

MISSION MOUNTAIN ENTERPRISES, INC.

SAFETY POLICIES

Revised

November 2009

TABLE OF CONTENTS

I.	Basic Safety Policy.....	pg 3
	a. Safety Policy Goals	
	b. Mandatory Reporters – Protecting Consumers from Harm	
	c. Safety Measures	
	i. Safety Inspections	
	ii. Safety Committee	
	iii. Incident Management	
	iv. Safety Training	
	d. Fire Safety	
	i. Preventing Fires	
	ii. Preparing for Fires	
	iii. Responding to a Fire	
	e. Water Safety	
	i. Swimming & Outdoor Water Safety	
	ii. Attended Bathing Policy	
	f. Animal Safety	
II.	Emergency Response Policy.....	pg 8
	a. Emergency Response Cellular System	
	b. Emergency Safety Training	
	c. First Aid Supplies	
	d. Preventing Disease Transmission	
	e. Emergency Drills	
	f. Client Supervision	
III.	Emergency Response Protocols.....	pg 11
	a. Behavior Emergency	
	b. Bomb Threats	
	c. Earth Quakes	
	d. Emergency Evacuation	
	e. Emergency Supplies	
	f. Employee Accidents & Injuries	
	g. Head Injury Protocol	
	h. Infection Control	
	i. Medical Emergency	
	j. Missing Person	
	k. Severe Weather or Poor Air Quality	
	l. Suicide Threat	
IV.	Exposure Control Plan.....	pg 17
V.	Hazard Chemicals Communication Plan.....	pg 23
VI.	Internal Incident Management Policy.....	pg 25
VII.	Medication Policy.....	pg 29
VIII.	Risk Management.....	pg 38
IX.	Transportation.....	pg 41

Safety Policy Goals

Mission Mountain Enterprises, Inc. (MME) maintains and implements a comprehensive safety program in order to promote safety for all of the individuals we serve as well as our employees and visitors. Mission Mountain Enterprises, Inc. has developed the following policies and procedures to ensure that all persons involved with the organization have a safe and healthy living and working environment.

This policy is reviewed regularly and updated as needed. Concerns or corrections should be directed through either the Mission Mountain Enterprises Safety Committee, or the MME Administrative Team.

Mandatory Reporters; Protecting Consumers from Harm

As an employee of Mission Mountain Enterprises, Inc., you are considered a **mandatory reporter**. If at any time you suspect that a consumer is being abused, neglected or exploited, it is your legal responsibility to contact Adult Protective Services and report your suspicion. The local number is (406) 883-3828. You are also expected by your employer to contact someone in the chain of command immediately in order to protect the consumer from any additional injury. You must also fill out a General Event Report on Therap; listing suspected abuse and/or neglect as soon as possible or within 24 hours, or some member of the administrative team.

Safety Measures

All employees of Mission Mountain Enterprises, Inc. are expected to be safety conscious, and report any unsafe or unhealthy practices they have noticed in the course of their work day. Information can be shared with the employee's direct supervisor, or any member of the administrative team. Maintenance needs should also be documented in each facilities maintenance log so it can be repaired quickly. Serious hazards should always be reported to the administrative offices, supervisor, or the emergency after hour cellular system immediately.

As part of our Safety Program, Mission Mountain Enterprises maintains the following systems:

- **Safety Committees:** Mission Mountain Enterprises operates a safety committee, which meet regularly and more often as directed by the Chief Executive Officer (CEO). The CEO directs the Safety Committee and selects its members. Members of the Safety Committee meet with the management team monthly to share concerns and recommendations.
- **Safety Inspections:** Each service area conducts quarterly Health and Safety Maintenance Checklists which are forwarded through their chain of command and finally to the administrative offices.
- **Incident Management Committee:** Mission Mountain Enterprises, Inc., maintains an Incident Management Committee who meets weekly to review Incident Reports. The

purpose of this committee is to review incidents, investigate incidents as needed, and recommend changes to services in response to incidents and in prevention of further incidents. Members of the Incident Management Committee include the CEO, Incident Management Coordinator, Polson Area Director, Ronan Area Director, Director of Consumer Services. Outside agencies also participate in the Incident Management Committee including but not limited to our State Developmental Disability Quality Improvement Specialist, and Opportunity Resource Inc. Case Management.

- **Safety Training:** Mission Mountain Enterprises, Inc. requires and provides initial and regularly scheduled training in: Safety Policies, 1st Aid & CPR, MANDT (non-aversive behavior management), Medication Certification, Preventing Abuse and Neglect, Infection Control, Lifting Competency, HPSPAA, Fire Safety, Safe Driving, Chemical Hazards, and Client Rights. In service areas, newly hired employees are oriented to each facilities location of exits, safety drills, alarms, location of fire extinguishers, and who to inform in the event of fire, accident or illness.

Fire Safety

In order to prevent fires and burns, and to assure evacuation during an emergency, Mission Mountain Enterprises, Inc. Administrative Team has determined the following rules:

- Smoking is allowed only in designated areas.
- Smoking in front of or around any person served by an employee is prohibited.
- Candles are prohibited in all Mission Mountain Enterprises, Inc. facilities, and are not allowed in the home of any person served unless their Individual Planning Team has determined and documented that this safety rule can be waived as they are safe with candles.
- Bedroom windows should not be blocked by furniture or any other interior or exterior barriers in order to provide emergency evacuation access.
- Smoke alarms must be present in all facilities as per specific regulations and checked monthly.
- Fire drills must be practiced monthly or quarterly as determined by the specific setting with clients participating.

Fire Response

If you discover a fire, begin evacuation procedures immediately by doing the following:

1. Activate the fire alarms and/or call 911 (group home alarms will be dispatched to 911 through our alarm system; other programs must call 911 for response from the fire department).
2. Use a verbal warning or assist others to remove all persons in the hazard area.
3. Close doors to contain the fire and protect individuals from smoke and heat, until they can be evacuated.
4. If you think you can put the fire out in 30 seconds, use a nearby fire extinguisher to put out the fire.
5. As everyone evacuates, a roll call should be performed to account for everyone in the facility. Each program area should establish a safe meeting place for roll call to be taken.

6. Administer first aid as necessary.
7. Arrange for transportation for individuals to a safe area.
8. Report incident to your chain of command or the emergency cellular system if the fire occurs after business hours.

In our group homes activation of the fire alarm system will also notify Mission Valley Security who will call the fire department. At our thrift stores and our day programs, staff must call the fire department by calling 911.



Water Safety

For all water activities:

- When planning outings that involve open water, the Program Lead or Assistant Lead must be directly notified before departure and upon return, and they will determine whether the activities planned are appropriate for the site selected.
- Staff must be currently certified in CPR and 1st Aid, taken a water safety course and/or be an experienced swimmer in order to accompany a client *into* the water.
- Staff will ensure that all individuals have proper swimming attire, water shoes, towels, sunscreen, extra dry clothing, blankets, and a life vest for each client that need one, and money for a pay phone or a cell phone.
- Staff will assure that clients apply and reapply sunscreen (SPF 40 or greater) frequently or at least every hour when individuals are in the outdoors and in water.
- Every individual that needs one, must have a properly fitting life vest on the entire time they are in the water.
- All individuals in water deeper than 2 feet must be supervised with a 1:1 ratio with staff being a maximum distance of an arms length away from the individual; and in the water with the individual.

Uncontrolled Waters

- Rivers and streams are for fishing only.
- If swimming in a lake or pond individuals and staff are to restrict in water activities to designated swimming areas only.

- Staff must be able to swim and are expected to get in the water with individuals in order for individuals to enter waters even in designated swimming areas.
- One staff should be designated as “lifeguard” and will remain on shore where he/she can survey all individuals.

In case of emergency, notify 911 and report to the appropriate MME personnel immediately.

Attended Bathing Policy

In order to prevent accidental injury involving individuals with a diagnosed seizure disorder with a bathing privacy rights restriction the following steps will be implemented while such individuals are bathing/showering.

1. A staff member must be present and within arms reach when an individual is preparing to bathe/shower. (May have your back turned or a shower curtain pulled).
2. The staff member will remain in the room within arms length of the person while they bathe or shower.
3. The staff member will leave the bathing area only once the individual has stepped out of the bathtub/shower and all the water is gone.
4. All persons served who need assistance while bathing or showering should have an individualized bathing protocol and a bathing privacy rights restriction in their program book for staff information.
- 5.

When implementing these procedures: PLEASE BE DISCREET, KEEPING IN MIND AN INDIVIDUAL'S RIGHTS TO DIGNITY & RESPECT.

Animal Safety

Mission Mountain Enterprises discourages the adoption of neighborhood animals in our group homes and other programs. Concerns include whether or not any person served or staff person in the work area is allergic to animals, or are afraid of animals. It is also important to know if any persons served have a history of being cruel to animals. No animal will be allowed if anyone is allergic, fearful, or has a history of cruelty toward animals.

Any animal coming into our facilities or encouraged to hang out because someone is leaving them food on the porch must have a record of current immunizations, and a veterinary record that the animal has been spayed or neutered. This record should be turned into our C.E.O. who reserves the right to approve or disapprove of the visitation.

At this time Mission Mountain Enterprises will not pay for veterinary costs, animal food, or any items needed for an adopted pet. Clients should also not be asked to pay for animal expenses. All expenses incurred will have to come from the employees working in the area.

If our C.E.O approves of the “visitor”, pet food must be kept away from kitchen areas or other areas where it might draw rodents or insects. No use of a litter box is allowed.

Animals hanging around facilities where these steps have not been followed may be taken to the local animal shelter.

EMERGENCY RESPONSE POLICY

In order to assure that employees and persons served are prepared to respond to emergencies Mission Mountain Enterprises, Inc. has adopted the following policies:

Emergency Cellular System

Mission Mountain Enterprises, Inc. maintains an emergency cellular telephone system for both Ronan and Polson in order to provide after hour response to emergencies. The cellular telephone is operational between 4 pm and 8 am, Monday through Thursday, and between 4 pm Friday and 8am Monday morning. The cellular telephone system will be used when the assistant manager or manager is not immediately on site to deal with a problem. The following situations could require activation of the cellular telephone system:

- Any Critical Incident as defined in our Incident Policy
- An individual has a physical altercation with another individual or staff
- Staff shortage
- Building or vehicle problems
- Community problem – trespassing or property destruction
- Any vehicle accident involving MME vehicles, or employees while working for MME.
- Any event that might jeopardize the health and safety of employees or the persons served.
- Contact with Law Enforcement.

To access the cellular telephone system call:

Polson: 261-7674

Ronan (north of Pablo): 261-6273

Ronan and Pablo: 676-2567

Employee Emergency Training

At all times, employees of Mission Mountain Enterprises, Inc. are expected to be able to respond to emergencies with every ones safety in mind, including their own. Employees are required to obtain and maintain current certification for First Aid and Cardio Pulmonary Resuscitation. Employees should also obtain and maintain MANDT certification which will help guide their actions during consumer behavior emergencies. Mission Mountain Enterprises, Inc. schedules and provides training opportunities for employees to meet training requirements. Failure to obtain and maintain current certification for 1st Aid, CPR, Medication Certification, and MANDT, could result in the employee being removed from the active schedule.

First Aid Preparedness

Mission Mountain Enterprises, Inc. maintains First Aid supplies at all its premises, and requires individuals living in their own homes to maintain simple First Aid kits. First Aid Kits should contain the following items:

- **Assorted Band-Aids**
- **Antibiotic ointment**
- **Cleansing wipes**
- **Sterile gauze bandages (4" x 4" recommended)**
- **Sterile gauze roller bandages**
- **Adhesive tape**
- **Aspirin and Tylenol**
- **Eye wash or eye wash cup**
- **Scissors, tweezers, thermometers, and any specialized supplies deemed necessary in the area.**
- **All kits should include a Blood Spill Kit, gloves, and breathing barriers.**

Blood spill kits, gloves, breathing barriers, protective goggles, face masks, and protective aprons should be requested from our administrative offices as we order in quantity and usually can fill the program areas need quickly.

Preventing Disease Transmission

As part of our infection control practices, Mission Mountain Enterprises, Inc. directs that all employees practice universal precautions when working with persons served. The following precautions are expected to be used:

1. Since you rarely know whether a person's blood or body fluids are infected, treat all blood and body fluids as if they were infected, even if you know the person.
2. When possible, avoid direct contact with blood and body fluids.
3. Use protective equipment including disposable gloves, breathing barriers, eye protection (goggles), disposable aprons, and masks as appropriate to the situation. Protective gear should be available in all facilities, and breathing barriers and gloves should be available in supported living homes kept with 1st Aid supplies.
4. Blood spill kits are kept in all locations and should be used whenever a blood spill occurs. Items contaminated by blood should be disposed of using either the red biohazard bag in the blood spill kit, or double bagged; bring the bags to your manager or the administrative offices to be disposed of.
5. Wash hands immediately after giving care with warm water and soap. Hand sanitizer can be used if soap and water are not immediately available.
6. If you suspect that you have had an exposure to disease, contact your chain of command to report the incident using a Blood/Body Fluid Exposure Incident Report.

Emergency Drills

Mission Mountain Enterprises, Inc. requires regularly scheduled evacuation drills in order for employees and individuals to practice evacuation of facilities:

Work Area	Type of Drill	Frequency
Group Homes	Fire Drills	Monthly; drills should vary in the time they occur, with each shift (am, pm, and graveyard practicing at least once each calendar quarter.
Day Programs	Fire Drills	Quarterly
Administrative offices	Fire Drill, Bomb Threats, Earthquake Drills	Quarterly
All areas	Earthquake drills	Quarterly
Day programs and Administrative Offices	Bomb Threats	Quarterly
Supported Living (off-site residential)	Fire Drills	Quarterly, practicing evacuation out all alternative exits at least annually.
Supported Employment	Safety Drills at worksite	The person served should be oriented to all new worksite safety procedures and equipment.

Drills are recorded on the programs drill record. A copy is kept on-site and the original is sent through to the administrative offices for an official of-site record.

Responsibility to Persons Served

It is expected that once you have arrived at work and assumed responsibility for designated individuals, you may not leave your work area until you are relieved by another staff person who will assume responsibility for those designated individuals. The only exception to this expectation would be if you are working with one of our consumers whose PSP team has decided the person can be home alone. Leaving individuals who need constant supervision before another staff person is present to assume responsibility is considered abandonment and will be grounds for disciplinary action up to and including termination.

EMERGENCY RESPONSE PROTOCOLS

Behavioral Emergency

Sometimes a person served may become upset and engage in physical abuse to self, aggression toward others, or property destruction. If the person served has a behavioral support plan, you should follow those guidelines. It is important to try to protect yourself and others from harm, including the person acting aggressively. The following steps are guidelines that could be used in most behavioral emergencies:

1. Get others away from the area where the person is acting out.
2. If the person is engaging in self-abuse, you may try to interrupt the behavior by offering other activities, placing a soft barrier to protect the individual from serious harm, or introducing some sort of distraction into the environment.
3. If possible, only one staff person should try to intervene with the individual. Trade off with another staff person if the individual does not respond to you.
4. **Physical restraint will not be used at any time.** Research has found that restraints cause more injuries than they prevent.
5. Call or have someone call the supervisor or someone in the chain of command. Behavioral emergencies are very scary for the individual, other consumers, and staff. The administrative team wants to know when behavioral emergencies occur and may want to send a member of the team to assist in the incident.
6. Document a GER on Therap and notify your supervisor and the Behavior Support Specialist, Walt Woyden, the same day the incident occurs, or within 24 hours.
7. Lead Trainers and/or Administrative Directors are responsible to assure the incident gets reported to those who need to know including the State Developmental Disabilities Program, Case Management, Adult Protective Services, and Guardians within the State of Montana Incident Management Policy guidelines.

Bomb Threat over the Phone

Do not transfer the call; record the time immediately; the receiver should attempt to keep the caller on the line by asking questions. **Bright yellow Bomb Threat forms should be kept near the telephone.** The form will help you ask questions that may keep the person on the line. While you are talking, have someone call 911 on another phone line to report the bomb threat. If the threat is immediate, notify co-workers to evacuate the building.

Bomb Threat in Writing

If a bomb threat is received in writing, all materials must be saved, including the envelope or container the threat was received in. Avoid any excessive handling of the material as they are evidence and will be needed for fingerprinting, handwriting, and other examination.

1. Notify law enforcement (911). Wait for law enforcement before evacuating unless the threat is immediate.
2. Notify the Chief Executive Officer.

Bomb threats must be recorded and reported on our internal Bomb Threat form. Blank forms should be located near telephones, but can also be obtained from your areas manager.

In the event of any prolonged evacuation or if there is bad weather during an evacuation, consumers and staff should be relocated to another shelter; the group home, or the day program, depending on where the threat occurred.

Earthquake

Earthquakes may be a serious threat in Lake County. Should an earthquake occur, remember the following:

1. Remain calm; staff members should take charge immediately and give instructions in firm, calm voices to reassure the nervous, helping to prevent the possibility of panic.
2. Remain where you are. During the quake under no circumstances should persons rush through or go outside the building, exposing themselves to falling debris, etc. Experience has shown that the greatest point of danger is just outside the entrances and close to the sides of buildings.
3. If indoors, take cover under desks, tables, or stand in interior doorways or in a narrow hall. Stay away from windows, light fixtures, and suspended objects. After the quake is over, evacuate the building and move personnel to a safe outdoor area until the building has been inspected and declared safe by competent personnel.

Emergency Evacuation

Should any facility that houses individuals supported by Mission Mountain Enterprises, Inc. become uninhabitable due to power outage, lack of heat, lack of water, flooding, fire or other disaster; the administrative team working with the area's manager will make arrangements to shelter individuals in an emergency location. Options include but are not limited to the following:

- Emergency shelter at one of our day programs
- Emergency shelter at a local long term care facility
- Emergency shelter at a local hotel
- Provider shelters in a different county in the state

Contact your chain of command in order to develop a plan in the event your facility needs to be evacuated.

Should a major disaster occur in our locality which would require that all individuals be relocated either to avoid a predicted event (storm, forest fire), or in response to an adverse event (earthquake, flood) Mission Mountain Enterprises, Inc. will work in cooperation with local emergency personnel to re-locate our persons served to a safe site.

Mission Mountain Enterprises, Inc. is an active member of the Lake County Emergency Planning Committee (LEPC), the Lake County Health Subcommittee, and the Tribal Emergency Response Committee (TERC). These groups work in coordination to best prepare our local residents for emergencies. As an organization we will follow their dictates should a catastrophic event occur.

Emergency Supplies

In order to be prepared for any emergency Mission Mountain Enterprises, Inc., stores items which might be unavailable in the event of a disaster.

Each group home will have stored in close proximity one month worth of non-perishable food and water supplies. Current guidelines recommend that each person have one gallon of water stored for each day for drinking and hygiene. In homes the water in hot-water tanks should be protected as part of the homes water supply should basic services be interrupted. Basic equipment needs should be considered when preparing for an adverse event; for instance if a person served in your program area needs pureed food, non-electric puree equipment should be kept on-site in the event of a power outage. Other supplies might include, but are not limited to; gas lamps or lanterns, candles, flashlights, matches, lightweight stove, cook set and utensils, battery powered radio, garbage bags, toilet paper, disposable wipes and gloves. First aid supplies including basic over the counter medications should also be included in the emergency kit.

Group homes should also prepare an evacuation kit that includes food, water and bedding for employees.

Persons served in their own homes should also prepare for emergency evacuation and prepare an emergency kit that contains:

- Non perishable food and bottled water – 96 hour (4 day) supply
- Extra clothing, personal information summary, and any other pertinent documents. Clothing and documents should be stored in plastic containers to prevent damage from smoke or water
- Personal hygiene supplies
- Keep a light source in the top of the kit (flashlight)
- Extra bedding; bedroll or sleeping bag.
- Games, puzzles, or handcrafts the person enjoys
- Any items the person feels they would need like a personal battery operated radio, candy, a special photo album, etc.

Since medications are critical, be sure to quickly include all medication supplies in each person's kit prior to evacuation. The location of emergency kits should be well known in order for quick action in the event of evacuation. Do not overload kits as they may need to be carried long distances to reach safety or shelter.

Kits might be kept in rubber-made containers with wheels, duffle bags, or back packs.

Employee Accident

If you are hurt or become suddenly ill on the job, you need to notify your supervisor or someone in your chain of command immediately. If your injury or illness occurred at work it requires you fill out an employee injury report. The employee injury report should be forwarded as soon as possible to the HR/Payroll Administrator. Please notify your supervisor and the HR/Payroll Administrator as soon as possible in order for them to be able to report the injury to our insurance company.

Failure to report to your supervisor or someone else in the chain of command, or failure to complete an injury report may result in a denial of benefits.

Head Injury Protocol

Every time a person served receives an injury to their head, they should be seen in either the local emergency room or convenient care in order to determine if a serious head injury may have occurred.

Infection Control

In order to prevent the spread of infectious diseases, it is important to recognize that germs are spread by direct contact with an infected person's blood or body fluids, through the air and water, and through contaminated food. At all times, employees of Mission Mountain Enterprises, Inc. are expected to practice Universal Precautions in order to protect themselves and others from disease transmission.

If you suspect that a person served may have an infectious disease or illness, or as an employee if you become sick with an infectious disease, it is important to limit the exposure of other individuals and co-workers.

- If a consumer is sick they should stay home in their bedroom until they can see their physician.
- If you are sick, you should stay home for the first 24 to 48 hours, especially if you are running a fever. Please call in to give your supervisor time to cover your shift.

In some instances where multiple individuals have symptoms of an infectious disease, the entire program may be closed, quarantined, or kept home in order to avoid spreading the illness to other

consumers or co-workers in other areas. The decision should be discussed with your supervisor and a member of the administrative team. The Lake County Health Department may be contacted by the administrative team to report the outbreak if they suspect a serious infectious outbreak.

Medical Emergency

A medical emergency is described as: Any individual involved in a medical emergency requiring the services of a physician, hospital, or emergency room. Employees of Mission Mountain Enterprises, Inc. are expected to be able to respond to medical emergencies by following the following guidelines: Check, Call, and Care:

1. Check the scene for safety & then check the person for life threatening emergencies.
2. Call 911 or have someone else call 911 if there is a life threatening emergency
3. Care: Provide care for the individual(s) until emergency medical service personnel arrive and take over.

If the person is ill but it is not life threatening, call your supervisor or make arrangements to get the person into their physician's office, or convenient care as soon as possible.

Missing Person

If an individual is missing from any of Mission Mountain Enterprises, Inc., programs of services for more than 20 minutes, or as dictated by their Personal Support Plan, the following procedure should be followed:

1. Alert co-workers to begin a search of the premises and surroundings.
2. Contact your supervisor and notify them of the emergency.
3. After speaking to your supervisor or someone in the chain of command, 911 may be called if the time of day, weather conditions, and/or individual skill level requires such notification.

Severe Weather or Poor Air Quality

Lake County can experience severe weather in the form of sub-zero temperatures, severe wind chills, winter storms, thunderstorms, and road closures. We are also prone to forest fires and smoke can cause dangerous air quality. A weather or air quality closure can be determined by the supervisor on duty, or a member of the administrative team. In such instances, employees should contact their supervisor, or a member of the administrative team who will determine that individuals served and employees may be safer if programs are closed. If needed, staff shall be notified via the corporation phone tree, (organizational chart), or broadcast over the air by the local radio station KERR at AM, 750; BIG at 100.7 FM; and POWER at 92.3 FM.

Weather closure will of necessity require that day program staff report to work at the group homes, and may require creative and or essential program only staffing in order to ensure

individuals are safely supported at home. MME will notify parents or guardians of individuals living at home of the closure.

Please note that in severe thunderstorm weather using the telephone, bathing or showering or hand washing dishes should be avoided to prevent the chance of electrocution.

Suicide Threat

Should any person served threaten to commit suicide, the staff person receiving or becoming aware of the threat is responsible to assure the person's safety. The following suggestions are intended to help the staff person assess the possible danger the person may pose to themselves, and offer guidance for staff action.

1. Ask the person if they have a plan, or how would they kill themselves?
2. If the person has a plan, that staff person should determine if the plan is something the person could actually do?
3. Contact your supervisor, or if they are unavailable contact someone in the chain of command.
4. Discuss with your supervisor how best to keep the person safe. Several options may be used:
 - a. You and your supervisor may decide that the person is not a serious harm to themselves but they need more supervision and support in the moment.
 - b. You and your supervisor may decide that 911 needs contacted because the person does pose a serious threat to themselves.

Anytime a person served hurts themselves, or threatens to hurt themselves it is the responsibility of the staff person who discovers the problem to assure the person's health and safety. You must never leave a person served in these circumstances until a support plan has been discussed with either your immediate supervisor or a member of the administrative team.

You are also responsible to write a General Event Report on Therap. If the incident occurs after normal business hours, report to emergency cellular system. Notification of outside agencies and others can be discussed with your supervisor or chain of command and depends upon the circumstances.

EXPOSURE CONTROL PLAN

Blood-Borne and Body Fluid Pathogens

In accordance with the Occupational Safety and Health Administration (OSHA), the following exposure control plan has been developed.

Exposure Determination:

In accordance with the OSHA standards, Mission Mountain Enterprises, Inc. has determined all employees may incur occupational exposure to blood or other potentially infectious materials while performing their job duties. Exposure determination is done without regard to protective equipment the employee would wear.

Implementation and Methodology:

OSHA requires that the Exposure Control Plan include a schedule and method for implementing the various requirements of the standard on exposure to blood borne pathogens.

Method:

Universal precautions shall be observed in all work related areas in order to prevent staff and consumers from coming in contact with blood and other potentially infectious materials.

Review:

Universal precautions were implemented as policy for all Mission Mountain Enterprises, Inc., personnel in July 1992. A review of the effectiveness and of the use of the Exposure Control Plan and Universal Precautions will be conducted at least annually, but more frequently as deemed necessary. The administrative team will conduct annual reviews of the Exposure Control Plan and Universal Precautions.

Engineering and Work Practice Controls:

Engineering and work practice controls will be utilized to reduce or eliminate the exposure of employees to infectious materials.

The following controls shall be utilized:

General Cleaning Instructions:

- Clean surfaces exposed to blood, body fluids, secretions and excretions using FIGHT-BAC RTU leaving on the surface for 5 minutes.
- All contaminated disposable items are to be considered infectious and disposed of accordingly.
- All consumers will obtain and use their own private personal disposable equipment like nail clippers, razors, brushes, etc. All personal reusable equipment will be cleaned as needed and at least weekly using FIGHT-BAC RTU (includes wheelchairs, helmets, braces, etc.).

Needles and Sharps:

- Needles are not to be bent, broken, cut, recapped, or removed from the syringe or otherwise manipulated by hand.
- Disposal of needles and sharps will be made into a rigid wall, puncture-proof container located in close proximity to the area of use. The container will be maintained in an upright position. While no direct care employees other than licensed nurses may utilize needles or sharps as part of their job duties, the policy on engineering controls for needles and sharps will be followed. Direct care staff may be present when consumers are utilizing sharps or needles, and this policy is to be followed in those circumstances. At this time, only disposable sharps and needles are utilized.

Household Items:

- Wash linens and towels in hot water with one (1) cup of bleach or color safe bleach and ¼ cup of detergent. Dry items on high in the dryer.
- Dishes washed by hand will be washed in hot, soapy water, rinsed well and left to air dry.

CPR:

- Individual face pieces shall be used
- The training mannequins shall be cleaned as specified in accordance with the manufacturer's instructions.

Lab Specimens:

- Maintain all specimens in a leak-proof container provided by the physician or lab.
- Transport the container in a plastic bag if the specimen is subject to leakage.
- Specimens are not to be stored in refrigerators, freezers, cupboards, etc., where food is also stored. Lab specimens can be kept cool by storing the container in a zip lock bag full of ice and transported to the lab as soon as possible after obtaining the specimen.
- Specimens will not be collected in any container that is not an approved collection container.

Laundry:

- Contaminated (dirty) laundry will be handled as little as possible. It will be bagged or placed in a leak-proof container, and it will be stored, and/or rinsed in the appropriate laundry area only. Consumer's personal laundry is never to be mixed or washed together.
- All employees or other persons who have contact with contaminated laundry will utilize universal precautions and wear gloves and other personal protective equipment as appropriate.

Personal Protective Equipment:**Gloves will be worn:**

- When handling blood, body fluids, secretions, excretions, mucous membranes and non-intact skin of all individuals or when performing or assisting with hygiene care such as tooth brushing, bathing, assisting with toileting, etc.
- When handling items or surfaces soiled with blood, body fluids, secretions or excretions.

- When performing invasive procedures such as suppository administration.

Gowns/plastic aprons will be worn:

- When personal clothing may be soiled with blood, body fluids, secretions or excretions.

Goggles/eye shields with solid side shields will be worn:

- If the splatter of blood, body fluids, secretions or excretions is likely.

Face masks will be worn:

- If direct or sustained contact when working with persons who are coughing or vomiting, or if Tuberculosis has not been ruled out.

Obtaining and maintaining personal protective equipment:

- Personal and protective equipment will be provided without cost to the employees. The employer shall ensure that personal protective equipment is available and worn by employees unless the employer can show that the employee declined to use the equipment (under rare circumstances) because it was the employee's judgment that in that instance its use would have prevented the delivery of care or increased the hazards.
- Lead Trainers will ensure that personal protective equipment is stocked and available to employees on site. Lead Trainers will ensure that personal protective equipment is removed and disposed of properly, prior to the employees work departure.
- In situation where no personal protective equipment was worn by an employee in a work situation that deemed its use necessary, the employee will report the instance to chain of command.

Housekeeping/Work Area restrictions and practices:

- Eating, drinking, smoking, applying cosmetics, lip balm and handling contact lenses is prohibited in work areas where there is reasonable likelihood for an incident for exposure (bedrooms, bathrooms, areas where persons served have been sick).
- Employees will perform personal hygiene tasks such as washing hands, blowing their nose, combing hair, in the appropriate facilities.
- Any other situations that can pose a risk such as spills, path obstructions, general housekeeping and cleanliness will be tended to in a timely manner.
- Items in need of repair that may pose a risk such as broken windows or loose flooring will be reported in a timely manner through the use of maintenance logs and request forms.
- Containers used to store laundry or garbage (other than paper receptacles) will be inspected and decontaminated at least weekly. All work areas will ensure the schedule for cleaning includes this task.
- All work surfaces (floors, counters, sinks, shower gurneys, etc.) that may have come in contact with blood or other body fluids will be decontaminated daily or immediately after contamination.
- Protective covering (such as aluminum foil, plastic wrap, shelf liners, etc.) will be inspected at least weekly and replaced when they become overly contaminated or at the

end of the work shift if the surface may have become contaminated since the last cleaning.

- Broken glass shall not be cleaned up with bare hands. Employees are to use a broom or hand broom and dust pan to clean up the debris. If there is a risk the plastic garbage bag will be torn, the glass will first be placed in a paper sack and then thrown into the main garbage container.
- The group homes and vocational areas are cleaned on a daily basis. The surfaces (countertops, floors, etc.) bathrooms, kitchen areas are cleaned and decontaminated on a daily basis, or immediately after they may have become contaminated.
- All equipment, storage areas, and appliances will be checked daily and decontaminated on a weekly basis. The group home night staff will assume this responsibility at the group homes.
- All procedures will be conducted in a manner that minimizes splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials. To help reduce the risk of exposure, all storage containers will have lids and will be stored out of busy work areas.

Hand washing:

- Employees must utilize universal precautions in regard to hand washing. Hand washing facilities are available to employees who may be exposed to blood or other potentially infectious materials. OSHA requires that these facilities be readily available to all employees.
- In areas where hand washing facilities are not available (vehicles), there are antiseptic towels or hand-sanitizers available. If this alternative is used, employees are to utilize proper hand washing facilities at the first available time.
- Employees are required to wash their hands, and/or any other potentially infected areas, with soap and water upon removal of personal protective equipment. If an employees skin or mucous membranes is exposed to a possible infectious substance, those areas shall be washed or flushed with water as appropriate and as soon as possible following the exposure.

Regulated Waste:

- Blood spill clean up kits will be kept and maintained at each work site, including the homes of persons served, and should be used whenever a major blood spill occurs. Blood spill kits are available through the administrative offices and contain biohazard bags that once used will be given to the area's manager for disposal. Biohazards needing disposed will be taken to the local hospitals for inclusion with their biohazards.
- Other contaminated items, including incontinence products, menses hygiene products, and soiled protective gear are to be disposed on in a plastic bag lined garbage receptacle and disposed of at the end of each shift or more often if needed in the outside dumpster.
- Employees moving garbage to the dumpster will use universal precautions when handling this material.

Hepatitis B Vaccine:

- All employees who have been identified as having occupational exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine (HBV) at no cost to the employee. The vaccine will be offered after the employee has received orientation and within 10 working days of his/her initial assignment to work involving occupational exposure to blood and other potentially infectious materials.
- If the employee wishes to have the HBV series, they must contact the Human Resource Director. Employees who decline the HBV will sign a waiver which will be kept in their personnel records. If an employee declines the vaccine, but chooses at a later date to receive the vaccination series, he/she can do so at no cost to the employee.

Mantoux Tuberculin Skin Test:

- All employees must have the TB tine test administered within four weeks of hire date. Results will be kept in the employee's personnel records. If an employee tests positive for exposure to tuberculosis, the Human Resource Director will coordinate medical follow-up that ensures no active disease is occurring. Subsequent follow-ups will be directed by a physician. No employee with active tuberculosis may work with the persons served unless deemed safe by their physician.

Post Exposure and Follow-up:

When an employee has an exposure incident, they must report it to their manager. All Lead Trainers are required to report exposure incident to the Chief Executive Officer and the Director of Consumer Services. The Human Resource (HR) Department will maintain records of exposure incidents. All employees who incur an occupational exposure incident will be offered post exposure evaluation and follow up.

The follow up will include:

- Documentation of the route of the exposure and all circumstances related to the incident
- Post exposure examination, prophylaxis, test counseling and evaluation will be conducted by an independent health care professional at no cost to the employee.
- Following employee evaluation and follow up of the exposure incident, Mission Mountain Enterprises, Inc. will require a statement from the independent health care professional stating the employee has been informed of the evaluation results, and any medical conditions resulting from the exposure that will require further follow up.
- The records of employee exposure and follow up will be maintained by the HR department the durations of the persons' employment plus 30 years.

Training:

Training for all employees will be conducted prior to the initial assignment of tasks where occupational exposure may occur. Methods for reporting an exposure incident and the medical follow up will be made available. Training records will be kept in the employees HR file.

Record Keeping:

A record for each employee will be kept in their personnel file and maintained by the HR department. Medical records for employees with occupational exposure will be:

- Kept confidential
- Not be disclosed or reported without the employee's written consent to any person in or outside of the workplace.
- Be maintained for the duration of the person's employment plus 30 years.

Review:

Reviews of all aspects of the Exposure Control Plan will be conducted at least annually and during any exposure incident evaluation and follow-up. Annual reviews may be conducted regarding the availability and feasibility of more advanced engineering controls. More frequent reviews will occur if deemed necessary.

HAZARDOUS CHEMICAL COMMUNICATION PLAN

It is the intention of Mission Mountain Enterprises, Inc. (MME), to protect its employees and to comply with State safety requirements for Hazard Communication/Employee Right-to-Know. To accomplish this Mission Mountain Enterprises will;

- Establish a written program of compliance (this document).
- List all known hazardous chemicals to which employees might be exposed in their work environment.
- Compile and make available Material Safety Data Sheets (MSDS) on these chemicals.
- Insure adequate labeling of primary and secondary chemical containers.
- Provide training of employees to the requirements of this program.
- Coordinate all activities involving contractors where our employees or the contractor's employees may face potential exposure to one another's potentially hazardous materials, and to ensure information and MSDS are provided to all exposed personnel.

Supervisory personnel are responsible for insuring that all primary containers of materials received are labeled to identify container contents. Supervisors are also responsible for insuring that any secondary containers, other than for immediate and single use, are properly labeled to indicate the contents and the appropriate hazard warnings.

Employees using a chemical are responsible for advising their supervisor when a container is not labeled. The supervisor shall verify the container contents and be responsible for its markings or disposal.

ALL chemicals are to be used ONLY in the manner prescribed by the manufacturer and with the precautions described on primary container labels and on (MSDS). Employee compliance with this program is a condition of employment. Failure to comply is grounds for disciplinary action which may include discharge.

Management will arrange for prior contact with all contractors to exchange information regarding potentially hazardous materials and appropriate MSDS.

A copy of this program, the current list of chemicals, and a copy of each MSDS shall be placed and maintained at a location or locations where it is readily available to all employees who may be exposed to the potentially hazardous materials or chemicals.

Hazard Communication Training

Training, using this program, MSDS and any other methods selected by management, will be presented to ALL current employees and to new employees upon hiring. Training need cover only those hazardous materials an employee is potentially exposed to. This training is to include:

- The location and availability of the Hazard Communication Program.
- Chemicals present in workplace operations.
- Physical and health effects of chemicals present.

- How to determine that chemical exposure has occurred.
- How to prevent, reduce and control exposure through good work practices and the use of personal protective equipment
- How to read an MSDS.
- Emergency safety procedures following a chemical exposure.

All employees will receive training in, but not limited to, all areas specified in the Hazard Communication Plan and education outline. Employee education and training will occur at the time of employment; and within 30 days of the addition of any new chemical in the work place.

INTERNAL INCIDENT MANAGEMENT POLICY

General Incident Reporting Procedures

It is the policy of Mission Mountain Enterprises, Inc. to document all reportable and critical incidents as defined by the Montana DDP Incident Management Policy, Appendix A, immediately following the alleged incident. This entails filling out an incident report and notifying the employee's supervisor, the Director of Consumer Services, the Chief Executive Officer and the Incident Management Committee immediately after the alleged incident occurs. MME will also insure that the individual's Case Manager (CM) and the Regional Quality Improvement Specialist receive a copy of the Incident Report Form within two (2) working days on the occurrence of the incident.

All incidents identified as Reportable under the Montana DDP Incident Management Policy will be reviewed and assessed by the MME Incident Management Committee. The Incident Management Committee will monitor any trends indicated by the reports and, if necessary, develop a corrective action plan to address these trends.

Any incident deemed to be a Critical Incident as defined by Montana DDP Incident Management Policy, Appendix A, will be reported within eight (8) hours of the occurrence to the CM, QIS, and the individual's guardian by the MME Incident Management Coordinator, the CEO or another member of the MME Incident Management committee. MME will also submit a copy of the critical incident report to the CM, QIS and Director of DDP within three (3) working days. Any allegations or suspicions of abuse, sexual abuse, neglect or exploitation will be made verbally or in writing to Adult Protective Services as soon as possible. In addition, some allegations may be considered to be of such severity that the County Attorney will be notified.

As a part of its internal operating policies and procedures, Mission Mountain Enterprises, Inc. guarantees the following assurances:

- Retaliatory action is prohibited against the reporting personnel by Mission Mountain Enterprises, Inc., an employee, and/or other persons affiliated with the organization;
- Disciplinary actions in accordance to the Corporation's policy will be taken against any person who is found guilty of retaliation against the reporter;
- Employees must report accurate information and participate in the incident management process as required; disciplinary actions in accordance to the Corporation's policies will be taken against an employee if he/she refuses to cooperate with an investigation;
- Any employee alleged to be implicated in a critical incident involving abuse, neglect, mistreatment and/or exploitation will be immediately reassigned to another area of the Corporation or suspended with pay pending the result of the incident investigation.
- Any person who is found to have committed abuse, neglect, mistreatment,

Identification and Reporting of Incidents

- All Reportable and Critical Incidents must have either the DPHHS/DDP Incident Report (IR) Form completed or a General Event Report (GER) completed on Therap.
- The IR must be initiated immediately and no later than the end of the shift when the incident has been identified.
- Mission Mountain Enterprises, Inc. must notify the individual's Case Manager (CM) of all Reportable Incidents within two (2) working days by submitting a copy of the IR form to the individual's TCM or generating and General Event Report on Therap.
- Mission Mountain Enterprises, Inc. is required to routinely notify the QIS of Reportable Incidents within two (2) working days by submitting a copy of the IR form or generating a General Event Report on Therap.
- The IR Form documenting these events is to be made available as requested to other DD Service Providers supporting the individual (e.g., the residential provider when the incident is reported by the work or day provider), the Quality Improvement Specialist, other PSP members, and/or parents, family members, advocates, guardians with proper releases and in proper format to ensure confidentiality of all parties, as requested.

Management of Critical Incidents

- All Critical Incidents, as defined by this policy and by statute or regulation, require notification to authorities external to the organization. This notification is to occur verbally and/or in writing (through the IR or GER) and generally on an immediate basis as defined.
- The individual's Case Manager must be notified of Critical Incidents including deaths, suicide attempts, unaccounted for absences, emergency hospitalization, and law enforcement involvement, by Mission Mountain Enterprises, Inc. immediately and no later than eight (8) hours from the time the incident is identified. For the purposes of this requirement, notification can mean contact with the person via phone or in person, e-mail, voice mail message, pager, or fax. Proper documentation of method of notification must be completed on the IR Form or GER (see the "Notification Grid" section of the IR Form).

- The Regional Quality Improvement Specialist must receive verbal notification of Critical Incidents that involve allegations of client-to-client abuse causing physical injury, client-to-client abuse causing mental injury and client-to-client sexual abuse as soon as possible.
- The Regional Quality Improvement Specialist and individual's Advocate must receive verbal notification of Critical Incidents including deaths, suicide attempts, unaccounted for absences, emergency hospitalizations, and law enforcement involvement from Mission Mountain Enterprises, Inc. within 24 hours of the incident being identified.
- Verbal notification of Critical Incidents within 24 hours should be made available to other Individual Plan/Individualized Treatment Plan members and/or parents, family members, advocates, guardians, with proper releases, if they have requested that this occur.
- The individual's Guardian must receive notification of Critical Incidents including deaths, suicide attempts, unaccounted for absences, emergency hospitalizations, and law enforcement involvement from Mission Mountain Enterprises, Inc. as soon as possible and no later than eight (8) hours after the incident is identified. For the purposes of this requirement, notification can mean contact with the person via phone or in person, email, voice mail message, pager, or fax. Proper documentation of method of notification must be completed on the IR or GER Form (see the "Notification Grid" section of the IR Form).
- Mission Mountain Enterprises, Inc. must assure that policies and procedures for the agency's Incident Management System reflect protocols supporting the conduct of competent investigations when Critical Incidents have been identified.
- Mission Mountain Enterprises will generally be expected to initiate and conduct a critical incident investigation when a Critical Incident has been reported. There will be exceptional circumstances arising that require the Critical Incident Investigation be conducted by an entity external to the organization. Examples of these circumstances include, but are not limited to:
 1. Incidents involving possible infractions of criminal law and the law enforcement/criminal investigation takes precedence;
 2. Incidents involving allegations against a Service Provider's Executive Staff and/or member(s) of the Board of Directors; and/or
 3. Other circumstances that due to the nature and/or sensitivity of the allegation require that an investigator not affiliated with the organization conduct the investigation.

In these circumstances Mission Mountain Enterprises, Inc. should ensure when notifying the Department of Public Health and Human Services, Developmental Disabilities Program, Adult Protective Services, Child Protective Services, and/or law

enforcement that these concerns are communicated so proper guidance and decisions can be made for all parties regarding initiation of the investigation.

- The Critical Incident Investigation Final Report (CIIFR) will be documented in the format provided by the Department of Public Health and Human Services/Developmental Disabilities Program. A copy of the completed IR Form is to be included with the final report.
- The Critical Incident Investigation is to be completed no later than five (5) working days after reporting the incident.
- At the conclusion of the investigation, a copy of the CIIFR is to be forwarded to the following:
 1. Chief Executive Officer of Mission Mountain Enterprises, Inc. that initiated the investigation, who will forward the report to the Agency's Board of Directors;
 2. Other Executive Staff, as appropriate, of Mission Mountain Enterprises, Inc. that initiated the investigation; or
- As requested, the CIIFR is to be made available to the parties listed below:
 1. DPHHS/DDP Executive Staff including: Director of the Developmental Disabilities Program, the Community Services Bureau Chief, Regional Manager of the Region in which the incident occurred, Quality Improvement Specialist; and
 2. As appropriate, designated legal staff for the Department, and other agencies as required by law or regulation for Critical Incidents.
- Mission Mountain Enterprises, Inc. must also assure that the individual or their guardian, and the individual's Targeted Case Manager are notified of the outcome of the investigation by providing written documentation of the findings.

MEDICATIONS POLICY

Mission Mountain Enterprises, Inc. provides health services in order to assure that consumer's health needs are being met. Lead Trainers and direct care staff perform a number of activities that include but are not limited to: assuring that consumers have an annual physical and or other visits with health care professionals as determined by their primary physician, individual planning team, and current health status. As part of their regular duties, employees are expected to assist consumers with the self-administration of their medications. Employees must be aware and knowledgeable about what medications consumers take; what the purpose of the medication is, and what possible side effects might be monitored for. Lead Trainers are responsible for assuring that physician orders, physical therapy orders, occupational recommendations, speech and swallow recommendations, dietary recommendations, individual planning team directives and any other health and safety issues are followed, documented, and monitored.

Mission Mountain Enterprises, Inc. Scope of Practice

- ❖ Scope of Practice for Med Certified Employees:
 - Medication Assistance
 - Administration of oral medications
 - Topical medications
 - Eye, ear, and nose drops
 - Nebulizers
 - Inhalers
 - Suppositories
 - Assisting clients to test their own blood sugar
 - Medical Case Management
 - Over-site of annual requirements
 - Request and coordination for referrals
 - Communication and advocacy with the medical world
 - Scheduling, transporting and accompanying clients to medical appointments
 - Personal Care
 - Special diets
 - Hygiene
 - Range of Motion
 - Adaptive Equipment; Wheelchairs, walkers, prone standers
 - Ostomy bag changes

- ❖ Care needs **not** within Med Certified employees scope of practice (currently):
 - Invasive procedures; shots, blood sugar checks, IV
 - Peg Tube feedings or medication administration VIA peg tube
 - Urinary catheters
 - Ostomy replacement & care
 - C-Pap Machines

Medications Certification

According to the Administrative Rules of the State of Montana, any person assisting in the administration of medications must be certified by the Developmental Disabilities Program. To be certified an employee must demonstrate knowledge of seizure disorders, the use and side effects of medications, and achieve a score of at least 90% on the exam.

*Please note, because of this State Law, all residential and vocational job descriptions will reflect the medication certification requirement.

To become certified Mission Mountain Enterprises, Inc. provides a copy of the state “Managing Medications”, a self study manual and offers a monthly class for medication test review.

- All new or regular staff that needs to become med certified will be required to attend the medication review class given just before the pretest.
- All new or regular staff will be required to pass the pretest with a 90% before going on to take the state test.
- Should an employee pass the pretest but fail the state test, they must repeat the medication review class and pass the pre-test again in order to sit for the state test.
- All new staff whose position requires med certification must successfully complete their med certification prior to their 6 month probationary period. If they are unable to become med certified within the 6 month probationary period, they will be placed on the On-call list.
- All regular staff must re-certify before their 2 year certification lapses. If they have taken the test prior to their certification lapse, and failed to re-certify, they will be given a grace period of 30 days to re-test. If after the 30 day grace period the employee is still not med certified, they will be placed on the On-call list.
- It is preferred to have on-call staff become med certified but it is not required. On-call staff will receive a pay increase upon completion of med certification.

Individual Medication Plan (Self-Administration)

Administrative Rules state: An individual medication plan must be prepared which describes a program to train the individual to self-administer his/her medications. The individual medication plan must be clearly and precisely written and follow Administrative Rules as minimum components of Individual Plans. Self-administration of medications can be defined to include: locating and identifying the medications container, opening the container, taking the prescribed dosage, taking the dosage as per the schedule, closing the container, and marking that the medications were taken.

Administration of Medication

- No prescription or over-the-counter (OTC) medication is administered to an individual without a written order of a physician. Any prescription ordered by a physician will be administered only according to the dosage and schedule that he/she recommends.
- All medications will be recorded on a Medication Administration Record (MAR), unless the persons PSP team has determined that the person is totally independent with medication taking. The MAR must include: The individual consumers name, any allergies they have, name and purpose of medication, dosage amount, date and time taken, and the staff person who assisted with the medication.
- Any change in dosage or schedule or any medication discontinuation will be done only on the advice of a physician and will be documented on the Medication Administration Record on the day of the change. All changes to medication will also be noted in the master log and daily log that travels between sites (where applicable).
- Any OTC medication use which is used for more than three days in a row shall be reviewed by a physician. All OTC medication shall be documented in the consumer record in the same manner that prescription drugs are documented using the MAR.
- Med-certified staff is expected to know what side effects might be experienced with any medication taken, and so drug information sheets should be made available to all direct care staff working with the consumer.
- Wound care that requires physician prescribed medication must be administered by med-certified staff that have had specific training by a health care professional to do so

Storage of Medications

- In facilities operated by Mission Mountain Enterprises, Inc., all prescription and non-prescription medications will be kept in a locked storage area including refrigerated medications.
- In client homes, medication storage will be determined by factors including, environmental, security, and access concerns. If it is determined that an individuals medications should be kept locked up in their home, then a rights restriction must be written and approved by the person and their Individual Planning team.
- All Controlled Substances (narcotics) must be kept in a double locked container in addition to other security measures and usage must be additionally recorded on a drug count sheet. When there are controlled substances in any facility, a count will be conducted at each shift change with two employees verifying and signing for the accurate count of narcotics present.
- Medications will be kept in the original containers at all times.
- Medications shall be kept free from contaminants at all times.
- Utensils used in administration shall be properly cleansed after each use.

Disposal of Medications

- Those medications no longer required by an individual or those which have passed the printed expiration date will be returned to the pharmacy. This action will be witnessed by two staff and recorded on a drug disposition record.
- When the physician advises discontinuation of medications they will be removed immediately from the individual's supply and returned to the pharmacy for disposal.
- Narcotic medications that are no longer needed will be taken to the pharmacy for disposal with the narcotic count sheet which will be signed off by the pharmacy. The drug disposal sheet and narcotic count sheet will then be kept with the MAR for that month in which the drug was discontinued.
- Drug disposal sheets and narcotic count sheets will be kept with the MAR for the timeframe they were used.

Medication Errors

- The person who discovers a medication error is responsible for assuring the consumers safety. This requires that a health professional is contacted for their guidance in what safety measures need taken. The pharmacist is the most readily available health professional who can be contacted for advice, but a physician or a registered nurse may also be contacted.
- The poison control number (1-800-525-5042) should be contacted if a consumer ingests any hazardous substance.
- If a pill is found (on the floor, in a bed, or anywhere), it should not be given to the consumer as we do not know when the pill was lost or missed. However, the pill should be identified and an incident report needs to be completed and submitted.
- All medication errors require an Incident Report or a General Event Report on Therap. Medication incident reports are submitted to the areas Lead Trainer, Area Director, or Director of Consumer Services and a medication incident investigation report is initiated and completed by the areas Lead Trainer.
- If an employee is responsible for two or more medication errors in one month, they will be removed from medication responsibility until the manager can complete a new medication practicum with the employee to assure safe practices are being followed.

New or Changed Medication Protocol

Consumers shall be accompanied by a staff person who knows the individual well when going to a physician's office. Staff needs to know the individual's medical problems, primary diagnosis, any allergies to foods or medications, and what the current reasons for the visit are.

When a new medication is prescribed, or a current medication is changed the staff must obtain the following information from the physician and/or pharmacist:

- The name and purpose of the medication
- The dosage form, amount and frequency
- How long the medication is to be taken
- Whether or not the medication can be taken with meals
- Any special storage instructions
- What the possible side effects are
- Any drug interactions that might occur
- If there is any special monitoring or when the consumer should return to the physician for monitoring.

Staff assisting the consumer to the physician's office is responsible for obtaining the medication from the pharmacy, recording the new or changed medication on the MAR, and communicating to other staff and the manager the changes.

At the follow up visit, staff must be prepared to describe the changes in the signs and symptoms presented by the individual including any side-effects or any problems with the mode of administration of the medication.

When a medication is discontinued, documentation shall be as follows:

Draw a line from the last dose given to the end of the month; highlight in yellow, write DC (discontinued) where the line starts (the day the medication is to be discontinued), write a note in the communication log book for the facility or consumer, and give a verbal message to the manager or assistant manager. If the medication being discontinued is given more than once a day, follow this procedure for all doses.

When a medication is ordered with a short duration:

Staff shall add the start and stop dates on the MAR for any new medication with a short duration and block in front of the start date and after the stop date.

Safety Rules:

In order to prevent accidental ingestion of medications, employees reporting to work who have personal medications with them, must make sure that those medications are secured away from any area where a person served might find them and take them. This includes prescription and over the counter medications.

PRN Medications Protocol

The ability to use PRN medications often means timely treatment for our consumers. However, using these medications requires knowledge and guidelines. Each medication used requires a written protocol with clear guidelines regarding the use of that medication.

Over the Counter PRN Medications

- Over-the-counter (OTC) medications are those that can be purchased without a prescription from a doctor. These include such things as vitamins, ibuprofen, aspirin, antihistamines, etc. as well as herbal remedies and other homeopathic products.
- All OTC medications for individuals in DD services must have a physician's written order or approval for their use, as well as guardian consent if applicable, except in the event of an emergency. These medications must be reviewed and approved by the physician on an annual basis.

It is necessary to have an order for OTC products because:

- It is illegal to use OTC products without a physician's order for anyone but yourself or a dependent.
- There may be harmful interactions between OTC medications and any prescribed medications being taken by an individual.
- Primary care physicians are usually aware of any allergies or other health concerns of the individual which would rule out the use of certain OTC products.
- Each OTC medication must have a protocol for its use. This protocol should include specific directions for use as well as contain the following:
 1. The **name of the individual** receiving the medication.
 2. The **name of the PRN medication** including both generic and trade names to avoid confusion.
 3. Under what **conditions** that medication is used such as physical or behavioral indicators. For example, an antihistamine may be used for an allergy if the person has a runny nose, itchy eyes, etc. These should be specific and individualized.
 4. The **route** of administration of the medication: orally, topically, rectally, etc.
 5. The **amount** of medication that is to be given: two tablets, one applicator, three drops, etc.
 6. **How often** the medication can be given. This includes:
 - a. the maximum dosage that can be given within a 24 hour period. (example, "do not exceed 6 tablets in 24 hours")

- b. the minimum amount of time allowed between dosages.
(example, “do not take more than 2 capsules every 4 hours”)
- 7. The **length of time** the medication can be used or under what conditions and time frame the medication may be used before the nurse or physician should be notified.
Examples:
 - a. “Notify physician if med is taken more than three days in a row.”
 - b. “If rash does not clear in 5 days, notify physician.”
 - c. “If nausea and vomiting persist for more than two days notify physician.”

The physician will need to individualize these requirements.

- 8. Any **specific instructions** or warnings that may accompany a medication such as “Do not crush”, “Do not give with a specific medication”, or “Must be taken with food”.
- 9. Potential **side effects** that can occur when taking the medication. These include both physical and behavioral indicators.
- 10. **Documentation** of all medications that are given must occur on the Medication Administration Record (MAR). The information required includes:
 - a. Name of medication
 - b. Time and Date of administration
 - c. Dosage taken by the individual
 - d. Reason for administering the medication
 - e. Staff initials
 - f. In some cases, documenting the results that occurred once the medication was given is also needed.
- 11. **Incident reports** must be written and submitted per Incident Management Policy regarding prn medications.

Prescription PRN Medications

These medications can only be obtained through the prescribing physician.

When PRN medications which cannot be purchased over the counter are prescribed, the individual’s PSP team must be notified. They can then address any concerns regarding the medication. Although the team cannot override a physician’s order, they may decide to seek a second opinion regarding the use of that medication. At no time should any staff working with an individual request a PRN medication from a doctor except in an emergency situation. Concerns regarding the need for a certain medication should first be brought to the individual’s PSP team with documentation as to the reason for requesting the medication. This includes all PRN medications including those for sleep, pain, allergies, seizures, etc. but is especially important when there are concerns regarding the use of psychotropic medications.

The use of PRN medications is warranted for many different conditions. However, the use of PRN medications for “behavioral” purposes is highly discouraged. This would include reasons such as “agitation”, “aggression”, “compulsivity”, “property destruction”, “hyperactivity”, etc. At no time should any one person be advocating for the use of such medications without the express written consensus of an individual’s PSP team. This would be considered a chemical restraint and would require an approved right’s restriction.

PRN medication protocols for the use of psychotropic medications must have an objective written into the individual’s PSP.

The PRN medication protocol must be written by the individual’s PSP team and submitted to the Regional DDP office for review and approval by the Quality Improvement Specialist. After approval, staff training must occur to ensure that anyone assisting with the PRN order has demonstrated competency to do so. The staff must also be certified to assist/supervise with medication administration.

General rules regarding the use of psychotropic medications:

PRN psychotropic medications are **never to be used for the convenience of staff** caring for an individual, but must have clear and objective guidelines for use.

PRN medications are **never to be used in place of behavioral support strategies.**

PRN medications are **never to be used as punishment.**

The PRN protocol must contain the following:

1. The **name** of the individual receiving the medication.
2. The **name of the PRN medication**, including both generic and trade name to avoid confusion.
3. The **dosage** of the PRN.
4. The **route of administration**: orally, IM, etc.
5. Potential **side effects** of the medication that need to be monitored.
6. **Signs of overdose**, specifically physical signs and symptoms to look for that may indicate an overdose. The emergency procedure if an overdose is suspected.
7. The **maximum dosage** the individual may have per occurrence.
8. The **minimum amount of time** allowed between dosages.

9. The **maximum dosage or maximum number of times** the individual may take the medication **in a 24 hour period**.
10. The **maximum number of times** the individual may receive the PRN in a **designated number of days before the individual's physician** should be notified.
11. The **maximum number of times** the individual may receive a PRN medication in a **designated number of days before the individual's PSP** team should meet to address the issue. This may differ from when the physician should be notified.
12. The **rationale** or reason for the use of the PRN medication. This needs to be thoroughly explained in writing and would include:
 - a. Antecedents: what may act as a trigger for the behavior.
 - b. Precursor behaviors: physical signs, which could include behavioral indicators of pain.
 - c. Target behaviors: must be defined in observable and measurable terms.
 - d. What steps or supports will be implemented to avoid the use of the PRN medication, if applicable.
13. The **initiation date** for the PRN protocol.
14. Who needs to be notified immediately if a PRN medication is administered, if applicable. Does approval need to be obtained prior to administering the PRN medication?
15. Data-recording system, including incident reports.
 - a. How often the data will be shared with the individual's physician.
 - b. How often the data will be shared with the individual's PSP team.

RISK MANAGEMENT – CONSUMER SUPPORT

Risk versus Choice

Mission Mountain Enterprises, Inc. (M.M.E.) has been supporting adults with developmental disabilities in the community for many years. Over the years we have provided services to individuals which have allowed them to lead full lives that include making decisions about their lives. We have and continue to expect that our agency personnel support the person's right to make decisions and choices in their lives.

Mission Mountain Enterprises, Inc. believes that the right to make decisions about your life, or self-determination, is a basic human right. All individuals receiving services from Mission Mountain Enterprises, Inc. have a right to self-determination including the right to refuse or accept services. Rights must be balanced by responsibility, and confer an obligation to act in a responsible manner. Depending upon the person's capacity to understand short and long term consequences resulting from their choices, they will need more or less guidance and help with decision making.

Mission Mountain Enterprises, Inc. believes that with every choice there is an inherent risk. Some choices result in acceptable risk, while other choices can pose significant risk for the person served. There are some choices a person in services might make that Mission Mountain Enterprises, Inc. considers to create an unacceptable risk for the person served. These choices include but are not limited to:

- Choosing to live in an unsafe place
- Choosing to reside in filth
- Choosing to smell bad
- Inflicting harm on oneself or others
- Refusing to take medications or prescribed treatments for life threatening conditions
- Refusing medical attention for a serious and treatable health problem
- Engaging in dangerous, antisocial, or criminal behaviors that could jeopardize their freedom
- Refusing help and support for any needs that contribute to self neglect

The Individual's PSP team, including the person served, their family members where involved, guardian and or advocate, the case manager, and the agency(s) providing services will need to determine if choices the person is making create an unacceptable risk in the person's life. In order to determine whether a person's choice is creating an unacceptable risk the team must consider the potential short and long term consequences associated with the choice. Could the outcome result in exploitation, abuse, self neglect, illness or injury, extreme isolation, involvement with law enforcement, substandard living conditions, serious financial difficulties or death? Many times when a person is made aware of the risks inherent in their choice, they may change their mind.

The more skills and abilities the individual does have, the less risk there may be with many decisions they want to make. When the team is considering the skills and abilities of the individual, factors that should be considered include, but are not limited to:

- The persons ability to understand the pros and cons of their decisions
- Does the person have the income to support their decision?
- Does the person know when to quit what they are doing if the risk appears to be getting too great?
- Does the person have appropriate safety skills?
- Does the person know how and when to ask for help?
- Does the person respond appropriately to an emergency created by their decision?
- Are there reasonable safeguards in place to protect the person's rights?
- Can the person sufficiently assert or advocate for themselves?
- Are there friends, neighbors, family, or guardian who can help support them?

M.M.E. recognizes that each individual served has unique abilities and challenges. In order for the individual in services to live in the community they rely on many formal and informal sources of support. Regulatory authorities expect that if the person is in services, the agency has accepted the responsibility of assuring that the individual's basic health and safety needs are met.

All employees of M.M.E. are expected to report any unsafe behaviors or life choices the person is practicing to the persons planning team, including the person's case manager, the service area manger(s), a member of the M.M.E. Administrative Team, the persons guardian, family and or advocates as soon as possible.

One way M.M.E. documents and communicates concerns about a person served is with an incident report. Incident reports are completed if the person is self neglecting themselves, aggressive toward others, self abusing, experiences a serious behavior problem, requires emergency medical or mental health treatment, is involved with law enforcement, is suspected of being mistreated by staff, is injured, is involved with a medication error, is admitted to a hospital, is missing, or threatens to harm themselves. The Incident Management Committee (IMC) comprised of agency personnel, Case Management and our Montana Developmental Disabilities Program Quality Improvement Specialist meets weekly to review all incident reports. There they review individual incident reports as well as incident trends. Based upon review and in some instances formal investigation of an incident, the IMC makes recommendations to prevent future incidents. The IMC may determine that the individuals planning team needs to meet to discuss concerns flagged by incident reports and trends.

If the person and their Individual Planning Team come to satisfactory resolution of the concerns, these should be documented as part of a special planning meeting and communicated to all who need to know. If the person and their planning team cannot come to a satisfactory resolution and the person continues with the unacceptable risk in

spite of the efforts to resolve the concern, alternative plans may have to be considered such as guardianship, payee, and conservator; rights restrictions, suspension from services, involuntary committal or discharge.

MISSION MOUNTAIN ENTERPRISES, INC.

TRANSPORTATION POLICIES

The safety of our staff, the people we serve, and other vehicle operators are the top priorities of our corporate vehicle safety program.

These policies are intended to address safety issues relating to the transportation of passengers.

All of our drivers need to think of themselves as professional drivers in that they are responsible for the lives of the individuals that they are transporting, as well as the vehicle that they are operating. Professional drivers in a hazardous situation must make quick, effective decisions, often having little to draw on except their own experience. The decisions to be made in a critical (sometimes life and death) situation are often too important to be left to one person; therefore policies are developed by management with full benefit of expert advice. If the transportation program has clearly stated policies, the driver will be more likely to make the right decisions when faced with an emergency.

VEHICLE SAFETY RULES:

Only employees approved to drive Mission Mountain Enterprises, Inc. vehicles will be allowed to drive company vehicles. This approval revolves around an employee's past driving record and/or age and past driving experience. No one on the on call list may drive a MME vehicle without getting permission from the Chief Executive Officer for that person to drive.

In order to transport individuals in your private car, or use it for work errands, you must provide and maintain current proof of liability insurance to our payroll administrator and maintain your vehicle in a safe operating status. You should never transport Mission Mountain Enterprises consumers in a vehicle you know to be unsafe, i.e. bald tires, bad brakes, no safety lights, no seatbelts/shoulder belts, etc.

The following equipment shall be carried in each of MME's vehicles:

- First Aid Kit
- Fire Extinguisher
- Flares or reflective hazard markers (for large wheel chair equipped vans)

The maximum number of people riding in each vehicle will be determined by the number of seat belts available. All staff and individuals in the vehicle shall wear a seat belt, and it is the driver's responsibility to visually check that all passengers are buckled properly before moving the vehicle.

All vehicles will be checked on a weekly basis to ensure that tires are properly inflated, all fluids are at appropriate levels, and that all vehicle equipment is in proper working order. Staff is responsible for reviewing the condition of a vehicle prior to each trPSP. When going out of town staff need to always carry one of the corporate cellular phones, so that if there is an accident or mechanical failure when on a trPSP staff can contact MME and/or the emergency services.

Staff should never be talking on cellular telephones or be consuming any food or beverages while driving our vehicles. No passengers on the vehicles can consume food or beverages at anytime while on the vehicle.

Any time that one of our large wheel chair equipped vehicle is being backed up a ground guide must be used.

Correct or report all unsafe conditions immediately to your supervisor or administration.

Report all accidents and get first aid promptly for all injuries.

Use, adjust and repair equipment only when authorized.

Maintain good housekeeping within the vehicle and work area.

DRIVING SAFETY GUIDELINES:

Be familiar with and obey all traffic rules.

Conduct vehicle pre-trPSP inspections

Report all vehicle malfunctions.

The average time between the time that you become aware of a danger and move your foot to the brake in preparation to stop is $\frac{3}{4}$ of a second, so always be very vigilant when driving.

Never drive and speak on a cellular phone.

Never consume any food or drinks while driving.

Reaction distance is the distance that the vehicle travels between the times that the driver sees danger and move his/her foot to the brake in preparation to stop. (At 30mph the reaction distance is 30 feet.)

Stopping distance (on dry pavement) in feet equals three times the vehicles speed (20 mph x 3 = 60 feet stopping distance).

Know or anticipate hazardous locations:

- a) Blind alleys or intersections
- b) Low overhangs (tree branches, entrances to hospitals, bank drive-thrus, etc.)

Be alert and keep your mind on the task at hand – driving!

Keep your eyes moving when driving – 95% of the driving cues come through the eyes. Keep your eyes moving right, left, and especially ahead. When driving always look as far ahead as you can possibly see for potentially hazardous situations.

Use slow and gradual starts and stops, keeping in mind that your cargo is human and can be easily injured.

Avoid false starts. Every false start is either an accident or an embarrassment for a professional driver. Take every precaution before putting the vehicle in motion.

- A). Scan mirrors
- b). Check doors
- c). Observe passengers
- d). Check for pedestrians, other vehicles and objects around the vehicle.

Never move a vehicle with the doors open and never open the door until the vehicle is completely stopped.

Be aware of railroad crossings. It takes the average train only 22 seconds to clear the crossing whether you are on it or not.

Red lights and stop signs do not stop people; therefore, be prepared for the other driver to run the red light or stop sign.

The green light does not mean go: rather it is an invitation to proceed when the way is clear.

When driving, reduce your speed when conditions related to weather, light, road traffic, vehicle and, most of all, driver conditions change.

Be ready for the unexpected by taking your foot off the accelerator when preparing to stop or leave the traveled section of the road.

Never use the lift on an uneven place as this can damage the lift.

The best headlights will illuminate the road ahead for 350 feet. Keep your headlights clean, and don't forget to wash the taillights.

Turn on the headlights when it is raining.

Do not drive with parking lights, but use them only when the vehicle is parked near the road.

Driving faster than the posted speed limit at night means that you are overdriving your headlights.

When you are passing other traffic be sure to check your speed as you may be driving over the speed limit, driving too fast for conditions.

If you are driving and getting passed you may be driving under the speed limit.

Always allow appropriate distances between you and the vehicle in front or in back of you. Remember that you should remain two seconds behind the vehicle in front of you.

When changing lanes always check blind spots, and check both the right and left mirrors before changing lanes or turning.

When waiting to make a left or right turn, keep your wheels straight, and start your turn when the way is clear.

If the vehicle ahead of you is signaling for a right or left turn, do not attempt to notify the driver behind you by giving the same signal. Your brake lights are a sufficient signal. Do not give signals except for your own maneuvers.

Drive in the center of your lane, except when being passed or meeting oncoming vehicles. In this situation drive closer to the right edge of the highway.

EMERGENCY AND EVACUATION PROCEDURES

The safety of passengers and drivers is the primary concern Mission Mountain Enterprises, Inc. These policies are intended to address safety issues and emergency procedures relating to the transportation of passengers.

A driver must be prepared to provide evacuation assistance to the people that we serve. When an emergency occurs passengers will be looking to you for direction. Always remain **CALM** when an emergency arises. The driver of the vehicle is responsible for directing passengers and passer-bys in giving assistance. Once emergency personnel and the police arrive on the scene then they are responsible for the controlling the scene. When these people arrive you will be responsible for your passengers and the vehicle.

Medical Emergency Procedures

In the event of an emergency requiring medical attention to a passenger that might result in the need for emergency medical services on a bus the following procedures shall be used:

1. Stop the vehicle in a safe area and turn on the hazard lights.
2. Contact your supervisor or the next person in your chain of command by cellular phone and state the nature of the emergency and your location. Call 911 directly and immediately if the incident requires medical/law enforcement assistance. If there is a problem with the cellular phone, flag down another motorist and have them contact 911.
3. Attend to the needs of the passenger.
4. Wait for emergency medical services or assisting agencies before moving the vehicle.

Accidents

Unfortunately accidents can happen at anytime during the course of your employment with our corporation. These accidents may be a result of something that you have done, a mechanical failure, or something that someone else has done. Accidents can cause injuries, property damage, and possible death. In case of any accident remember that your primary responsibility is to your passenger.

Some rules to remember if your vehicle is involved in an accident are represented by the work “**KNOW**”.

K = Keep all passengers on the vehicle calm. It is safe for the passengers to remain on the vehicle if there is no other immediate danger.

N= Notify the authorities, and always call for help. If you have a cellular telephone, two-way radio, or other communication device on you or your vehicle please refer to your emergency procedures that are on your vehicle and contact the appropriate people. If you do not have access to a communication device then use a nearby telephone or that of a passerby.

O= Off the road. If you break down, try to position the vehicle completely off the road and away from other dangers. If it is not possible then cautiously remove all of your passengers to a safe location.

W=Warning devices. Use flares or warning flags to warn other motorists of your position on the road.

Accident Procedures

If you have an accident, follow the emergency procedures that are found on the visor of the vehicle that you are driving. These procedures apply to both a vehicle related and scene- related incident. The following should serve as a guide.

Vehicle-Related Procedures:

A. Assess the Situation: You should do the following:

1. Stop the vehicle in as safe a place as possible.
2. Set the parking brake and turn on the emergency flashers
3. Remain calm, assess the situation, plan your actions, and reassure the passengers.

B. Be Alert for Fire: If a fire is present or might erupt, evacuate the passengers, Extinguish the fire, if possible. In determining the potential for fire, check for the following:

1. Ruptured fuel tank or fuel lines.
2. Hot tires, which may catch fire.
3. Presence of smoke
4. Possible electrical fire or sparks.

C. Be Alert for Hazardous Materials: Check for and identify and possible hazardous materials that present or may present a danger to you and our passengers. Evacuate the passengers if a danger exists from the following materials:

1. Chemicals
2. Vapors
3. Other Toxic Substances.

D. Assess the Passengers. Check for injuries to passengers. Keep the passengers on the vehicle unless conditions such as the possibility of fire or other dangers warrant their removal. This is the easiest way to account for passengers.

2. Accident Scene Procedures:

Once you have taken the above precautions your next steps should be to assess the accident scene.

A. Notify Authorities. Contact 911 for emergency medical and law enforcement assistance. Notify the next person in your chain of command. Continue to make calls until you reach a live person. Do not consider a message left on someone's cellular phone or an answering machine as having made an appropriate contact with a supervisor. In most cases you should not leave the vehicle unattended to go for help unless the vehicle is empty. If you have no way to contact proper authorities then ask that a passerby contact emergency services.

You should use the “**Three W’s** when communicating:

- **Who:** Vehicle number, number of passengers and types of vehicles involved.
- **Where:** The location of the vehicles or directions to the scene.
- **What:** What kind of help are need and the nature of the problems.

B. Protect the Scene: Protect the passengers and the vehicle from further accidents and injuries by placing warning devices to warn other drivers, evacuating the vehicle, or both. Protect the scene from traffic and people so that evidence is not destroyed. Under normal circumstances, the vehicle (s) involved should not be moved until advised by law enforcement officials.

C. Cooperate with the Accident Investigation: Staff should at all times cooperate with law enforcement officials when they are conducting an investigation of the incident. You should discuss the facts of the accident only with those officially concerned with the accident, which would be any medical or law enforcement personnel.

D. Keep passengers at the Scene: Staff should keep any witnesses who are capable of substantiating the events that transpired when the accident occurred at the scene of the accident. For safety’s sake keep passengers on the vehicle unless the situation requires emergency evacuation.

E. Accident Scene Reporting Requirements: The vehicle driver shall collect and record data essential to the preparation of required reports. The driver should document damage, weather, visibility and road conditions. Staff should fill out the MME accident report form to turn it into the immediate supervisor within 24 hours of the accident. The following information should be gathered at the accident scene:

1. Date, time, and place of accident.
2. Other vehicle’s information (driver’s name, license number, and name of insurance company)
3. Injured persons
4. Damage to property
5. Description of accident
6. Witnesses
7. List of all passenger on the vehicle
8. Weather condition
9. Visibility
10. Road condition

All accident information is confidential and shall only be shared with the appropriate management team members, law enforcement, emergency medical personnel, and the insurance company.

Mechanical Failure or Breakdown

In the event of a mechanical breakdown, know what to do, how to do it, and when it should be done. Make a decision whether passengers need to be evacuated. Assure them that everything will be all right. The following is a suggested procedure:

1. Stop the vehicle as far to the right side of the road as possible or on the shoulder of the road.
2. Keep the passengers on the vehicle. However if the location of the vehicle is unsafe remove the passengers to a safer location. Never use the lift to unload people on uneven ground.
3. Activate hazard warning lights and place warning devices on the highway.
4. Contact someone your immediate supervisor or someone else in your chain of command, pager, and/or the maintenance person.
5. Ensure that all passengers are safely delivered to their destinations.
6. Your supervisor or other person in your chain of command will assist you with securing an alternative vehicle.

Evacuating the Bus

In certain accident and emergency situations you may need to evacuate the passengers from the van.

Usually, passengers remain on the vehicle during an emergency. If there is a fire, a spill of hazardous materials, or the vehicle is in a dangerous position then the vehicle should be evacuated immediately.

Fire or Danger of Fire

Stop the vehicle and evacuate it immediately if the engine or any portion of the bus is on fire. An existing fire near the vehicle or the presence of gasoline or other combustible material is considered as a danger of fire. Evacuate passengers closest to the danger first. Tell passengers to move a distance of 100 feet or more from the vehicle and the fire until you have determined that no danger remains.

Presence of Hazardous Materials

If any hazardous materials are present in or near the vehicle, evacuate the passengers. This includes vapors or fumes, which may enter the vehicle from outside sources and may be dangerous to the passengers.

Unsafe Position:

In the event that the vehicle is stopped due to an accident, mechanical failure, road conditions, human failure, medical emergency, determine immediately whether it is safe for the passengers to remain in the vehicle or to evacuate. You must evacuate when:

- The final stopping point of the vehicle is in the path of any train or adjacent to any railroad tracks.
- The position of the vehicle might change and increase the danger present to the passengers. For example, evacuate if a vehicle come to rest near a body of water or cliff where it could still move and go into the water or over a cliff.
- The location of the vehicle creates the danger of a collision. In normal traffic conditions, the vehicle should be visible for a distance of 300 feet or more. A position over a hill or around a curve where you cannot see over the hill or around the corner does not exist should be considered a reason for evacuation.

Employee Safety Training

Mission Mountain Enterprises has a comprehensive training program for its employees. Employees who drive MME vehicles will have completed the following training:

- First Aid and CPR
- MANDT (non-aversive behavior management program)
- Preventing Abuse and Neglect
- Infection Control
- Lifting Competency
- Fire Safety
- Chemical Hazards
- Annual Defensive Driving Techniques
- Wheelchair lift and securing wheelchairs on vans
- Proper operation techniques for wheelchair lifts
- One week of driver observation of a senior trained staff driver
- Passenger sensitivity training.

All of this training except for the observation of a senior trained staff driver occurs annually.

