or the birthday of a peer or coworker. The following guidelines are designed to allow for parties and birthday recognitions, without unnecessarily infringing upon center and community-based instructional time.

Parties

Historically, there have been a few parties throughout the year. These parties typically coincide with Halloween, and the last day of school prior to winter break. Parents/Guardians/Group homes will receive adequate prior notice when one of these events is imminent to ensure an opportunity for proper planning.

Birthday Celebrations

If you would like to have a birthday acknowledgement for your son/daughter, please speak with the DAP Program Coordinator or the Behavior Analyst in advance as to what is appropriate. Parents/Guardians should be mindful of the DDDC's dietary restrictions for clients at the Center. These birthday recognitions generally occur during the hour allotted for lunch during the day between 11:45-12:45 and are typically limited to taking place within the Center.

In the past, parents have celebrated their son/daughter's birthday by ordering pizza or sub sandwiches for the program, or by providing baked treats such as cookies or cake. In some cases DAP clients and staff can pick up these items as part of their daily activities. Otherwise parents/guardians are asked to drop off the items in the main reception area, and they will be delivered to the program. Please contact the DAP Program Coordinator or the Behavior Analyst to discuss what will be possible on a given day.

Picture Taking at Events and Parties

Please be advised that in order to protect each individual's right to privacy the DDDC restricts the use of cameras to the following:

- Parents/Guardians may take a picture only of their child/adult.
- Parents/Guardians may take a picture only of their child/adult and staff with staff permission.
- Parents/Guardians may take a picture of their child/adult with one or more other children/adults *only* if the parents/guardians of those individuals are present and give permission.

Special Alert: Food Allergies

The Douglass Adult Program has clients in the program with serious, life threatening allergies to **nut** and **nut by-products**. In our continuing efforts to insure the safety of these individuals, we deem it **necessary to prohibit all nut products** within the building for all adults. Please check the labels on your food. Your cooperation in this matter is imperative. It may save a life. If you have any questions, please contact one of the DAP Program Coordinator or the Behavior Analyst. Thank you.

<u>Disclaimer</u>: While every effort is made to safeguard the Educational Environment, the Douglass Developmental Disabilities Center **cannot guarantee** the environment is "free" from all nut products and by products due to a variety of external variables (i.e., visitors).

Addendum

In addition to the policies listed in this handbook, please be aware of the following:

- It is important to put identification on *all* your child's personal belongings (e.g., hats, thermos, mittens, swim suits and towels, boots, etc.) especially the small items.
- If your child needs to borrow clothing, please clean and return the borrowed clothing as soon as possible (2-3 days).
- If your child has physical or behavioral challenges related to toileting, please send more than one extra set of clothing.
- Notify your child's team leader, the DAP Program Coordinator or the Behavior Analyst and/or the school nurse of any unusual circumstances (e.g., allergies, change in medication, new medication, changes in behavior, etc.).
- When visiting please sign in at the reception area on arrival for security purposes.
- If you need to meet with, or talk to your child's team leader, the DAP Program Coordinator or the Behavior Analyst during program hours based on something that concerned you during your observation, you can ask the receptionist if the DAP Program Coordinator or the Behavior Analyst is available. Otherwise, please call between 8:15 and 9 a.m. or after 3 p.m. to talk to the DAP Program Coordinator or the Behavior Analyst or to schedule an appointment. For emergencies, call any time.

In anticipation of your cooperation with all these policies, we thank you.