

SERVICES HANDBOOK

DECEMBER 2009

**Mission Mountain Enterprises, Inc.
330 Main Street SW
Ronan, MT 59864
406-676-2563 Fax 406-676-2569**

MISSION MOUNTAIN ENTERPRISES, INC. **SERVICES HANDBOOK**

Welcome to Mission Mountain Enterprises, Inc.

You have just taken a very important step in your life, and we at Mission Mountain Enterprises, Inc. are happy to offer you support in any way we can.

This book will provide you with information about our different programs. We will go over this information with you when you begin attending our program, and we will go over it at least once a year for as long as you are with us. Please talk to one of the Community Support Professionals if you have any questions. You will have the opportunity throughout the year to express your opinion about the services you are receiving, and about how we can change our program to better meet your needs.

MISSION MOUNTAIN ENTERPRISES, INC. PROGRAMS

Mission Mountain Enterprises is a community based program that provides residential and work supports to people who have developmental, physical and mental disabilities. We provide each person in our program with the support they will need to help them be successful in the choices they make, both in where they choose to live and in the type of work they choose to do. We are a private, non profit corporation that receives funding through state and federal sources and are under contract with the Developmental Disabilities Program

RESIDENTIAL SERVICES

A. GROUP HOMES

Mission Mountain Enterprises has four group homes, two in Polson and two in Ronan. These homes are licensed by the State of Montana. The Polson homes are:

Orchard View Group Home - 115 13th Ave. West, Polson, MT. 59860

9th Ave. Group Home - 408 9th Ave. West, Polson, MT. 59860

The two Ronan homes are:

Mission View Group Home - 415 1st Ave. East, Ronan, MT. 58964

Benjamin Street Group Home - 805 Benjamin Street, Ronan, MT. 59864

The 9th Ave home has six people living there. The other three homes have eight residents. The homes are open seven days a week, twenty four hours a day. If you live in one of these homes, the Community Support Professionals who work there will provide assistance to you for tasks such as bathing, cooking, cleaning your rooms and other types of activities, and they will also assist you on outings and other recreational activities. You will be expected to follow the rules of the house and to help out with the chores. The State Developmental Disabilities Program provides some of the money to run these group homes. The rest of the money comes from your SSI and SSA income. The goal of the group homes is to prepare you to live as independently as possible.

B. OFF-SITE RESIDENTIAL

The Off-Site Residential Program is for people who choose to live in their own homes or apartments, either by themselves or with a roommate. The Community Support Professional Leads will offer you support in your search to find a home, and the Community Support Professional who works with you will provide the supports you will need to acquire the skills necessary to live on your own, such as managing your checkbook and paying bills, cooking, shopping and housecleaning. They will also assist you in planning outings, such as going to movies or sporting events in the town you live in, or to places like Missoula and Kalispell. Your Community Support Professional will assist you in applying for benefits like Social Security, housing assistance and energy assistance. You will be expected to take care of your home by doing the chores, such as housecleaning, washing the dishes, and doing your laundry. Your Community Support Professional will provide you with whatever assistance you need to enable you to succeed.

COMMUNITY INTEGRATION

Mission Mountain Enterprises, Inc. will support you in your efforts to become more involved in community life. We will assist you in your efforts to participate

in a variety of community life experiences that interest you. These recreational and leisure activities could include:

Bowling;
Sporting events;
Religious activities;
Cultural activities;
Self-advocacy activities, e.g. People First;
Educational activities;
Volunteer activities;
Community government;
Vocational projects.

We will try to provide you with opportunities to meet friends and acquaintances who can participate with you in the activities you enjoy, while assisting you in exercising your rights and responsibilities as a member of your local community. If you would like more information about People First, contact Summit Independent Living Center at their office at 207 Main St. SW Suite C., Ronan, MT 59864, (406)676-0190. For information about other organizations, talk to your Case Manager or facility manager.

VOCATIONAL SERVICES

Mission Mountain Enterprises, Inc. provides several types of work services for people, so that they will have a choice in the kinds of work they would like to do. We have jobs in our Activity Centers or thrift stores, and we have jobs at local businesses, such as restaurants or stores, as well as janitorial crews. At each type of job, there will be Community Support Professionals or Job Coaches to provide you with the training needed to acquire the skills you will need to succeed at the job you have chosen.

ACTIVITY/WORK CENTERS

Mission Mountain Enterprises, Inc. has two activity/work centers. These are:

Ronan Activity Center (RAC) - 219 Main Street S.W., Ronan MT. 59864
Polson Work Activity Center (PWAC) - 4 - 7th Ave. East, Polson MT. 59860

The goal of the activity centers is to provide you with the opportunity to engage in

activities of your choice that will improve the quality of your life. These activities can be recreational, social or vocational. Each of these work centers has a variety of jobs available, such as working on contracts for local businesses folding newsletters, pricing and sorting used books and clothing for sale in our stores, or other outside projects as they become available. How much you will be paid for your work at some of the jobs will be determined by time studies that meet the requirements set by Department of Labor (D.O.L.) Regulations. Our work activity centers operate under a waiver from the D.O.L. Some of the jobs are paid according to piece rate; for example, folding newsletters. This means that you will be paid according to the amount of items you produce or package. Other jobs are paid at an hourly rate based on Department of Labor Standards. An example of the forms used to determine the rate of pay (90-10's) is included in the Appendix of this handbook. If you get a job in the community or supported employment and you lose that job within 60 days after starting it, you will be able to return to a job in one of the Activity Centers or Thrift Stores.

COMMUNITY BASED EMPLOYMENT

A. SUPPORTED EMPLOYMENT

The Supported Employment Program is designed to assist you in finding a job in the local community. The Vocational Coordinator will contact local businesses to try to match you with the type of work you would like to do. The Job Coach will provide you with the supports you will need to acquire the skills needed for that particular job. When you have learned the job well enough to do it on your own, the Job Coach will gradually fade from the work site. There is not a set time period for how long the Job Coach will work with you. This will be determined by how long it takes you to learn to do your job independently. The Job Coach will be available to come back and give you further training if you need it in the future.

Janitorial crews as well as enclaves are part of the Supported Employment Program. The janitorial crews clean several local businesses. If for any reason you lose your job in the community, you will be able to return to one of the work activity centers until you are able to find employment in the community again.

B. VOCATIONAL REHABILITATION SERVICES

Mission Mountain Enterprises, Inc. is currently under contract with the Department of Vocational Rehabilitation to provide job training and supervision to people who

qualify for this service. Unlike the Supported Employment Program, the Job Coach will only provide you with assistance and supervision for at least three months or until you are able to do your job independently. People who participate in the Vocational Rehabilitation Program are required to provide their own transportation to and from the work site.

The goal of Vocational Rehabilitation is to place you in a job that you will be able to do completely independently with no further assistance from the Job Coach. The Job Coach will provide assistance in filling out applications, preparing you for job interviews, and explaining the benefit of this program to potential employers. They will work with you on your job site until you are comfortable enough to do the job independently. The Vocational Rehabilitation Program provides the following types of employment services:

1. **Job Development** - Our Employment Development Specialist will discuss with you what types of jobs you would be interested in. Once the type of job and employer is identified, the Employment Development Specialist will contact the employers. Our staff is in contact with the local Job Service to see what types of jobs are available in the community, and what types may become available in the future. They will develop an on-the-job evaluation if you are interested in or are able to do a specific job.
2. **On the Job Evaluation** - The Employment Development Specialist will work with you and the employer to develop a work site where you can get the opportunity to actually work for an employer to see if you like the job and are able to succeed at it. You would be given a set amount of hours to work at this business and would be paid for doing the job.
3. **Transitional Employment Service** - The Employment Development Specialist would work with you to review and teach job seeking skills, such as preparing a resume, doing practice interviews, and organizing a job search. They would also assist you with other aspects of the job search, such as having good grooming and hygiene, problem solving, and providing transportation when no other source is available, and when this is directly related to getting and keeping a job. They will also work with other professionals and coordinate services on your behalf when it could affect keeping your job.

ORGANIZATIONAL EMPLOYMENT

THRIFT STORES

Mission Mountain Enterprises operates two thrift stores:

Nifty Thrifty – 712 1st St. East, Polson, MT. 59860

Twice But Nice – 229 Main St. SW, Ronan, MT. 59864

The work at the thrift stores involves sorting, steaming, washing and drying donated clothing, pricing and hanging clothing, waiting on customers and keeping the store area clean. You will be paid according to the standards set by the Department of Labor.

BECOMING A REGULAR EMPLOYEE OF MISSION MOUNTAIN ENTERPRISES, INC.

Any person receiving services through Mission Mountain Enterprises, Inc. may apply for a permanent position with the corporation if they meet the requirements of the position that is open. Some of these positions may require a driver's license or a G.E.D., and some positions may require other special education or experience. However, there will also be positions with no special requirements.

People in our services who wish to apply for a job that they are qualified for will need to fill out an application and submit it to the office within the time required. If you meet the qualifications, you will be given an interview by the supervisor and manager of the area that covers this job. The person best suited to the job and meet the requirements for the position that they are applying for.

Mission Mountain Enterprises, Inc. is an Equal Opportunity Employer and does not discriminate in the recruitment or hiring process. All people are encouraged to apply regardless of race, sex, age, color, religious beliefs, national origins, political beliefs, disability or sexual orientation.

TRANSPORTATION SERVICES

Mission Mountain Enterprises, Inc. will provide transportation to the Work Activity Centers in Ronan and Polson or community job sites, if you live in one of

the group homes or one of the Off-Site Residential apartments. We will also provide transportation to you if you live in your own family home in the community. We provide this service through a contract with the Developmental Disabilities Program for people who are part of our program. We will also provide transportation to medical appointments, shopping and recreational events. Transportation to recreational activities will be determined by the availability of company vehicles.

OTHER SUPPORTS

Mission Mountain Enterprises, Inc. also will provide to you, to a very minimum extent, the following services when needed or requested:

1. Counseling - discussing problems with you and directing you to finding solutions to your problems.
2. Individual Advocacy - We will make the attempt to pair you with a member of the community to serve as a friend and an advocate.
3. Information and Referral - We will provide you with specific information on various concerns expressed by you or your family. We will also refer you to more appropriate agencies for services if this is needed, such as counseling, resource libraries, preventive services, etc.

It should be noted that Mission Mountain Enterprises, Inc. does not specifically contract to provide any of these services, but merely provides assistance to you or your family to coordinate these services on a short term basis.

Mission Mountain Enterprises, Inc. has only limited educational materials within the agency. If you or your family is interested in obtaining more educational information, please feel free to contact the TRIC\PLUK library at: 516 N 32nd St., Billings, MT. 59101-6003, (406) 255-0540.

CASE MANAGEMENT SERVICES

Case Management Services are provided by Opportunity Resources, Inc., an agency that is not a part of Mission Mountain Enterprises, Inc. Their job is to determine if you are eligible for our program and, if you are eligible, to assist you

in entering our services. Once in our program, the Case Manager will be responsible for setting up your annual PERSONAL SUPPORT PLANS meeting, facilitating your annual plan meeting, referring you to other services if you need them, and working with the staff at Mission Mountain Enterprises, Inc. to insure that your needs are met.

ADMISSION - DISCHARGE POLICY

Mission Mountain Enterprises, Inc. provides services to individuals with a disability who are sixteen years of age or older and are determined to be eligible for our program. All applicants will receive equal consideration for entrance into the program without regard to disability, race, religious beliefs, color, sex, marital status, national origin or sexual orientation. The age requirement is mandated by our contract with the State of Montana. Eligibility for Vocational Rehabilitation Services are determined by your Vocational Rehabilitation Counselor, who then purchases services for you from Mission Mountain Enterprises, Inc.

1. ENTRY INTO SERVICES

A. DEVELOPMENTAL DISABILITY PROGRAM

Mission Mountain Enterprises, Inc. (M.M.E.) contracts with the State of Montana Department of Public Health and Human Services to provide residential, vocational and transportation services. Our contract with the state has limits to the number of people we can serve. Any person who meets the requirements and who requests one or more services from M.M.E. through the State Developmental Disabilities Program is placed on a waiting list for services. When an opening occurs, people whose names are on the waiting list are reviewed by the Screening Committee.

The Screening Committee consists of the following individuals:

1. Case Management

2. Developmental Disabilities Quality Insurance Specialist
3. Chief Executive Officer or Director of Consumer Services

The Committee meets on a regular basis, or when there is an opening. The person selected to fill the vacancy is chosen based on need, namely, the person most in need of a place in the program and who is compatible with the services being offered is generally the one chosen. Your Case Manager can answer any questions you may have about the screening process.

To be eligible for services with Mission Mountain Enterprises, Inc., you must:

- a. Be at least 16 years of age, unless some special case develops where no other services are available, and funding is authorized by the local school district, or some other alternate funding source.
- b. You must be referred by your Case Manager or a Department of Health and Human Services Representative. The person who refers you must complete all the necessary forms.
- c. Third party sponsorship is required, but self pay arrangements are considered.
- d. You or your family must also provide the following items;
 - Vaccination Records;
 - Medical Records;
 - A list of all current medications that you are taking (If you are taking any medications, you must be able to demonstrate that you can take your medications independently. You will need to pass a 30 day medication program to show that you can do this independently.)
 - Proof of Citizenship.

Health Services

Being in services means that you will need to have a primary doctor and at least annually have a full physical and dental check up. If you are in our residential services, Mission Mountain Enterprises, Inc. will support you with your medical needs. We will provide transportation and accompany you to your doctors' appointments. We will help make sure that your immunizations are current, and that any other medical orders are followed and documented. If you live at home with your family, we will work with you to make sure you are meeting the service requirements of getting an annual physical and dental check up. We will need a list of your current medications, immunizations, and ongoing information about your medical and health requirements in order to assure your health and safety while in our services. We will ask your doctor for standing orders that will allow us to help you with taking over the counter medications for minor ailments. Our employees must obtain and maintain State Medication Certification, which allows them to assist you and teach you to be safe taking your medications. If you are taking prescribed medications, we will help you watch for side effects as well as to see if the medication is working for you. We will help you get needed follow up visits to your physician, or any specialists you may need to see.

Once you have been accepted into the program, you will participate in an evaluation to determine your strengths and areas where you need additional support. During your initial thirty day PERSONAL SUPPORT PLAN meeting, which will be scheduled by your Case Manager, this assessment will be discussed between yourself and the rest of the team, to determine what training would work the best for you, and to establish your personal goals for the coming year. At this time, you will help decide who will be responsible for assisting you in achieving these goals. Some of the people who are likely to attend this meeting are: your Case Manager; M.M.E. residential and vocational staff, Director of Staff Development and the Director of Consumer Services; other professionals such as physical therapists and psychologists; family members; your advocate and you. You have the right to choose who will attend your meeting.

Your Case Manager will meet with you before the meeting to explain what will take place and to help you prepare for it. You will be asked what training you would like to see take place, and what other personal goals you would like to accomplish. A schedule will be set up for your training, and your progress will be reviewed on a regular basis. A new I.P. meeting will be held every year. You have the right to request a new I.P. meeting whenever you feel that one is needed.

B. VOCATIONAL REHABILITATION SERVICES

Vocational Rehabilitation Services are normally sponsored by a State of Montana Rehabilitation Counselor. Other sponsors of these services may be your insurance carrier or a Workers' Compensation agent. It is also possible to self-fund these services. For information about state sponsored rehabilitation services, you may contact the Kalispell office at **(406) 751 - 5940**.

2. **HIPAA (Health Insurance Portability & Accountability Act)**

Any written or verbal information about you is kept strictly confidential in compliance with the current HIPAA regulations. The only people who will be able to get information about you from M.M.E. are professional people who work with you, such as doctors, social workers, psychologists, physical therapists, etc. This information will be released to these people only with your written permission. You may allow other people to look at your records, but this is your decision alone. Any attempt to obtain information from your files will be written down and kept on a Disclosure Form that will be kept in your Master file.

In some cases, some information about you may need to be shared without your permission. Some things that always need to be reported are:

- Contagious diseases;
- Problems with medicine;
- Information that may be required by the police or when it is ordered by the courts;
- Information the government requires to see how our program is working;
- Information to a provider or insurance company who needs to know if you are enrolled in our program;
- Work related injuries that need to be reported to Workers' compensation;
- Birth, death and immunization records;
- Information needed by the Federal Government to protect our national security.

You have the right to look at any records we keep about you. You may look at your file at any time by making arrangements with your manager or the Director of Consumer Services. If there is something in your file that you want changed, you

or your guardian can make this request in writing. Upon entering services, you will be given a copy of the HIPAA Notice of Privacy Practices to sign. A copy of this will be kept in your master file.

3. **EXIT FROM SERVICES**

You may exit the program for any of the following conditions and reasons:

- a. Poor attendance to the program, which indicates a lack of interest on your part to be involved in the program.
- b. A lack of cooperation on your part or the part of your family that keeps you from making progress in meeting your goals.
- c. When you have graduated from the program and no longer need or want services.
- d. When you choose to leave the program for any reason.
- e. When you have been exited from the program according to the Developmental Disabilities Policy #481 because of a behavior problem.
- f. When your Vocational Rehabilitation Counselor decides that it is no longer likely that you will be able to obtain gainful employment.

When you exit the program, our staff will counsel you and your family about other services that are available, and about potential problems you may encounter in the future. Mission Mountain Enterprises, Inc. does not provide follow-along services to people who have left our program. If you leave on a voluntary basis, it will be explained to you that you will have to re-apply through the Screening Committee or your Vocational Rehabilitation Counselor in order to return to the program. At the time you leave the program, you will sign a statement agreeing that you are leaving the program voluntarily, and that you understand that you will have to go through the screening process again to be readmitted into services with M.M.E. Developmental Disabilities Services' clients have a 30 day period after exiting to reenter services without going through the screening process again.

4. **DISCHARGE SUMMARY**

If services to you are terminated for any reason, the following information is documented in the Discharge Summary:

- a. A brief summary of progress or significant events that occurred during the period of services to you.
- b. Specific recommendations for future planning.
- c. A statement as to the appropriateness of termination of services by program staff, if the termination is contrary to their recommendation.
- d. The information will be entered into your record within seven calendar days after termination of services.
- e. The discharge summary will be sent to an agency that provides services to you only when you or your guardian gives your consent.

HOW TO MAKE A FORMAL COMPLAINT

Whenever you have a problem with the services you receive from M.M.E., you can file a grievance. You or a person you appoint to represent you may start the grievance procedure. This representative could be a parent, guardian or an advocate who will act on your behalf. If you do file a complaint, no one will retaliate against you for filing it. Retaliation is a violation of M.M.E. policies.

1. **PROCEDURES**

- a. The grievance will begin with you or your representative stating verbally or in writing what this grievance is about to the staff person who is involved in the particular area of concern. You and the staff person will work together to resolve the problem.

- b. If you and the staff person cannot resolve the grievance to your satisfaction, you may then file a written or verbal grievance with that staff person's immediate supervisor. This supervisor will have five (5) work days to respond either in writing or verbally to you or your representative. A copy of the grievance form is included at the end of this handbook.
- c. If you are not satisfied with the response you receive from the supervisor, you may then file a written or verbal appeal to the Chief Executive Officer. The reasons for the appeal will be documented by the Chief Executive Officer. He will have five (5) work days to respond either verbally or in writing to you or your representative.
- d. If, for any reason, you are not satisfied with the way your appeal turned out, you may request a Fair Hearing from the Department of Public Health and Human Services. If an appeal is filed, all records of any proceedings will be sent to the Department's Fair Hearing Officer.

2. **NOTIFICATION**

- a. The Grievance Procedure will be explained to you, your family, or your guardian when you enter the program.
- b. The Grievance Procedure will be reviewed with you at least once a year.

3. **ASSISTANCE**

If you or your representative needs assistance following the Grievance Procedure, you can request assistance from your Case Manager.

4. **RECORD KEEPING**

M.M.E. will keep all written records of each grievance throughout the grievance process. All grievance records will be kept in a separate file in the main office.

LEGAL REPRESENTATION

Any time that you, your family, or your advocate has concerns about legal problems, you can contact one of the following for legal advice:

- a. **Disability Rights Montana at 316 N. Park, Helena, MT. 59601, or call 444-3889, 1-800-245-4743 9TD/TTY)**
- b. **The Montana Legal Services Association. This organization provides legal services to low income people. Their address is: Montana Legal Services Association, 304 N. Higgins, Missoula, MT. 59802 or call 543-8343.**
- c. **You can hire your own attorney.**

YOUR RIGHTS ARE AFFIRMED

The Department of Public Health and Human Services and other organizations having contracts with the Division of Developmental Disabilities Program, recognizes that you have the same rights as any other citizen of the State of Montana and the United States of America. Along with these rights come certain responsibilities. The following are some of your basic rights and responsibilities. (These rights have been adapted from “**The MANDT SYSTEM**” 2004 Trainers Manual)

- **You have the right to make decisions about things that affect your life. You have the responsibility to live with the decisions you make, even if you make a mistake. Every one makes mistakes.**

- You have the right to complain to the right people if you feel that your rights have been violated, or if you don't agree with a decision that has been made that affects you. **You have the responsibility to be honest with people and tell them what you really want.**
- You have the right to get what you need (food, clothing, shelter, medical care, etc.) to have the best life you can have. **You have the responsibility take care of the things you get, to take care of your health, to take your medications as prescribed by your doctor, etc.**
- You have the right to be safe from being hurt. This includes the right to not be hit, slapped, kicked or pushed, etc., as well as the right not to be yelled at or made fun of. It includes the right not to be emotionally, physically or sexually abused. **You have the responsibility not to hurt other people.**
- You have the right to say whatever you want, as long as it does not hurt other people or make fun of them. It means that when you say something, other people cannot punish you for what you say. **You have the responsibility not to say things that threaten other people or hurt their feelings or make them feel small.**
- You have the right to go to the church, synagogue or mosque of your choice. You also have the right to not go to church. **You have the responsibility to allow other people to have religious beliefs that may be different than your own.**
- You have the right to vote if you meet the state and federal guidelines for the state or city you are living in. **You have the responsibility to be aware of the people who want you to vote for them, what they stand for, and what they are saying they will do if they are elected.**
- You have the right to have relationships with people of your choice, and the right to have privacy when doing things with your friends. **You have the responsibility to stand up for yourself and not allow other people to take advantage of you.**
- You have the right to go to schools of your choice or to learn new things. **You have the responsibility to participate in the school or activity you**

choose, and to follow the same rules and guidelines as the other students.

- You have the right to work in the job of your choice. **You have the responsibility to do your best at the job you choose.**
- You have the right to have your own things, such as televisions, furniture, clothing, etc. No one has the right to take your personal items away from you. **You have the responsibility to allow other people to have their own things and not to take things away from other people.**

RESTRICTION OF RIGHTS

All rights and privileges that you have while in services with Mission Mountain Enterprises, Inc. will not be withheld unless due process is followed in accordance with state rule or rule of law.

VIOLATION OF YOUR RIGHTS

You will not be neglected, abused, harassed, or exploited while you are in our services. This is strictly prohibited by company policy.

DOCUMENTATION AND REPORTING OF ALLEGED VIOLATIONS

Any person who observes or is involved in an alleged violation of your rights, which may involve neglect, abuse or exploitation, is required to report the incident. They must report the incident immediately to the Department of Family Services (DFS) (Phone # - 883-3828) within 24 hours. Any evidence of the alleged abuse should be saved and presented to the investigating representative from DFS and Mission Mountain Enterprises, Inc. If possible, pictures should be taken of any alleged bruises or other marks that would show that physical abuse has occurred. The incident reporting rule must be followed in all cases. You do not need to inform any co-worker, staff person, supervisor or any other person who may be involved in the incident that a report is being written or that DFS has been contacted.

SANCTIONS

Any employee alleged to have taken part in a violation of your rights may be suspended, pending results of the investigation. At any time allegations are proven against an employee of M.M.E., disciplinary action will be taken as defined in the M.M.E. Policies and Procedures Manual.

ENSURING YOUR CIVIL RIGHTS

It is recognized by M.M.E. that you have the same rights as all citizens, it is further recognized that it is an important and ongoing objective:

- a. To ensure that the rights of all people with disabilities are exercised, affirmed and protected in all aspects of their daily lives.
- b. To ensure that the rights of an individual are not limited without due process.
- c. To ensure that services are not denied or treatments withheld solely on the basis of the severity of a person's disability.

At least once a year, you will receive an oral and written summary of your rights and a description of how to exercise them. Based on assessments, you will be provided with support or training to enable you to exercise your rights and responsibilities as a citizen to the highest level of your ability. You will also be provided with training in recognizing and respecting the rights of others.

ZERO TOLERANCE FOR VIOLENCE POLICY

M.M.E. does not tolerate violence against any person at any or our homes, work centers or in the community. Violence can include, but is not limited to:

- Hitting
- Kicking
- Biting

- Pinching
- Pushing
- Spitting
- Assaults with a weapon or object
- Verbal threats
- Name calling
- Threatening phone calls
- Yelling
- Making false accusations against staff or other individuals
- Damaging property

Any claim of violence against a staff or another individual will be investigated by the M.M.E. Incident Management Committee and, if the investigation substantiates that an act of violence did occur, certain restrictions may be placed on the person(s) responsible. These restrictions will be in accordance with policies approved by the Division of Developmental Disabilities, the individual's IP team and M.M.E.'s Policies and Procedures Manual.

If you are threatened in your house or apartment by a stranger, family member or other member of the community, you or the staff person working with you should call 911 so that law enforcement can provide protection to you and remove the threatening person from the premises.

APPENDIX A: RESIDENTIAL RULES AND GUIDELINES

1. GROUP HOMES - ORIENTATION PROCEDURE

When you are accepted into one of our group homes, the following things will occur on the day you move in:

1. You will be shown your room and given a bed, dresser and closet space for your personal use.
2. After you are settled in, the house rules will be reviewed with you.

3. You will be informed of the Grievance Procedure.
4. Your rights will be reviewed with you as designated by State Policy.
5. The following M.M.E. Services will be explained to you:
 - a. Transportation
 - b. Room and board.
 - c. The I.P. process and the training you will receive based on your I.P. goals.
 - d. Recreational opportunities.
 - e. Medical care.
 - f. The hours that the group home operates (24 hours a day, seven days a week.)

HOUSE RULES

The following rules have been created to promote a safe and happy environment for the people who live there:

1. Quiet hours will be as follows:
Sunday - Thursday.....10:30 p.m. to 6:15 a.m.
Friday and Saturday.....12:30 a.m. to 7:00 a.m.
2. Let the staff at the home know where you will be going if you leave the home.
3. You will be expected to help out with the chores to the best of your ability. These chores can include, but are not limited to:
 - a. Keeping your room clean and orderly.
 - b. Making your bed daily.
 - c. Cleaning up the bathroom after you have used it.
 - d. Helping prepare meals.
 - e. Helping clean up after meals.
 - f. Doing your laundry.

- g. Helping clean the inside and outside of the home.
4. You will keep yourself clean and well groomed. The staff will assist you if needed.
 5. You will be encouraged to help plan recreational activities, both for yourself and for the home. You will have house meetings to help plan these activities.
 6. The majority will rule when deciding what television programs to watch, which home activities to do, etc.
 7. All radios, TV's, stereos, etc. will be played at a reasonable volume so as not to disturb other people in the home.
 8. I-Pods, portable CD players, headphones, etc. should not be used at the dinner table during mealtimes.
 9. You will not tie up the bathroom for more than one half hour when you are bathing or showering.
 10. All sharp objects, such as knives, etc., will be locked up and out of reach for safety reasons.
 11. You will be required to pay for the following things out of your personal allowance:
 - a. Toothpaste, toothbrush, deodorant, soap
 - b. Radios, compact disks, tapes, craft items, etc.
 - c. Money for movies, sporting events, other outings
 - d. Pop, alcoholic beverages, tobacco, food on outings
 - e. Medicine not covered by Medicaid or Medicare Part D
 - f. All of your personal clothing
 - g. Extra furnishings or decorations for your bedroom
 - h. Gifts, cards, postage, etc. for your family and friends
 - i. Repair or replacement of your personal belongings

- j. Personal long distance phone calls
 - k. Co-payments on medications and Doctor's visits
 - l. All debts for money borrowed from M.M.E.
10. You will receive a personal allowance each month from your SSI and/or Social Security Income. M.M.E. will retain an equal portion of each person's income to pay for the group home's expenses. Your allowance will be the difference between your income and the amount kept by M.M.E. At this time, people receiving only SSI income will get \$60.00 a month in personal spending money.
 11. You must make prior arrangements to use M.M.E. staff and vehicles for personal outings or business.
 12. MME will not provide staff or transportation if you wish to go and get a tattoo or body piercing.
 13. You may have visitors at any reasonable time of the day or evening. There may be times when a special activity is taking place and people will not have the opportunity to visit you.
 14. Only approved pets will be permitted in the group homes.
 15. There is no smoking or chewing tobacco permitted inside any of the group homes. Smoking and chewing is only permitted in designated areas on the outside of the home.
 16. Vacations - You should be in the home 90% of the year, this comes out to 330 out of 365 days.

2. OFF-SITE RESIDENTIAL AGREEMENT

If you are in MME's Off-Site Residential Program, you will be required to agree to the following conditions:

1. Your Community Supports Professional and Community Support Professional Lead will have a key to your apartment.
2. Your apartment will be inspected two times a month by the Community Support Professional Lead. The inspection will focus on health and safety. If any of the following conditions are found, they must be corrected immediately:
 - Rotten or seriously outdated food in refrigerators or cupboards;
 - Overflowing garbage cans or bags of garbage around the apartment;
 - Insects or rodents, or rodent feces;
 - Unpleasant odors;
 - Fire hazards;
 - Clutter that could constitute a falling hazard;
 - Any other obvious health or safety hazards
3. You are required to take your medications as prescribed by your doctor.

If you refuse to allow your assigned Community Support Professional to enter your apartment, an incident report will be written to document the incident. If you do not allow staff to enter your apartment three times, a special IP will be called to address this situation.

Refusal to comply with the above conditions could result in the initiation of the 45 day exit procedure.

APPENDIX B: WORK AND TRANSPORTATION RULES AND GUIDELINES

WORKSHOP GUIDELINES

The regular work hours for the Activity Centers and Thrift Stores is between 8 a.m. and 4 p.m. for the Ronan work sites, and between 8:30 a.m. and 4 p.m. for the Polson sites. There may be days when you will work longer because of some special project, or the day may be shorter because of some special event. People working on janitorial crews on Supported Employment or Vocational Rehabilitation jobs may work any time during the days, evenings and on weekends.

Some things you should be aware of concerning your job performance are:

1. You should come to work every day, unless you have made arrangements to take the day off.
2. You should arrive at work on time and return on time after your breaks.
3. You should come dressed for work and well groomed.
4. You should work with your co-workers and not bother them.
5. You should always follow your supervisor's instructions. If you feel that you have not been treated fairly, you should discuss this with your supervisor at break time or after work. You should remember to follow the Grievance Procedure if you are not in agreement with program policies and procedures.
6. You should always do your best, meeting the expectations of you and your supervisor, and, if possible, doing better than what is expected of you.
7. You should try to do as much work as you can.
8. You should do any job that is assigned to you by your supervisor. If you feel that you can't do the job, you should discuss this with your supervisor.

LEAVING YOUR WORK SITE DURING WORK HOURS

If it is necessary for you to leave your work site during your normal working hours, you should inform your supervisor before leaving the building. You should let him/her know where you are going and when you expect to be back.

LUNCH PERIOD AND BREAKS

Lunch at the Ronan sites is from Noon to 12:45 p.m. At Polson, lunch is from 11:30 a.m. to 12:30 p.m.

There are two fifteen minute breaks at all work sites. These are generally at 10:30 a.m. and 1:45 p.m.

VISITORS AT THE WORK PLACE

All visitors should notify a staff person immediately when they arrive at one of the work centers.

TELEPHONE CALLS

If you need to make a phone call, you should do this during break time or at lunch. You should not receive personal calls during work time.

HOLIDAYS

M.M.E. observes the following holidays: (These holidays are subject to change on a yearly basis)

1. New Year's Day
2. President's Day
3. Memorial Day
4. Fourth of July
5. Labor Day
6. Thanksgiving Day
7. Christmas Day

If the legal holiday falls on a Saturday, the holiday will be taken on a Friday. If the legal holiday falls on a Sunday, it will be taken on the following Monday. If a majority of people vote to change one holiday for another, the program will close on the chosen day off.

RULES AND REGULATIONS FOR THE WORKSHOPS AND TRANSPORTATION

1. **Phones are to be answered only by staff: A very important call could come in and the individual may not know how to direct the call.**

2. **Staff and individuals have their own designated smoking areas: Role modeling is very important.**
3. **All scissors are locked up. When an individual wants to use them, staff must monitor the usage and then lock them back up: If someone was walking with scissors they could get seriously hurt.**
4. **No foul language is to be used in the day programs: It is inappropriate in a social environment, and is disrespectful to everyone else.**
5. **Absolutely no violence is allowed in the day program: Everyone wants to be safe.**
6. **Backpacks, suitcases, purses and bags of personal items are prohibited at the center: There are lockers at the center to keep personal belongings.**
7. **All individuals are welcome to use the computers in the labs; however, no one should visit inappropriate sites: This could be offensive to others.**
8. **Open-toed shoes are not to be worn. They are a safety hazard: a wheelchair could roll over someone's toes, causing serious injury.**
9. **Running through the building is not permitted: Someone could fall or run into another person and injure them.**
10. **Staff will monitor the lighting of individual's cigarettes and/or pipes: You could easily drop a lighter and injure yourself or start a fire.**
11. **No illegal drugs or alcohol are permitted at the work site: This is a violation of the law and is also a safety hazard.**
12. **When individuals are working at TBN or are in production they are on the clock and they are to be working. TBN is not a place for socializing: The stores and production rooms are places of business**
13. **Seatbelts are always to be worn when riding in company vehicles: This is state law and we are not allowed to violate state law.**

CORRECTIVE MEASURES

If a person consistently breaks the rules and regulations that were listed above, the following consequences will occur:

1. First incident; a verbal warning.
2. Second incident; a written warning.
3. Third warning; a referral to the I.P. Team or Vocational Rehabilitation Counselor for corrective action.

The type of action taken will depend on how serious the violation is.

FIRE EVACUATION PROCEDURES

There are maps located at various places in the Activity Centers that show how you will get out of the building in case of a fire. Fire drills are held at least quarterly. In case of a fire:

- I. Staff will shut off all lights and equipment.
- II. Walk calmly to the nearest outside assembly area.
- III. Follow the instructions of your supervisor.
- IV. Return to the building only after the supervisor tells you that it is safe.

INSURANCE AND MEDICAL TREATMENT

If you are injured at work, you are covered by Workers' Compensation. All injuries must be reported to your supervisor immediately. You will be taken to the doctor if you need medical attention.

APPENDIX C: GRIEVANCE FORM

**MISSION MOUNTAIN ENTERPRISES, INC.
330 Main St SW, Ronan, MT 59864**

CONSUMER GRIEVANCE FORM (To be filled out by the consumer or his advocate or staff member.)

NAME

DATE *

ADDRESS

PHONE

PLEASE PROVIDE A COMPLETE DESCRIPTION OF YOUR GRIEVANCE:

PERSON(S) INVOLVED:

COMPLAINT:

(Please add additional pages as needed.)

PROPOSED SOLUTION TO THE PROBLEM:

(Please add additional pages as needed.)

(Signature-Consumer or Representative)

Date

Manager/Supervisor

Date

Director

Date

*Grievance to be filed within one week of incident.
**Each stage of grievance to last no longer than one week.

APPENDIX D: REPRESENTATIVE PAYEE INFORMATION

Why Do I Have A Payee?

There can be many reasons why Social Security decides someone needs a payee. However, it's usually because we have information that indicated you need help in managing your money and meeting your current needs.

What Does A Payee Do For Me?

Your payee receives your payments on your behalf and must use the money to pay for your current needs, which include:

- housing and utilities;
- food;
- medical and dental expenses;
- personal care items;
- clothing; and
- rehabilitation expenses (if you're disabled).

After those expenses are paid, your payee can use the rest of the money to pay any past-due bills you may have, support your dependents or provide entertainment for you. If there is money left over, your payee should save it for you.

The payee must keep accurate records of your payments and how they are spent and regularly report that information to Social Security. Your payee also should share that information with you.

If you live in an institution, such as a nursing home or a hospital, the payee should pay the cost of your care and provide money for your personal needs.

What Should I Tell My Payee?

Be sure to tell your payee if you:

- get a job or stop working;
- move;
- get married;
- get money from another source;
- take a trip outside the United States;

- go to jail or prison;
- are admitted to a hospital;
- save any money;
- apply for help from a welfare department or other government agency; and
- are no longer disabled, if your benefits are based on a disability.

If you or your payee fails to report any of the above actions to us, you may be paid more money than you are due. You may have to pay back any money you were not due, and your payments may stop.

How Did You Select My Payee?

We try to select someone who knows you and wants to help you. Our main concern is that your payee is someone who can see you often and who knows what your needs are. For that reason, if you're living with someone who helps you, we usually select that person to be your payee.

In most cases, someone who knows the beneficiary asks us if he or she can be the beneficiary's payee. It may be a family member, a friend, a legal guardian or a lawyer.

Sometimes, however, social service agencies, nursing homes or other organizations offer to serve as payees. If there's someone you would like to have as your payee, you can tell a Social Security representative and we will consider your request.

What If I Disagree With Social Security's Decision to Send Benefits to A Payee?

We will send you a letter telling you that we have decided to pay your benefits to a payee. If you don't agree that you need a payee, or if you want a different payee, you have 60 days to appeal that decision by sending us a letter.

If you're already receiving Social Security benefits and have a payee, you can ask someone else to be your payee. You should tell your present payee that you plan to ask someone else to help you. The person you want to become your new payee must file an application at a Social Security office.

What If I Don't Think My Payee Gives Me Enough Spending Money?

You and your payee should talk about how your money is being spent. Your payee should show you how much money you get

from Social Security and how much he or she spends on your needs. Then you should talk with your payee about how you want to use your money.

My Payee Received A Large Check for My Past Benefits. How Should that Money Be Spent?

Sometimes Social Security benefits take a while to be approved. When this happens, your back benefits may be paid all at once in a large payment. If that happens, your payee must spend the money on your current needs such as rent and a security deposit, food or furnishing. The rest of the money can be used to pay for medical services, your education, improvements to your home or your debts. If your back payment is for more than one year of benefits, your benefits will be sent to you in several small payments.

If you receive SSI, you cannot have more than \$2,000 in cash and property (other than your home and car). You must spend your back payment within six months so that your total resources are below \$2,000. If you don't you may receive more than you are supposed to and your SSI payments may stop.

If You Have Questions About A Payee

Call Social Security's toll-free number, 1-800-772-1213, between 7 a.m. and 7 p.m. on business days. If you are deaf or hard of hearing, you may call our toll-free TTY number, 1-800-325-0778, between 7 a.m. and 7 p.m. on business days or call your local Social Security office between 9 a.m. and 4 p.m. on business days. You also can visit us on the Internet at www.socialsecurity.gov.

APPENDIX C: DEPARTMENT OF LABOR FORMS

The following forms are used to determine your rate of pay based on Department of Labor standards and guidelines.

Mission Mountain Enterprises, Inc
Time Study to Establish the Disabled Production Rate

EMPLOYEE: _____ DATE: _____

JOB _____ Observer: _____

OBSERVER
SIGNATURE: _____

JOB ELEMENT Description:

See Standard for Job Description. When rating a consumer wage.
Job Element description must be identical to job element description
on standard.

PRODUCTION RATE TIME STUDY

(MINIMUM of three/20 minute timings) (Same length & # as standard)

DATE:	START TIME (A)	STOP TIME (B)	TOTAL SECONDS (C)	REWORK TIME (D)	TOTAL SECONDS (E)	# OF UNITS
					1200	2
					1200	5
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
TOTALS					2400	7
					(F)	(G)
Average Employee Time (F ÷ G):					342.8571	

Note: 20 minutes = 1200 seconds

(round to the 4th decimal)

(If there are no units divide F by # of studies)

**Mission Mountain Enterprises
90-10 Measurement Form**

EMPLOYEE: _____ JOB _____

Period of Rating _____ TO _____

Staff Performing 90-10: _____

To Determine Quantity of Work:

	Standard Time	
	÷	
	Employee Time	
	=	
_____ #DIV/0!		Quantity of Work
	X .90	
_____ #DIV/0!		(A)
Quality calculated at 1.00 x .10= .1000		(B)
_____ #DIV/0!		(C) = a + b
	(D) Prevailing Wage	
_____ #DIV/0!		NEW RATED WAGE (D x C)
_____ #DIV/0!		NEW HOURLY RATE
		(Round up)

COMMENT:

SIGNATURE OF EMPLOYEE: _____

DATE _____

1. These figures are decimalized expressions of the weights 90% and 10% respectively.
2. Prevailing Wage is the hourly wage paid average non-disabled employees in industry.

