Member/Guardian Manual 2025-2026



Adult Day Program 170 Lexington Road Billerica, MA 01821

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Table of Contents

I.	Nashoba Learning Group Description (pages 3 – 5)	
	A. Mission Statement	3
	B. How to Contact The NLG Adult Day Program	
	C. Adult Day Program Description	5
II.	The Member/Guardian - Nashoba Learning Group Partnership	
	(pages 5 – 18)	
	A. Transition planning	5
	B. Member Programming	
	C. NLG – Home Communication Log	8
	D. Member/Guardian consent and signature on	
	all behavior management plan	. 8
	E. Behavior management review process	. 9
	F. Development Plans and Progress Reports	
	G. Code of Conduct	
	H. Bullying Policies and Procedures	13
	I. Visiting NLG's Adult Day Program	18
III.	The Member or Guardian's child/ward at Nashoba Learning Group	
	(pages 19 - 39)	
	A. Medical and Emergency Forms	19
	B. What each New Member should bring to the program	
	Member Funds Management Plan	27
	C. Wellness Policy – When a Member should stay home	31
	D. Prohibition of Recording Devices	32
	E. Staff Roles & Sample Program Schedule	33
	F. Staff Training	35
	G. Fund Raising	36
	H. Member Records	37
	I. Member Human Rights	38
	J. Acceptable Network Use and Security Policy for	
	Member Electronic Devices	39
IV.	Policies and Procedures (pages 40 – 64)	
	A. Admissions Policy and Procedures	40
	B. Communication with Outside Parties	43
	C. Confidentiality	43
	D. No Smoking Policy	
	E. Cancellations, Emergency Closings, Early Dismissal	
	and Delayed Openings	44
	F. Fire Drill Procedures	
	G. Health and Safety Procedures	
	H. Preventative Health & Communicable Diseases	
	I. MRSA (Methicillin-Resistant Staphylococcus Aureus)	
	J. Influenza (flu, pandemics, H1N1, Covid)	
	· · · · · · · · · · · · · · · · · · ·	

	K. Hiring of NLG Employees	49
	L. Designated Reporting Responsibilities	
	M. Transportation Policy and Community Outings	56
	N. Member Release Authorization	57
	O. Medication Administration Policy	59
	P. Allergy and Anaphylaxis in the Adult Program Setting	60
	Q. First Aid and Emergencies in the Community	60
	R. Suspected Opioid Overdose Response Plan	61
	S. Use of Physical Restraint Policy	61
	T. Discharge Policy	62
	U. Policy for Registering Complaints	
V.	Calendar and Schedule for the Current Year	65
VI.	Member/Guardian Manual Sign-off Sheet	67

I. Nashoba Learning Group Description

A. Mission Statement

Nashoba Learning Group's (NLG) mission is to enable individuals with autism to function with the greatest possible productivity and independence in the community, home, workplace, and program setting throughout their lives. NLG was founded in 2002 to offer a different life trajectory for more impaired individuals with Autism and their families. NLG's Day School program, located at 10 Oak Park Drive in Bedford and on the first floor of 170 Lexington Road in Billerica, Massachusetts provides outstanding, individualized education, training and intervention services to 130 students aged 3 to 22 with Autism Spectrum and related disorders. NLG's Adult Day program located on the second floor of 170 Lexington Road in Billerica, Massachusetts provides outstanding daily living, volunteer, community recreational, and, as appropriate, job skills training and day habilitation services to adults aged 22 and older with Autism Spectrum and related disorders so that they can continue to achieve their potential and be productive members of society throughout their lives. NLG's programs welcome individuals with autism and related disorders of any race, creed, color, sex, sexual identity, sexual orientation, gender identity and/or expression, religious affiliation, national or ethnic origin, language, socioeconomic status or homelessness.

NLG's Adult Day Program will achieve its mission by living its core values:

• Every person with autism deserves the opportunity to develop to their developmental potential and be a valued contributor in each community and program setting in which they participate.

- Applied behavior analysis (ABA) is a proven method for enabling people with autism to maximize their potential.
- Outstanding training, development, and supervision must be customized to the population served by NLG's Adult Day Program.
- The quality of services delivered is determined by the quality and training of the people who deliver the services.
- Nashoba Learning Group will focus on what is proven to enhance the lives of individuals with autism, and we will do only what we do best.

B. How to Contact the NLG Adult Day Program

Address: 170 Lexington Road Address: 307 Great Road

Billerica, MA 01821 Bedford MA, 01730

Telephone: 978-528-5210 Telephone: 781-879-7131

Facsimile: 978-528-2078 Facsimile: 978-528-2078

E-mail: info@nashobalearninggroup.org

The 170 Lexington Road location operates from 9:15 am to 3:15 pm, Monday through Friday. The 307 Great Road location operates from 9:00 a.m. to 3:00 p.m., Monday through Friday.

To call out your Member before operating business hours for either program location listed above, please call the 170 Lexington Road telephone number at 978-528-5210.

Phone rolls into voicemail if it is not answered after 4 rings. If you urgently need to reach us and get voicemail during program hours, please try calling again.

If you are calling a Clinical Leader/Assistant or Supervising Clinician unless it is an emergency, you will be asked to leave a message with the receptionist that will be forwarded to that staff member as soon as possible. This is to avoid disruption of Member programming during the day. Please also avoid raising issues and/or providing critical information during drop off or pick up as this will delay this process for everyone else arriving or leaving. You are encouraged to leave your child's/ward's Clinical Leader/Assistant an email, voicemail, or send in a note to address any issues, concerns, communicate information or to schedule a time to meet.

Any communications updating the Member's pickup information, Guardianship, medication administration, or Emergency information requires the appropriate form to be completed and signed.

C. Adult Day Program Description

NLG's Adult Day Program, opened in March 2013 and is designed to provide adults with autism and related disorders an integrated life skills training, job training, employment, social skills, and community integration program. The program is approved by two (2) agencies within the Massachusetts Executive Office of Health and Human Services (EOHHS); MassHealth as a provider of day habilitation programming and the Department of Developmental Services (DDS) as a provider for Group Supported Employment, Individual Work Services, Supplemental Wrap Funding, and Community Based Day Support (CBDS). The programming funded by each agency is dependent on each Member's needs when they are admitted into the program and any services offered by the program but not covered by either of these agencies can be paid privately by the Member or their Guardian. The program is open year round, 240 days per year.

NLG has successfully demonstrated in our DESE approved Day School for individuals aged 3 to 22 that individuals significantly impaired by Autism and related disorders, can learn to productively and successfully engage in community, job, recreational and training activities with the appropriate teaching programming and skilled supports in place. As in the Day School, NLG's Adult Day Program uses the principles of Applied Behavior Analysis (ABA) to provide skilled intervention and support to adults aged 22 and older who are impaired by Autism and related disorders. NLG's Adult Day Program distinguishes itself from other offerings by the quality, training and supervision of its program staff. The Adult Day Program targets continued skills development for participants with the goal of increasing independence allowing NLG's Members to productively and proudly engage in activities in the community, in the workforce, with peers in the program setting and throughout their lives. Adults in the program are grouped by their needs, skills and interests.

II. The Member/Guardian - Nashoba Learning Group Partnership

A. Transition planning

To ensure each Member's success at NLG's Adult Day Program, we work with the Department of Developmental Services and their current placement, family and/or Member/Guardian to plan their transition to our program carefully. Our overriding goal for each adult is that they are successful in our program from the very first day. As we want to immediately set the tone that the environment and staff are reinforcing we will plan for the Member's first days to include a rich array of reinforcing activities on a very frequent schedule, contingent only on the successful performance of activities that are relatively less demanding for the Member. Relatively quickly, as a Member becomes comfortable in our environment and recognizes the availability of reinforcing activities here, we will gradually reduce the frequency of reinforcement to a steady-state level and increase the duration and/or difficulty of tasks, while providing appropriate behavioral and

training support to the Member. As appropriate, we will also work to increase the Member's independence in managing their own behavioral supports.

For Members who are transitioning from outside Providers, we will arrange for the Member to visit the program with their current staff, family and/or Guardian prior to transitioning to the NLG Adult Day Program. We will work with the Member (if appropriate), their current teachers/therapists, family and/or Guardian to determine if more visits are required during the several weeks prior to starting at NLG or if a reduced schedule should be in place during the Member's first week in the program to make their transition most successful. For Members who are transitioning from our Day School Program, we will design a transition plan in the weeks or months prior to their anticipated start date utilizing the support/training resources from our Day School Program. Similarly, the transition plan will be based on the Member's needs and can be modified as needed.

In collaboration with the sending placement and the family, NLG will draft a preliminary behavior management plan for each student specifying prevention activities, reinforcement schedule, and how inappropriate behaviors will be addressed. This plan will be presented to the family for review and informed consent before the member begins at the program. This plan is preliminary and will be modified after the collection of baseline data during the Member's first few weeks at the Program.

Each new Member will be assigned to a Clinical Leader/Clinical Assistant who will coordinate, implement and monitor their day to day programming (see staff roles and responsibilities on page 22). Each Member will be assigned to a larger group of 8 to 12 Members overseen by the Clinical Leader/Assistant. The group also consists of Team Coordinator who assists the group with training and programming support and Team Instructors who primarily provide direct care during the day. Your member's clinical services will be overseen by a BCBA or multiple BCBAs. This includes the Program Director and Supervising Clinician. This may also include the Clinical Leader or Assistant.

From day 1, we immediately begin to collect data on behavior and skill levels for the purpose of creating a baseline understanding of your member's needs. Through behavior and sill assessment, we develop a behavior plan and curriculum for your member. Goals and objectives in all areas are outlined in each member's Day Habilitation Service Plan (DHSP). We utilize this document to compile all objectives for each member, regardless of funding type.

Each member at NLG will have the following:

- Behavior Plan (and emergency procedure if applicable)
- Day Hab Service Plan (DHSP typically just for Mass Health funded members, but used universally across the Adult Program)
- Quarterly Progress Reports sent home for review every 3 months
- Meetings offered on a quarterly basis in conjunction with the quarterly progress report. Meetings are also offered any other time that is needed.
- An annual meeting

- If the member has DDS funds, this meeting will be called the ISP meeting and there will be an Individualized Service Plan in place with DDS. DDS will monitor a few objectives for your member.
- If your member does not receive DDS funds, there will be an internal annual meeting to review progress. Your DDS service coordinator will be invited to the meeting but is not required to be in attendance.

For more information on these documents, see section F "Development of Plans and Progress Reports"

B. Member Programming

Adults are referred for admission to NLG's Adult Day Program by their DDS office. Each adult may have an Individual Support Plan (ISP) and Day Habilitation Service Plan (DHSP) developed by NLG's Interdisciplinary Team (IDT) with input from the family, Member/Guardian, and/or residence staff (if approved by the Member/Guardian). NLG's IDT staff members consist of the Program Director (a Board Certified Behavior Analyst – BCBA), a Supervising Clinician or Behaviorist (also a BCBA), the program's Nursing Coordinator and Healthcare Supervisor (both Registered Nurses), and the Clinical Leader/Assistant that the Member is assigned to (aka the Case Manager or Day Habilitation Service Manager). A Clinical Leader is pursuing a BCBA credential through a Master's level program in Applied Behavior Analysis or already holds a BCBA credential. The IDT specifies goals and objectives to increase the individual's skill level based on the individual's priorities, developmental and skill level, likely rate of progress, and the nature of their specific symptoms of disability.

All of the programming provided at NLG's Adult Day Program utilizes the rich array of training and teaching techniques developed through Applied Behavior Analysis (ABA) and validated by scientific research as effective for the education and treatment of individuals with autism.

Below are the categories of activities available to Members. A Member's programming may include some or all of these categories depending on the individual's requirements and funding provided:

- Life skills training and execution
- Communication, language and social skills training
- Self-management and appropriate behavior training
- Community participation, including shopping, banking, dining, independent life skills
- Job skills training
- Work opportunities with job coaching provided
- Volunteer activities
- Exercise for health and fitness
- Activities of Daily Living Skills (ADLS)

C. NLG – Home Communication Log

Each Member will update a NLG-Home Communication Log at the end of each day with the help of the Team Instructors. Members will keep these logs in a binder that they will take home each day to share information about their day with family and/or caretakers.

On the bottom half of the NLG-Home Communication Log there are two additional sections: The first section, "Any Important Notes from NLG staff" provides a means for NLG staff to communicate any important events or issues that occurred during the day that may affect the Member's behavior or communications when they return home at the end of the day. The next section, "Any Important Notes from Home" is a place where the Member's family, Guardian or caretakers can communicate any important events or issues that occurred overnight or during the weekend that may affect the Member's behavior or communications when they arrive to NLG at the beginning of the day. As it is not possible for NLG staff to provide written daily updates for each Member, these sections will only be utilized to communicate things that are unexpected or out of the ordinary and not to provide general information about the Member's day.

D. Member or Guardian consent and signature on all behavior change procedures

Behavior management plans are developed when an individual, exhibits behaviors that interfere with their ability to participate in community and family/residence activities or reduce their ability to learn. Behaviors may be identified by the individual's clinical team, Guardian and/or family members. Once identified, the interfering behavior is defined and baseline data is collected. In most cases, a functional behavior assessment is conducted to develop hypotheses on why the individual is exhibiting the behavior and guide development of a comprehensive behavior plan. This analysis assumes that all behavior has a valid purpose. Determining the purpose allows us to assist the individual in developing more appropriate ways to achieve that purpose. From this information, programs designed increase appropriate alternative behaviors and reduce inappropriate behaviors are developed by NLG's personnel under the supervision of a Behaviorist, Supervising Clinician and/or the Program Director, all of whom are Board Certified Behavior Analysts (BCBA). These programs are reviewed with the Member or Guardian.

NLG will not implement any behavior management plans, except on a test basis, without written informed consent from a Guardian. Before asking for consent, we will review the proposed program with the Guardian thoroughly. We will set criteria for determining if the plan is successful. Data are collected as part of every behavior management program.

Behavior plans at NLG's programs always include the following components: hypotheses regarding the function of the behavior; activities and environmental modifications

designed to prevent the behavior; functional communication and functional alternative training; reinforcement for appropriate behavior; and procedures to follow if the inappropriate behavior occurs. The focus of an NLG behavior plan is to teach and reinforce appropriate alternative behaviors. Alternative behaviors are only valuable to the individual if they provide access to the same type of reinforcement that they received for the inappropriate behavior. This is why functional assessment is such an important component of developing appropriate behavior plans.

Teaching functional communication skills and self-management skills are critical for promoting appropriate behavior. Some procedures reward the individual for going periods of time without exhibiting the inappropriate behavior. These intervals are usually very short at first in order to ensure that the individual is frequently rewarded and sees the value of engaging in appropriate behavior and avoiding inappropriate behavior. When the behavior occurs, the reinforcement is withheld and the interval reset. In some cases, the individual would incur a response cost or be asked to engage in a less desired activity. In still others, the behavior is simply ignored or redirected.

All of these programs, and any others that might be indicated by a functional assessment, are subject to BCBA review and will be implemented only with Member or Guardian informed consent.

You are free to withhold your consent from a plan or to withdraw your consent at any time. In that case, the plan will not be implemented and we will work with you to develop an acceptable alternative. If the behavior presents a threat to the safety of the individual or other Members or staff in the program, we may require that the Member remain at home/residence while an acceptable alternative is developed. If we cannot agree on an acceptable alternative, we will require that another placement be found for the Member.

E. Behavior management review process

Nashoba Learning Group has a multi-part review process for all behavior management plans. This process includes:

- Development of behavior plan overseen by a BCBA
- Review of behavior management plans by a Human Rights Committee or Peer Review Committee as appointed by the CEO and determined by the DDS Standards to Promote Dignity.
- Behavior Council review for complex cases involving life threatening behaviors;
- Member or Guardian informed consent on all behavior reduction plans.

F. Development Plans and Progress Reports

Within five (5) program days the Member/Guardian will receive the following (for members with Mass Health Funds only):

Interim Day Habilitation Service Plan: As a day habilitation provider, Mass Health requires us to design an Interim Day Habilitation Service Plan within 5 working days of a

Member beginning the program. The purpose of this plan is to provide a schedule of the types of activities that the Member will be engaged in, and the skills those activities would be addressing, when beginning the program. Within 45 days of beginning the program., we will work together to create a final Day Habilitation Service Plan that will include all specific goals and objectives addressing your member's needs.

Within 30 program days, the Member/Guardian will receive the following:

1. An *Intake/Initial Behavior Protocol* (if applicable) or Behavior Management Plan (see next paragraph): The program's clinical team will work to develop a preliminary behavior plan based on the information received, observed and assessed during the admissions process. This initial plan will serve as part of a functional assessment conducted to develop a more comprehensive behavior plan. This plan will identify the anticipated behavior(s) of concern, the likely conditions in which the behavior(s) occur, any known predictors that indicate the behavior is likely to occur, the protocol for staff to implement to try to de-escalate the Member prior to the behavior(s) occurring, the appropriate behaviors that will be reinforced, and the protocol for staff to implement if the behavior occurs. This preliminary plan will be discussed with the Member/Guardian to ensure their understanding of the process and protocols being put in place. Member/Guardian signature is required on the plan indicating their informed consent. If consent is withheld for the initial plan, we will work with the Member/Guardian to develop an acceptable alternative. We may ask that the Member not attend the Program until an agreed plan is in place. However, if the behavior is determined by NLG's clinical team to present a potential threat to the safety of the individual or other Members or staff in the program, and we cannot agree on an acceptable alternative we will require that another placement be found for the Member.

A comprehensive *Behavior Management Plan (BMP):* Using data collected and assessed through measures described in the last section, a final behavior plan will be created. See section II (d) above, "*Member or Guardian consent and signature on all behavior management plans*" for additional information regarding the BMP.

Within 45 program days the Member/Guardian will receive the following:

An initial *Service Needs Assessment (SNA):* Summarizes a Member's assessed independence and level of functioning in categories specific to day habilitation services including medical, behavioral, communication, safety, and a variety of daily living skills. The SNA documents the services and specialists supports required to address the Member's day habilitation needs. A new SNA must be done every 2 years.

A final *Day Habilitation Service Plan (DHSP):* Details the goals and objectives that will be addressed with each Member and establishes benchmarks, service delivery and timing to address them.

Within 90 program days the Member/Guardian will receive the following:

Individual Support Plan (ISP): developed from assessment results to include goals overseen by DDS in the areas of community safety, behavior decrease, work-readiness, or paid employment. Usually consists of 2-4 goals from NLG. These are included in a larger document that outlines each members needs in all areas of life and identifies values by answering the following 4 questions. These questions are answered as part of the annual ISP meeting by team members such as the individual, guardian, home services, NLG, DDS, specialists or others as applicable).

- 1. What does s(he) identify as important activities and relationships to continue to be involved in? What other things would s(he) like to explore?
- 2. What does s(he) think others need to know in order to provide effective supports?
- 3. What does s(he) think are their strengths and abilities?
- 4. What would s(he) like to see happen in his/her life over the next 2 years?

Ongoing progress reporting:

DHSP/ISP Summary(ies)/Review(s): Because NLG's Adult Day Program is an integrated program and most Members receive funding through both MassHealth and DDS, there are a variety of reports prepared to satisfy requirements from both agencies. The reports completed for your Member will be determined based on whether your member receives funding from MassHealth, DDS or both agencies. MassHealth requires monthly and quarterly summaries to be prepared and filed for the services provided as part of a Member's day habilitation program. DDS requires that a semi-annual and annual report be prepared and filed for services provided as part of a Member's ISP. The various reports are explained in more detail below:

MassHealth Reporting:

- 1. Each month the Clinical Leader/Assistant will review and sign off on all data and meet with the Group to discuss any changes to programming. The Health Care Supervisor will complete monthly nursing notes. Each of these documents (the data sign off with meeting dates and the nursing notes) will be held in the Member's file and attached to the quarterly progress report (see below).
- 2. Each third month a *quarterly progress note* will be completed, discussed and reviewed and signed by NLG's IDT. This quarterly document will include current data on each objective in the DHSP, a brief narrative of how the objective is being addressed, and any comments or suggestions from the IDT. This report will be included in the Member's file and reviewed with the Member's team. In addition, this report will be sent to the Member/Guardian with an invitation to meet, discuss and provide input to its content.

DDS Reporting:

3. <u>Semi-annual updates</u> will be completed for any objective in the ISP, and will identify whether each objective has been met, partially met, not met or discontinued. This report will include current data and a brief narrative of how the objective is being addressed. These updates are submitted electronically to DDS.

- Because it is the same information reported in the Q2 progress note, copies of these documents will not be sent to the Member/Guardian unless requested.
- 4. <u>Annual DHSP/ISP</u>. Each Member's DDS Service Coordinator will schedule an annual meeting to review objectives for the previous year and create a plan for the coming year. NLG will have drafted objectives to be reviewed by the Member/Guardian prior to these meetings and encourage input and questions about any of the proposed objectives.

G. Code of Conduct

Purpose:

Nashoba Learning Group's (NLG) mission of enabling individuals with autism to function with the greatest possible productivity and independence in all environments requires a continuous, productive collaboration between NLG's staff and each member's Parent/Guardian. A Code of Conduct helps to maintain an environment of respect throughout NLG's School and Adult Programs and in the community. All members of the NLG community have a right to an environment free from harassment, intimidation and hostility, and to be communicated with in a respectful, constructive and co-operative manner.

As a Parent/Guardian of a NLG Member you can expect:

- To be treated with respect, professionalism and courtesy by all NLG employees and contractors at all times, whether inside or outside of NLG
- That your child/ward will be treated with respect and courtesy while in NLG's care
- NLG will only share your child/ward's pictures and approved information publicly for research purposes and/or on social media forums with the parent/guardian's permission
- NLG to work collaboratively with you and the IEP Team in the development and implementation of goals and objectives appropriate for your child/ward's level of development/independence
- NLG to work collaboratively with you and the IEP Team in the event your child/ward transitions out of NLG
- NLG to provide an environment where you can feel comfortable asking questions, raising concerns and discussing those concerns openly and honestly
- NLG to provide you with a timely response for any grievances raised

As a Parent/Guardian of a NLG Member, NLG expects you to:

- Treat all NLG employees, contractors, board members, students and adult members with respect, dignity and courtesy at all times whether inside or outside of NLG
- To work productively, respectfully, and collaboratively with NLG's clinical and teaching staff and in all communications both inside and outside of NLG
- To raise grievances productively and to the appropriate NLG staff members, MassHealth and Department of Developmental Services (DDS) only

- To be respectful of NLG's mission, business practices, employees, contractors, board members, students and adult members at all times inside or outside of NLG, including in public, in the media and on social media forums
- To immediately inform the appropriate NLG staff member(s) of any new information/issues that could potentially have an impact on your child's/ward's wellbeing or programming
- To adhere to NLG's policies & procedures as outlined in the Member/Guardian manual

H. Bullying Policies and Procedures

NLG is committed to providing an environment which is free from bullying, harassment and discrimination based on an individual's gender, gender identity and/or expression, race, creed, color, religious affiliation, sex, sexual orientation, sexual identity, socioeconomic status, national or ethnic origin, disability, veteran status or age. NLG expects all students and members of school staff, including but not limited to educators, administrators, school nurses, and paraprofessionals to treat each other in a civil manner and with respect for differences. Bullying undermines the integrity of the organization as a place where each individual can learn and grow and can destroy the morale and emotional well-being of the individuals involved.

Bullying covers a range of behaviors, including subtle and not-so-subtle, verbal and non-verbal behavior. Bullying has been defined as follows in M.G.L. c. 71, § 370:

The repeated use by one or more students of a written, verbal, or electronic expression or a physical act or gesture or any combination thereof, directed at a target that:

- Causes physical or emotional harm to the target or damage to the target's property
- Places the target in reasonable fear or harm to themselves or of damage to their property
- Creates a hostile environment at school for the target
- Infringes on the rights of the target at school
- Materially and substantially disrupts the education process or the orderly operation of a school

Cyberbullying

Cyberbullying is bullying through the use of technology or electronic devices such as telephones, cell phones, computers, and the internet. It includes, but is not limited to, email, instant messages, text messages, and internet postings.

Acts of bullying, which include cyberbullying, are prohibited:

- On school grounds and property immediately adjacent to school grounds, at a school-sponsored or school-related activity, function, or program whether on or off school grounds, at a school bus stop, on a school bus or other vehicle owned, leased, or used by a school district or school; or through the use of technology or an electronic device owned, leased, or used by a school district or school
- At a location, activity, function, or program that is not school-related through

the use of technology or an electronic device that is not owned, leased, or used by a school district or school, if the acts create a hostile environment at school for the target or witnesses, infringe on their rights at school, or materially and substantially disrupt the education process or the orderly operation of a school

Retaliation is any form of intimidation, reprisal, or harassment directed against a student who reports bullying, provides information during an investigation of bullying, or witnesses or has reliable information about bullying.

As is stated in NLG's policy for Student Conduct, each student is expected to exhibit appropriate behavior towards self and others. Appropriate behavior is defined individually but includes: refraining from verbally or physically disrupting the work environment of others; refraining from any aggressive or inappropriate physical contact with others; refraining from behaviors that are injurious to self; refraining from behaviors that are stigmatizing in the eyes of the community; refraining from unexcused exiting from or avoidance of an activity or location; participating in learning activities; engaging in behaviors that promote physical and emotional well-being.

We recognize that certain students may be more vulnerable to become targets of bullying, harassment, or teasing based on actual or perceived characteristics, including race, creed, color, sex, sexual identity, sexual orientation, gender identity and/or expression, religious affiliation, national or ethnic origin, language, socioeconomic status or homelessness, academic status, physical appearance, or sensory, disability, or by association with a person who has or is perceived to have one or more of these characteristics. NLG will identify specific steps it will take to create a safe, supportive environment for vulnerable populations in the school community, and provide all students with the skills, knowledge, and strategies to prevent or respond to bullying, harassment, or teasing.

When students are observed to fall short of our code of conduct and exhibit behaviors that limit their ability to participate in learning activities and participate in home, school, community life, or with others inappropriate behaviors are addressed through an explicit and comprehensive behavior management plan based on functional assessment. Each student's programming is customized to their individual needs and they are with an ABA Therapist throughout the day minimizing the opportunity for bullying or retaliation to occur. Appropriate behavior is proactively taught through programming that includes social skills programs, video modeling, social stories, incidental social opportunities, play skills, internet and online skills, and recreational skills.

Any student who believes that they have been subjected to bullying or retaliation or Parent/Guardian, direct staff, or administrator who believes they have been witness to or made aware of bullying or retaliation of a student by another student or staff member, should report the incident to the Executive Director, President, or the student's Clinical Director orally or in writing. Reports of bullying or retaliation made by students, Parents/Guardians, or other individuals who are not school or district staff members, may be made anonymously. Once the Executive Director has been informed, a thorough

investigation of the bullying or retaliation complaint will be conducted following procedures designed to discover the facts, to preserve the confidentiality of all involved in the investigation, to prevent further retaliation against the student for bringing the complaint and against anyone who assists in the investigation, and to ensure fair treatment of the person accused of the bullying or retaliation. The attached Bullying Prevention and Intervention Incident Reporting Form can be used to file a complaint. Within three (3) school days, the complainant will be informed of the investigation process by the Executive Director of the investigation of the complaint.

Before fully investigating the allegations of bullying or retaliation, the Executive Director will take steps to assess the need to restore a sense of safety to the alleged target and/or to protect the alleged target from possible further incidents. Responses to promote safety may include, but are not be limited to, creating a personal safety plan; predetermining seating arrangements for the target and/or the aggressor in the classroom, at lunch, or on the bus; and altering the aggressor's schedule and access to the target. The Executive Director will take additional steps to promote safety during the course of and after the investigation, as necessary.

Throughout the investigative process, to the extent possible, NLG will share information about the matter only on a need-to-know basis. All employees, Parents/Guardians, and students, including the complainant, who suspect or have knowledge of a bullying or retaliation complaint or of the conduct of an investigation must refrain from discussing the matter with other employees, except as directed by the Executive Director, President, or the student's Clinical Director.

The person conducting the investigation will report their findings to the Executive Director. The results shall also be reported in confidence to the complainant if appropriate or their Parent/Guardian.

Any discrimination or adverse action, such as intimidation, threats or coercion, taken against any student or employee because they make a complaint of bullying or assists in an investigation of any allegation of bullying is unlawful and will also result in appropriate disciplinary action.

Upon determining that bullying or retaliation has occurred, the Executive Director will promptly notify the Parents/Guardians of the target and the aggressor of this, and of the procedures for responding to it, and of any action taken to prevent further acts of bullying or retaliation. There may be circumstances in which the Executive Director will contact Parents/Guardians prior to any investigation. Notice will be consistent with state regulations at 603 CMR 49.00.

At any point after receiving a report of bullying or retaliation, including after an investigation, if the Executive Director has a reasonable basis to believe that criminal charges may be pursued against the aggressor, the Executive Director will notify the local law enforcement agency. Notice will be consistent with the requirements of 603 CMR 49.00 and locally established agreements with the local law enforcement agency

A student who knowingly makes a false allegation of bullying, cyberbullying or retaliation will be subject to disciplinary action as determined by the Executive Director.

A key aspect of promoting a positive school climate is ensuring that the underlying emotional needs of targets, aggressors, families, and others are addressed. Upon determining that bullying or retaliation has occurred, each student's clinical staff (both the target and the aggressor) will develop programming to address the behavior. If necessary, the IEP Team will work with each student's family to update the IEP to incorporate the development of skills and proficiencies to avoid and respond to bullying and retaliation. Should bullying or retaliation prevention programming be added to a student's IEP, Parents/Guardians will be informed on how to reinforce the curricula at home. At such time and as is deemed necessary by the IEP Team, Parents/Guardians will be informed regarding the dynamics of bullying and online safety and cyberbullying.

NLG's annual Behavior Management and Student Rights Training addresses Bullying Prevention as it emphasizes each student's right to an environment and treatments that promote both their physical and emotional wellbeing. This training incorporates the following components:

- Prevention of inappropriate behaviors including bullying
- Reinforcement of appropriate behaviors
- Information regarding the complex interaction and power differential that can take place among an aggressor, a target, and a witness to bullying
- Information on students who are at risk for bullying
- Information on cyberbullying
- Internet safety issues as they relate to cyberbullying

An investigation into any incident(s) reported will be conducted. Throughout the investigative process, to the extent possible, NLG will share information about the matter only on a need-to-know basis. All employees, Parents/Guardians, and students, including the complainant, who suspect or have knowledge of a bullying complaint or of the conduct of an investigation must refrain from discussing the matter with other employees, except as directed by the Executive Director, President, or the student's Clinical Director.

Any discrimination or adverse action, such as intimidation, threats or coercion, taken against any student or employee because they make a complaint of bullying or assists in an investigation of any allegation of bullying is unlawful and will also result in appropriate disciplinary action.



BULLYING PREVENTION AND INTERVENTION INCIDENT REPORTING FORM

Name of Person Filing the R	eport:		
Check whether you are the:	Target of the beha		
Check whether you are a:	Reporter (not the t Student/Member	· /	ember
Check whether you are a.	Parent/Guardian		
	(speci		
Name of Target (if not perso	n filing the report):		
Name of Alleged Aggressor:	:		
Date(s) of Incident(s): Place(s) of Incident(s):	Ti	me(s) of Incident(s):
School buildingSc	chool grounds	_To or from school	Home
Elsewhere If elsewhere	re, location		
Description of Incident(s):			
List names of other students/incident(s) occurred:	/members, staff or o	thers (specify) in at	ttendance when the
Parent/Guardian Notified:			
(if not report filer)	Date	Time	Method
Signature of Person Filing th	ne Report:		
THIS REPORT HAS BEE	N GIVEN TO:		
Signature Date Receive	ed.	Name	Title

I. Visiting NLG's Adult Day Program

Due to confidentiality and privacy issues for all of our Members, these visits must be scheduled in advance and the Program Director or their designee must accompany visitors at all times. When arranging for a time for you to visit, program personnel will consider other activities and staffing levels on the day and at the time of the requested visit and if that is not a time that works for the program will provide an alternative time/date. Again, for confidentiality and privacy reasons, extended observation of your child/ward while engaged in programming may not be possible as most, if not all, of the programming will be conducted with other Members in the program.

Nashoba Learning Group extends a warm welcome to parents/guardians and others to visit our school and classrooms. At the same time, we must assure that our members and staff are safe and learning is not disrupted. NLG must be aware of who is in the building and why they are there. NLG has a buzz-in system with cameras so no one can enter the building without the knowledge of the receptionist. In addition, we had developed the following guidelines for school and program visitors.

- 1) All visitors must report to the receptionist and sign in before going elsewhere in the building, and they must sign out before leaving.
- 2) Visitors will receive a Visitor's Pass sticker when they sign in. The visible sticker must be worn as to be visible at all times.
- 3) Visitors will not be allowed unmonitored access beyond the front lobby. Individuals that are serving as unmonitored volunteers will need to undergo various background checks as well as a Criminal Offender Record Information (CORI) check as required by DDS.
- 4) Visitors who want to meet with staff or administrator must make an appointment.
- 5) If a meeting is scheduled, the parent/guardian or visitor must first report to the lobby and will be escorted to the meeting place.

As per Massachusetts regulation 419.448, any duly designated officer or employee of the MassHealth agency has the right to enter and inspect NLG's Adult Day facility at any time with or without notice.

III. The Member or Guardian's Child/Ward at Nashoba Learning Group

A. Medical and Emergency Forms

The Member/Guardian and the Member's doctor prepared medical forms and submitted them to NLG by the first day the Member started at NLG's Adult Day Program. In order to keep the medical information up to date, each Member will need to have a physical exam once a year with an updated immunization report, a TB screening once per year and the appropriate physician-signed over the counter medication orders once per year. These forms will need to be submitted to the nursing department at NLG by the date of expiration on the previous year's paperwork. In addition, the Member's physician needs to provide the nursing staff at NLG's Adult Day Program with any updates or changes to a Member's medical status or history as they occur. For example, if the Member is newly diagnosed with a chronic medical condition or prescribed a new medication, it is important that we be provided with that information. In some cases, we may contact the Member's physician directly to ensure that we understand the proper procedures to follow so we can be properly prepared to react to any symptoms the Member may present in order to provide the best care possible.

In addition, if the Member or Guardian's phone number, address, Guardianship or emergency contacts change, we ask that you notify us at once in writing. In this way, we will be able to reach you or someone on your list quickly in the event of an emergency. Any change in this information will be immediately passed on to the Member's Team Leader and Team Instructors by the Program Director or their designee. Copies of the Emergency Information Form and Permission to Seek Emergency Medical Treatment are included in this manual. Please use these forms if any update is needed during the year. It is particularly critical that we be notified in the event there is any change in Guardianship status of the Member. Please notify us in writing of any changes and enclose copies of the relevant legal agreements or forms.

Finally, any changes to the administration of medication taken by the Member at the Adult Day Program must be made in writing and signed by the physician. This includes adding a medication, changing the dosage, an administration schedule change or discontinuing a medication. We are not able to make any changes without a physician signature. Please contact the nursing department if you need copies of any of these forms.

Nashoba Learning Group Adult Day Program - Emergency Information Card

Member Name:	*Member photo in space below
Nickname:	Tremest priese in space core
Birth date:	
Current Address:	
Service Coordinator:	
Area Office:	
Does Member Have Guardian(s): No guardian decree)	Yes (if yes attach a copy of the
Resides with: Mother Father Both	Guardian Other
(names)	
Sex: (M) (F) Race: He	ight: Build:
•	es:
Distinguishing marks:	
General physical characteristics:	AB BA
	GILL
General nature of abilities and physical handicaps	

Legal Competency Status Guardian Name: (if more than 1 Guardian please indicate if there is a primary guardian or if both should be included in all communications)						
	(if more than 1 Guardian pleas	e indicate if there is a primary gua	ardian or if both should	l be included in all		
communications) Guardian Name(s):						
Guardian's Primar	y Contact Email _					
Guardian's Second	ary Contact Email	(if more than 1 Guardian)				
Guardian(s) Relati	onship to Member:	(Mother, Father, Brother, Sister, C				
Guardian(s) Addre		(Mother, Father, Brother, Sister, C		etc)		
Guardian Phone:	Home	Cell	Wo	ork		
Guardian Phone: (if more than 1 guardian)	Home	Cell	Wo	Vork		
If Member does no	t have Guardian or	Guardian is not one	or both paren	ts:		
Parent Name #1		Email				
Address:						
Parent Phone:	Home	Cell		Work		
Parent Name #2		Email				
Address:						
Parent Phone:	Home:	Cell:		Work:		
 Emergency Contac	 t 1:	Relationship:				
Phone:	Home	Cell	Work	1		
Emergency Contac	t 2:	Relationship:		180		
Phone:	Home	Cell	Work			
Fraining/Work Pro	ogram:			See To		
Address:	181 B			A STATE OF THE PARTY OF THE PAR		
Contact:		Ph	one:	· · · · · · · · · · · · · · · · · · ·		
MassHealth Plan C	Coverage:	1				
W. 18.50	(Standard C	'ommonHealth)				

MassHealth Number: (Please attach a copy of the Member's MassHealth Card to this form)						
Transportation Company:	Phone:					
Transportation Company Contact:						
Primary Physician:	Phone:					
Address:						
Hospital Affiliation of Doctor:						
Preferred Hospital:	Phone:					
Dentist:	Phone:					
Specialist:	Phone:					
	Phone:					
-	clinician directly. All medical information al provided by guardians and residential staff					
Language/Communication:						
Significant behavior characteristics:						
Ability to protect self w/o assistance:						
Likely response to search efforts:						
Pattern of movement (if lost previously):						
Places frequented:						
Relevant Capabilities:						
Limitations:						

Preferences:	
Other Private Insurance Information:	
Health Insurance Carrier:	
Name of Primary Insured:	
Company:	
Group Number:	
Policy Number:	
Telephone Number:	
Parent/Guardian Signature:	Date:

^{*}This document will expire one year after signature date

Nashoba Learning Group Permission to Seek Emergency Medical Treatment

<u></u>	, the legal guardian(s) of
	authorize the staff of Nashoba
Learning Group to seek emergency n	nedical treatment for above mentioned person.
administering an Epi-pen, CPR or the	aid, calling Emergency Medical Personnel, e Heimlich maneuver if needed, transporting the est hospital, and authorizing hospital personnel to res.
* /	acted by Nashoba Learning Group as soon as this can process of getting needed medical attention for the
•	Personnel know the following information about my dical conditions, allergies, medication taken, and best th child/ward.)
Medical Conditions:	
Allergies:	
Medication taken:	
How to communicate:	
How to comfort my child/ward:	
Regular Doctor:	Phone number
Guardian Signature	Date

B. What each new Member should bring to the program

- Completed medical, emergency and release forms must be received by the first day a Member attends the program.
- If the Member receives medicine during the day while at the program, the Member/Guardian must send a supply to NLG in the original pharmacy bottle with the appropriate physician authorization. The Health Care Supervisor will inform the Member/Guardian when the medication supply is running low.
 - o If the medication is being sent in from the family, and not being transported by a residential program, all medication must be in a paper bag that is stapled shut.
 - o If the medication is being sent in from the family, and not being transported by a residential program, the parent/guardian must ask if the transportation driver and/or monitor is willing to be responsible for the oversight of the medication and give it to Program staff. If so:
 - The parent/guardian should hand the paper bag to this individual and this individual should give the paper bag to the Program staff
 - For antipsychotic/controlled substances: these will need to be delivered in person by either a guardian or residential staff so that nursing can compare medication counts with the individual who is dropping the medication off
- Daily lunch: members will require a lunch daily, except for days when the member is attending a lunch trip, or if the member has lunch supplies at the Program. This information will be decided on for each member with their Clinical staff.
- Edible reinforcers (if they are used).
- At least 1 change of clothes.
- 4 sets of exercise clothes (shorts, t-shirts, socks, underwear) and sneakers (if not worn daily to the program).
- Materials for ADLs (toothbrush, toothpaste, hairbrush, razor, shaving cream, face wash, soap, shampoo, etc. as applicable)
- Any diapers/pull-ups/wipes/menstrual care items, if applicable.
- Any AAC device or communication book that the Member utilizes.
- Please be sure to inform the Team/Clinical Leader assigned to the Member if there are certain items that should go back and forth with the Member each day (iPad, weighted vest, communication book, etc.)
- A wallet with spending money or debit card, whichever the Member currently uses in the community setting.

^{*}Annually, each family will complete the consent form below indicating if and how NLG will be managing member spending funds.

Consent for Shared/Delegated Management of Funds

Individual's N	Jame:
Address:	-000 0075 -000 0075
Guardian of I	Status: ndividual (Name):
Guardian of It	Assets and Account information:
1. My n	nember's funds will be utilized in the following way at NLG (check one):
\square M	y member will use <u>cash funds</u> supplied to the program from their guardian in \$20 increments. NLG will supply cash
funds to my m	nember ahead of planned trips and manage funds as detailed in the Member/Guardian Manual. The maximum amount
that my memb	per will carry on them at one time will be \$50.00 unless explicit approval is given prior to a trip.
\square M	y member will use a debit card or pre-paid Gift Card; they will keep their wallet on them at all times and bring it home
at the end of t	he day. NLG will not manage my member's funds.
□М	y member will use a debit card or pre-paid Gift Card; NLG will keep their wallet (including card) in a secure place and
1.3 (1.5)	ipt records. NLG will supply my member their wallet ahead of planned trips (detailed in the Member/Guardian
Manual).	
2. For t	hose who checked off Box 2 or 3 above; please check the box below if applicable:
	LG will store emergency cash funds for my member in the event that electronic payment options do not work or are not
an option. In t	his case, NLG will supply these funds to the member's wallet (at a maximum of \$50 at one time) and my member will
U.S. 1977 1971 1971 1971	these funds prior to leaving for the trip. NLG will manage these funds in accordance with the policy detailed in the
	dian Manual and notify guardian of any issues with electronic payment methods.
Additionally,	my member will receive support as needed in financial management in the following ways:
2000	
	presentative of NLG agrees to assume responsibility for the management of (member's) funds in the manner described
	e and according to NLG Funds Management Policy (found in the Member/Guardian Manual).
	member will work on acquiring money management skills through their associated objectives outlined in their
	P. These objectives were determined through their ISP Financial Assessment and Service Needs Assessment.
	eeded, NLG will support my member in utilizing their funds within the community setting (securing, carrying, paying
	on).
	G is managing my members funds
	My Member will have access to their wallet prior to, and during all community outings.
	o If NLG is managing my member's funds, I will receive receipts from the program on a monthly basis.
•	 My Members funds will be stored in a safe location (locked storage room/office).
For more	detailed information about funds management, please review NLG's Funds Management Policy in the
Member/	Guardian Manual.
I understand ti	hat I may withhold/withdraw my consent at any time without threat of punishment for promise of special reward, and
understand tha	at this consent expires one year from the date signed.
On behalf of	, I authorize NLG to assist in the management of the funds they use while at
NLG.	
Individual/Gu	ardian: Date:

If NLG is responsible for managing spending funds, as indicated by the above consent, spending funds will be managed using the following policy.

Member Funds Management Plan

Objective: To securely receive and document the use of, each Member's personal funds while they are in session at NLG's Adult Program.

Definition of Relevant Terms:

- *Member Funds* Funds received from a Member, their Parent/Guardian, or their Residential staff for use by that Member while the Member is in session at NLG's Adult Program. These funds are the personal property of the Member.
- *Member Debit Card* A bank debit card in the Member's name, or their parent/guardian's name, and possession for use to make purchases utilizing funds in their bank account and, as needed, deposits of funds into their bank account.
- *Member Funds Provider (MFP)* The individual or institution responsible for providing Member Funds to NLG. This is usually the Parent/Guardian but could be the Member, or staff of the Member's Residential agency.
- *Group* A group of approximately 10 Members supported by a set group of individuals consisting of the following NLG staff positions; (1) A Clinical Leader (CL) or Clinical Assistant (CA) who is the parent/guardian and agency liaison responsible for the day to day programming oversight and reporting for each Member in their Group; (2) A Team Coordinator (TC) who facilitates material set-up for the Group as well as assisting the CL with the training of staff on the Member's in the Group, and provides direct instruction of Members in the Group as needed, and, (3+) Team Instructors (TI) who are the NLG staff who are trained in the programming of, and work directly with, individual and small groups (2 or 3) of Members in that Group. The number of TI's is dependent on the staff to Member ratio for the Members who make up the Group.
- Chain of Custody of Funds Form (CCFF) Occasionally, MFP's send Member Funds in the form of a check payable to NLG to be converted to cash for use by the Member. As this process requires these funds to move through multiple NLG staff, other departments within NLG (Accounting) and other NLG locations to manage the transaction from receipt of the check by NLG through to receipt and logging of cash by the Program Administrator, a Chain of Custody of Funds Form has been created. This form requires a signature from the person who takes receipt of the funds during each stage of the process. The completed forms are filed in the Accounting Department.
- *Member Funds Log* A log maintained by NLG's Program Assistant (PA) to record when, how much, and by whom the Member Funds have been received.
- *Member Funds Binder* A binder kept and maintained by the PA for each Group. Each Member in the Group has a section in the binder with the following information; (1) Member Funds Logs for that Member and (2) An envelope with the balance of the Member Funds currently held in the care of the PA for that Member which ties to the most recent balance on that Member's Funds Log.

- *NLG Member Wallet* where each Member keeps the portion of their Funds retrieved when going into the community while in session at NLG. This could be in the form of a wallet, a purse, or a pocketbook.
- Member Spending Logs A log maintained to track Member spending while they
 are in session at NLG's Adult Program. Each Member has their own Spending Log
 that is maintained on Excel. Separate Member Spending Logs are maintained for a
 Member's Cash transactions and Debit Card Users: Cash Emergencies transactions
 (if applicable). Spending Logs are maintained electronically with Microsoft Excel.
 Each Member has their own Spending Log excel spreadsheet. Spending Logs are
 separated by Group.
- *Member Spending Log-Cash* includes the date and amount of Member Funds retrieved from the PA, the date, amount and where the Member Funds were spent, and the current balance of Member Funds in the NLG Member Wallet.).
- Member Spending Log-Debit Card Users: Cash Emergencies is only maintained if the Member is unable to use their debit card, whether it be because the location does not accept their card or if their card does not work at the time, and they will use emergency cash that is stored in the Member Wallet. Staff will assist Members when using cash. NLG does not maintain a Debit Card Member Spending Log for any Members who use their Debit Card for purchases in the community. Debit Card funds are managed through Member's parent/guardian.
- *Member Spending File Bin* Each Member has their own folder in a file bin that houses; (1) All receipts received for purchases made by Members, both Cash and Debit Card purchases and (2) A pouch that holds Member's change from Member's wallets when the coins need to be converted using a coinstar change conversion machine (see *Maintaining Member Funds held and transacted using Cash* below). This File Bin is kept in the PA's office, which is locked outside of program hours.

Member Use of Member Funds and/or a Member Debit Card While at NLG's Adult Program:

Members transact personal business using cash or a debit card for any or all of the following activities. Which, if any, of these activities a Member takes part in is dependent on their schedule, individual programming requirements, behavioral and medical needs, interests, and their Member Funds available while in session at NLG's Adult Program.

- Grocery and Personal Care Shopping: to purchase items at the grocery store for snacks, lunches, reinforcers, and/or incidentals related to daily living skills (deodorant, toothpaste, toothbrush, etc.) as appropriate during in service program hours while at NLG's Adult Program.
- Restaurant: to eat at a restaurant or order take out from a restaurant and transact payment for their order including tip (if applicable) during in service program hours as appropriate while at NLG's Adult Program.
- All Other Community Activities: to make purchases while out in the community (such as an ice cream, fee to attend an activity at a gym, or popcorn/candy at a movie, etc.) as appropriate during in service programming hours while at NLG's Adult Program.

Receipt of Member's Funds by NLG Staff:

A Member's Funds come in to NLG via three (3) modes:

- 1. *In Person*: The Member's Parent/Guardian delivers cash to the Program Administrator/Assistant. It is also possible that if the Program Administrator is not available when the Parent/Guardian arrives, the Member Funds are given to the Program Director (PD), Supervising Clinician (SC) or the Member's CL or CA who would then deliver the payment to the Program Assistant.
- 2. *Via Backpack*: The Member's Parent/Guardian or Residential Staff put cash or a check payable to NLG in the Member's backpack and the CL or CA or TI working with the Member retrieves it from the backpack and delivers it to the Program Assistant.
- 3. Via USPS Mail to NLG's 10 Oak Park Drive, Bedford, MA location: The Member's Parent/Guardian sends a check payable to NLG in the mail to NLG's Accounting Department located at 10 Oak Park Drive, Bedford, MA 01730.

For modes #1 and #2 above, receipt of cash or check are administered as follows:

- Receipt of Cash: The PA records the date received, amount received and initials the transaction to acknowledge the transaction on a Member Funds Log for that Member.
- Receipt of Check payable to NLG: The Program Administrator documents receipt of the check on the CCFF form and initiates the CCFF process to obtain the cash from the Accounting Department. The last step in this process is the Program Administrator's receipt of and final signature acceptance of the cash on the CCFF. The cash is then added to the Member Funds Log by the PA.

For mode #3 above, receipt of a check directly by Accounting is handled as follows:

1. Receipt of Check payable to NLG by Accounting: The same process is applied as is noted above in Receipt of Check payable to NLG only the initial receipt of the check is recorded on the CCFF by the individual in Accounting who receives the check (usually the Controller). As stated above, the last step in this process is the Program Administrator's receipt of and final signature acceptance of the cash on the CCFF. The cash is then added to the Member Funds Log by the PA. A copy of the completed CCFF form is kept in a binder in the PA's office.

Storage and Maintenance of Member Funds kept in Cash at NLG's Adult Program:

Member's Funds (once converted to cash if required) are kept in 2 places as follows:

- 1. *Member Funds Binder* Maintained by the PA and secured in the PA's office which is locked outside of program hours. Most of a Member's Funds are kept and secured here. The PA will check Member's wallets before the Group leaves for a community trip to see if more funds are needed by any Member. The PA then pulls the amounts required for each of those Member's from that Member's section in the Member Funds Binder and documents this transaction on the Member's Funds Log. The PA then adds each Member's Funds to their NLG Member Wallet (see below) and documents this transaction on each of those Member's Spending Logs.
- 2. NLG Member Wallet As noted above, once signed out of the Member Funds Binder (see above) each Member's Funds are placed in their Member Wallet by the PA. These funds are in each Member's Wallet when they are retrieved by a staff member from the Group to go into the community. Usually a Member's Funds are withdrawn from the Member Funds Binder in \$20 increments unless it is expected

that the purchases to be made by the Member that day will be greater than this amount. Members will not carry more than \$50 in their wallets at any given time. Members will have access to their wallets prior to leaving for any community outing and will return their wallets to a secure location (locked storage closet) upon return if NLG is storing the member's wallet. If member brings wallet to and from the program, member will keep their wallet on their person at all times at the Program.

Member Use of, and Tracking of, Member Funds:

The PA is responsible for maintaining all Members' transactions and receipts on each Member's Spending Log. The PA will be responsible for ensuring the receipts have been obtained, transactions have been appropriately recorded, and balance of the NLG Member Wallet ties to the Member Spending Log.

- Maintaining Member Funds held and transacted using Cash: Each time a Member uses money from their NLG Member Wallet, a receipt is obtained for the purchase. This receipt is then filed in that Member's folder of the Member Spending File Bin and the amount of the purchase is recorded on the Member Spending Log and deducted from the balance. If a receipt was not provided by the vendor, a receipt will be completed by the PA, stating the date of the purchase, business name and location of the purchase, item(s)/services(s) purchased, and amount of the purchase. If change in coins was obtained during the purchase and the NLG Member Wallet does not have an area where coins can be secured (such as a change purse), then the coins will be put into that Member's zipper pouch in the folder for that Member where change in coins can be secured. When change accumulates resulting in no room in the wallet (several dollars' worth of change), this change will be converted back to dollars at a coinstar or equivalent. A receipt will be logged documenting the coinstar transaction and associated surcharge and cash returns will be added to members overall spending log at the time of return.
- Addressing Discrepancies: In the event a Member's funds in their wallet or in their Spending Log Binder are either lower or higher than the expected amount after balancing their wallet, the discrepancy will be noted in their Spending Log, and the program will audit all Member funds to identify the discrepancy. If the discrepancy is resolved, the note in the Spending Log will be updated, and the funds will be returned if an overage/underage was identified. If the discrepancy cannot be resolved and an underage was identified, the program will reimburse the Member's funds; if an overage was identified, we will add a line to the Member's spending log that money was dispersed to their account. This money can be used by the Member as normal, and if the discrepancy is resolved at a later date, the program will reimburse the amount to the appropriate party.

Supporting a Member's use of a Debit Card:

As noted above, each Member who uses a Debit Card to transact business during in session hours maintains responsibility for that Debit Card at all times. NLG does not document or maintain a Spending Log regarding Debit Card use. A receipt is obtained by the PA for Debit Card uses, and will file it in that Member's section folder of the Member Spending Binder File Bin.

Procedure for Obtaining Additional Member Funds:

Member Funds are obtained from MFP's in the following ways:

- 1. Sent or Brought to the Program at Regular Intervals some MFPs will send a set amount of Member Funds to NLG on a weekly, monthly or quarterly basis.
- 2. As Requested some MFPs will wait until they receive an email from the PA informing them that the Member's Funds are running low and they need to send money to replenish the Member Funds.

C. Wellness Policy – When a Member should stay home

In an effort to offer an environment where optimal supports can be provided, this wellness policy has been created to provide guidelines to protect the health of all Members and staff at our Adult Day Program. When making a decision about whether or not an individual is able to attend the program, we ask that the Member/Guardian or caretaker at the Member's home environment exercise judgment when considering coming to/sending the individual to the program who appears to be ill. Please be aware that in the event of a communicable disease outbreak or in the event of a pandemic, guidelines for sending a member to the program are subject to change. NLG will ensure to provide immediate communications and guidelines if that were to occur. Below are conditions that require a Member to stay home and the requirements for returning to the program:

- A Member with a fever of 100 degrees or above must be kept home until their fever has been gone for 24 hours plus one subsequent program day.
- A Member placed on antibiotics must remain home for at least 24 hours after the medication begins.
- A Member with discharge from any orifice that shows signs of infection (thick, green, etc) should be kept home until the discharge has been clear for 24 hours and is cleared to return by a medical provider.
- A Member with symptoms of conjunctivitis should remain home until symptoms are gone.
- A Member with wet or oozing rashes or sores should remain home until symptoms are gone or cleared to return by a medical provider.
- A Member who has been vomiting or had two (2) or more incidences of diarrhea within the previous 24-hour period must be kept at home until they have been symptom free for 24 hours plus one subsequent program day.
- A Member with head lice must be kept home until inspection by a medical professional shows no remaining nits.
- A Member in obvious physical discomfort that would interfere with their ability to participate in programming should remain home until their symptoms are lessened and/or guidance on safe return and restrictions are provided by a physician.

If a Member exhibits any of these symptoms while at the program, the Guardian or caretaker will be called for immediate pickup. If the Guardian or caretaker cannot be reached within 30 minutes, the Member's emergency contacts will be called. It is expected that the Member will be picked up within an hour's time. If a Member is dismissed from

the program due to illness, they must remain at home for one additional program day after they are symptom free for 24 hours. For example, if a member has a fever at 11 am on Tuesday at the program and remains symptom free from 11:30 am Tuesday to 11:30 am Wednesday, the earliest they can return to the program is Thursday morning.

D. Prohibition of Recording Devices

Subject: Prohibition of Recording Devises on School/Program Premises - includes GPS trackers, watches or standalone devices

At Nashoba Learning Group, we prioritize the safety and well-being of all our students/members while upholding their right to privacy and confidentiality. To maintain a secure and conducive learning environment, we would like to share our new policy regarding the use of recording devices on school/program premises.

While we understand the importance of GPS devices for tracking the whereabouts of your child/ward and ensuring their safety, we must emphasize that any device used for this purpose should not have the capability to record audio, video, or any other form of data. This is due to the sensitive nature of the information shared and discussed within the school/program environment, including but not limited to classroom discussions, student/member interactions, and teacher-student/member interactions.

Recording devices, including those integrated into GPS trackers, watches or standalone devices, pose a significant risk to the privacy and confidentiality of students, members, staff, and visitors within the school. Unauthorized recording may inadvertently capture confidential information or conversations, leading to breaches of privacy and potential legal implications.

Therefore, we kindly request all parents and guardians to adhere to the following guidelines:

GPS devices used for tracking the location of your child/ward are permitted on school premises.

However, these devices must not have the capability to record audio, video, or any other form of data; or if they do have that capability, it needs to be turned off during school/program hours. You must also notify your clinical team if your child/ward is wearing a device that has those capabilities.

Any device found to be in violation of this policy will be confiscated and the parent/guardian will be contacted.

We appreciate your cooperation in ensuring the privacy and security of all

individuals within our community. If you have any questions or concerns regarding this policy, please do not hesitate to contact the school/program administration. Thank you for your attention to this matter.

E. Staff Roles and Sample Program Schedules

Each Member is part of a group of 8-12 Members. All staff of the NLG Adult Day Program receive intensive and on-going training in the principles of Applied Behavior Analysis. In addition to the oversight and program development provided by the Program Director, a Supervising Clinician or Behaviorist (Behavior Specialist), and the Health Care Supervisor, each group of Members will have daily interaction with the following NLG Adult Day Program personnel:

One (1) Clinical Leader or Two (2) Clinical Assistants

The Clinical Leader/Clinical Assistant acts as a case manager for each of the Members in a group and is part of the Member's IDT. They provide daily coordination, implementation and monitoring of the Members' programming. The Clinical Leader/Assistant oversees the staff working directly with the Members (see Team Coordinators & Team Instructors below). They are responsible for summarizing the Members' data, preparing monthly programming updates and summary reports, and working with the Program Director and Supervising Clinician to complete assessments and behavior plans. The Clinical Leader/Assistant works with the Program Director, Supervising Clinician and Health Care Specialist in the preparation of each Member's quarterly updates and summary reports. A Clinical Leader is someone who is pursuing a BCBA credential through a Masters level program in Applied Behavior Analysis or has a BCBA.

One (1) Team Coordinator (if group is managed by One (1) Clinical Leader as mentioned above)

The Team Coordinator oversees programming for each member of the group. They are fluent with the members' learning styles and behavior plans. Team Coordinators assess member skill sets and determine which programming objectives are appropriate and determine how to meet these objectives. Team Coordinators are an integral part of staff training for the group.

Three to eight (3-8) Team Instructors

The Team Instructors provide the direct services and behavioral support to the Members (in whatever ratio is specified by the Member's funding). Team Instructors are fluent in the behavior plans and learning styles of each of the 8-12 Members in the group. The number of Team Instructors assigned to a particular group of Members is dependent on the ratio of staff supports required for those Members in the various programming and activities they take part in throughout the day. Team Instructors transition with Members through all programming activities, including: exercise, skills development, community trips and job sites (if applicable).

One or Two (1-2) Program Assistant program-wide

Program Assistant personnel provide the group with additional support for the general daily care of the Members and their programming including additional supports required in-house when a Member requires additional staff to work through a behavior or when Members are in the community. Program Assistant staff also assist Team Instructors with lunch coverages, bathroom breaks, or material creation as needed. Program Assistant staff support the greater organization through creating the daily staffing schedule and running onboarding and off boarding of members from buses. This role provides program support to the administration through additional tasks such as filing, accounting for spending funds, organizing community materials, or annual consents.

Below is a sample weekly schedule of activities. Each activity block is associated with learning content in a different skill area. Your members relative schedule will vary depending on group and funding structure/need.

Skills Development- Math, money, safety, nutrition, inventory, Disabled Persons Protection Commission, and Human Rights Skills.

Group Activities/Treats and Keepsakes- Laundry, Janitorial, Volunteering skills

Mail and More- Clerical Skills

Social and Communication Skills- Social communication skills, group activities, reading, crafting, and using technology

Community- Volunteer sites, paid employment, and group based community trips (grocery store, restaurants, shopping etc). These are not in the sample schedule below as they change week to week and replace the programming schedule when applicable.

	Mor	nday	Tue	sday	Wednesday		Thursday		Friday						
9:15-9:30	Calendar		Calendar		Calendar		Calendar		Calendar						
9:30-9:45															
9:45-10:00	Social and Communication Activities		Skills Development		Social and Communic		Skills Development								
10:00-10:15									Exercise A	Mail and					
10:15-10:30					ation Activities	Mor			More						
10:30-10:45						Activities									
10:45-11:00		Ĭ	Social and Communication		Treats and Keepsakes		Group Activities		Social and						
11:00-11:15	Skills De	velopment													
11:15-11:30	akins Development			vities .	Trouto dila	(Copposition	psakes Group Activities		Communication Activition						
11:30-11:45		_	1												
11:45-12:00				Ī					4						
12:00-12:15	. in	nch	Lunch		Lunch		Lunch		Lunch						
12:15-12:30															
12:30-12:45															
12:45-1:00		Treats and Keepsakes													
1:00-1:15	Exercise A		Exercise B	Group Activities	Skills Devi	elopment	ment Exercise B	se B Mail and More	Skills Dev	/elopment					
1:15-1:30	Excrosory		Exercise B			10.				6					
1:30-1:45															
1:45-2:00	- Mail and More														
2:00-2:15			Mail and More		Group A	Group Activities		Social and Communication Activities		Group					
2:15-2:30					Group					Activities					
2:30-2:45															
2:45-3:00	Chores/Journal		Chores	/Journal	Chores/Journal		Chores/Journal		Chores	/Journal					
3:00-3:15	Chores/Journal		Gilores/Journal		Olivies/Journal		Onorcasouniai		Onores/Sournal						

F. Staff Training

Nashoba Learning Group provides training to all new staff. All new staff take part in orientation training during their first month on the job. This training consists of an introduction to the facility and NLG's Adult Day Program policies and procedures, group orientation trainings with guided notes on a variety of topics (followed by an orientation post-test tests to ensure content retention), and structured, on-the-job Member training overseen by Clinical Leaders/Assistants or Program Administrator for Team Instructors and Program Assistants. Within the first 6 months of working at NLG, all new Team Instructors complete 40 hours of training toward getting credentialed as a Registered Behavior Technician (RBT). For Clinical Leader/Assistant positions, on the job training is overseen by the Supervising Clinicians and Program Director. All positions include weekly to monthly meetings or trainings for ongoing development in their roles. All staff are required to complete a minimum of 24 hours of trainings per year in accordance with NLG, DDS, HHS, and Mass Health standards. Throughout the year

Training topics include instruction in:

- Features of autism;
- Concepts and principles of Applied Behavior Analysis (ABA);
- ABA methods of instruction and skill acquision;
- Best practices in motivating others: how to be reinforcing;
- Respondent and operant behavior;
- Reinforcement and punishment;
- Functions of behavior;
- Behavior management strategies;
- Implementing behavior management procedures;
- Group instruction and teaching methods;
- Working as a team-staff roles and responsibilities;
- Prompting and error correction;
- Operationally defining behavior and collecting data;
- Performing functional assessment of problem behaviors and developing behavior management plans;
- Conducting assessments and preparing reports;
- Supporting individuals in the community;
- Working with families/guardians, other agencies and MassHealth/DDS;
- Safety and Emergency Procedures;
- Crisis Prevention Training -Strategies for Limiting Violent Episodes (SOLVE);
- Medication Administration Protocols;
- Blood-borne pathogens;
- First Aid;
- CPR;
- Seizures and allergy/anaphylaxis/EpiPen procedures
- Professional behavior and ethics
- Understanding ableism, neurodiversity, and assent-based care

A critical component of training is hands on practice of skills with immediate coaching and feedback provided. In addition, training includes assigned reading; didactic instruction; and testing.

In addition to orientation training, staff members attend an average of 2 to 4 hours per month of training. This training is generally held immediately after Members leave for the day.

Five (5) days per year (every 2.5 months), all staff participate in a half day of training activities as well.

In addition to covering multiple topics related to specific ABA teaching techniques and NLG protocols, training, certification and recertification in CPR, First Aid, and crisis prevention is also provided during these sessions.

All full-time direct care staff members take part in an average of 24 - 50 hours of training per year.

G. Fund Raising

Nashoba Learning Group (NLG) conducts several fundraising events throughout the year. These events help us expand our programs and provide additional resources and materials to individuals with autism in our program, beyond what is covered by each individual's tuition.

Your participation in these fundraisers is entirely voluntary. While we greatly appreciate your involvement, there is no obligation to participate. The decisions regarding how to allocate the funds raised will not be influenced by whether a family has participated in the event.

NLG is extremely grateful when members of our community take the initiative to create additional events that generate funds for us. The following policies are designed to ensure that these events are successful and contribute positively to our fundraising efforts. To avoid scheduling conflicts and to ensure that activities and venues align with NLG's mission and values, written permission must be obtained before soliciting funds or organizing fundraising activities on behalf of NLG outside of the regularly sponsored or coordinated events. Requests should be sent in writing to

<u>Development@nashobalearninggroup.org</u> and must include the following information:

- a. event idea (e.g., auction, golf tournament)
- b. proposed event name
- c. proposed event date
- d. targeted audience (e.g., immediate family, business contacts)
- e. total anticipated funds raised for NLG, including the revenue breakdown (for example you might estimate 100 attending at a fee of \$100 each).

Please note that any costs incurred in the planning, managing, and implementing an independently run fundraising event are the responsibility of the event coordinator(s) and

will not be reimbursed by NLG. If the revenue in section (e) above is expected to be net of any costs associated with the event, please specify the net funds projected to be collected and sent to NLG. The organization's management will review each request and communicate with the event coordinator about the feasibility of the proposed event.

Funds raised on behalf of NLG must be sent directly to NLG unless the event coordinator is a separate 501(c)(3) nonprofit organization with its own federal tax-exempt identification number. Funds solicited on NLG's behalf that are sent directly to us can only be used for NLG's benefit. If you wish to organize a fundraising event that also supports other organizations; in that case, NLG can only accept the portion of the funds raised on its behalf and cannot act as a clearinghouse to direct funds to other organizations.

To ensure that NLG-sponsored events do not compete for the same primary donor populations, independently organized fundraising activities should not primarily solicit donations from NLG staff, parents, or guardians of NLG students or members. It is the responsibility of the independent event coordinator to determine the need for, recruit and train volunteers required for their event.

Nashoba Learning Group is a nonprofit 501(c)(3) organization and contributions made to us are tax- deductible to the fullest extent allowed by law. Written tax receipts shall be issued for all donations.

H. Member Records

Member records will be maintained for seven (7) years following a Member's discharge after which time they will be destroyed. Member records are confidential and will only be accessed by, or provided to, the following:

- 1. Staff members and contractors who are responsible for providing the Member's programming and health care;
- 2. People authorized in writing by the Member or Member's Guardian to receive such information:
- **3.** Government agencies authorized by law to have access to such information.

Each Member's complete record consists of the following:

- Admissions information: Including the referral information received, application, guardian questionnaire, NLG assessment(s), observations and admissions notes, NLG Interdisciplinary Team Review and determination.
- Current picture of the Member;
- Copy of legal guardianship paperwork (if applicable);
- Copy of MassHealth card;
- Initial individual severity profile (reported annually);
- Physician referral for day habilitation services;
- Consents and information (updated annually): Including an emergency information card, permission to seek medical treatment, consent for emergency restraint, permission for community outings, authorization identifying approved individuals

- Member can be released to, consent for use of Member's image, likeness and audio for programming purposes, website, publications or promotional materials.
- Medical information: Including an annual physical report from the Member's physician, certificate of immunization, verification of dental services, updated physician medication orders, and medical notes and summaries.
- Service Needs Assessment;
- Initial and ongoing Behavior Management Plans and Emergency Protocols; peer review documentation
- Initial and ongoing Day Habilitation Service Plans (DHSP) / Individual Support Plans (ISP);
- DHSP/ISP monthly, quarterly, semi-annual and annual summaries as required;
- Other correspondence and notes specific to each Member.

In addition, an emergency binder is maintained for each group. These binders have a section for each member that includes a current picture of the Member, a copy of their current Emergency Information Card and a copy of their current Permission to Seek Medical Treatment consent. This folder travels with each the group while in the community and would be provided to emergency personnel in the event of an emergency.

I. Statement of Member Human Rights

At Nashoba Learning Group, our mission is to assist individuals with autism in gaining the skills they need to participate in the life of their family and community. Our ABA teaching methods rely on motivating Members to learn through functional programming, positive reinforcement and behavior management supports. In all of our interactions with Members, we strive to protect their rights. These rights include:

- The right to effective behavioral treatment;
- The right to have their dignity protected;
- The right to physical safety and protection of their health;
- The right to caring and compassionate treatment;
- The right to self-determination;
- The right to freedom of choice;
- The right to be free from discomfort;
- The right to receive services in the least restrictive effective setting;
- The right to be treated in a fashion appropriate to their age level and in accord with the practices of the local community;
- The right to engage in activities and social interactions appropriate to their chronological age to the extent that is safe and practical;
- The right to physical exercise and enjoyable leisure activities;
- The right to have their personal belongings respected by others;
- The right to privacy;
- The right to access their own records (as appropriate);
- The right to informed consent by them, or on their behalf, for all treatment;
- The right to refuse to participate in any research efforts;

• The right to be free from abuse, neglect, humiliation, retaliation, and financial or other exploitation.

It is understood that the effectiveness of certain behavioral procedures requires controlling access to specific activities. When this is the case, special attention will be provided to ensure that opportunities to access those activities are provided. All members get formal training on their human rights annually and if appropriate, may have specific programming geared toward understanding and applying these concepts.

J. Acceptable Network Use and Security Policy for Member Electronic Devices

The NLG Adult Day Program has computers for Members to access for programming and reinforcement. We also realize that many of our Members may want to bring their own computers or electronic devices for reinforcement or have portable electronic devices that facilitate augmentative communication. As a matter of convenience, NLG is happy to provide Members with access to its wireless network for these personal devices while at the program. To ensure that all personal and confidential information is safeguarded and to prevent any security compromised or vulnerable electronic devices from infecting NLG's network or any other computers or devices on NLG's network, we require that the Member/Guardian ensure adherence to the following policies and protocols for any Member devices that may/will utilize NLG's wireless network:

- 1. For computers, adequate anti-virus protection must be installed, enabled and renewed to ensure it is always up to date.
- 2. The device(s) will not have any peer-to-peer file sharing software installed such as, but not limited to; LimeWire, Kazaa, BitTorrent, eDonkey, FileHippo, or other similar file sharing software.
- 3. To allow NLG's Information Technology (IT) department to create a user account on any Member device that may/will be connected to the network and that this account will be used for the sole purpose of periodic monitoring of the computer to ensure it has active and up-to-date antivirus protection and that there is not Peer-to-Peer or other file sharing software installed and that you agree not to disable this account while a Member in NLG's Adult Day program unless this device is no longer to be utilized while at the program.
- 4. The Member/Guardian will notify NLG's IT department if they suspect that their device may be infected with a virus, spyware, malware, or is otherwise security compromised and will not connect the suspected device to NLG's network until such time as the IT department has cleared the device for use on the network.
- 5. The Member/Guardian will not keep illegal or illicit content on any device to be connected to NLG's network such as, but not limited to; material that is pornographic in nature, software for which the Member/Guardian does not hold a valid software license, or software content whose copy protection has been deliberately circumvented. Should it be determined that a Member's device has failed to comply with these requirements we will be required to disconnect access to NLG's wired, wireless or virtual private network until such time as it is determined that the requirements have been met.

IV. Policies and Procedures

A. Admissions Policy and Procedures

Admissions Policies

Nashoba Learning Group (NLG) shall maintain on permanent file this written description of admission procedures. A copy of these procedures will be provided to placing agencies and the guardian(s) of any candidate referred for placement.

NLG's Adult Day Program is an integrated life skills training, job training, employment, recreational and day habilitation program for adults with Autism. NLG's Adult Day Program provides adults more profoundly impaired by Autism with the behavioral and functional supports required to help them maximize their independence in the many environments they encounter in their daily life. The Program provides Members with job training, employment opportunities (if appropriate) as well as comprehensive functional skills development programming on-site and in the community.

NLG's Adult Day Program has been approved to operate in the state of Massachusetts as a day habilitation program by MassHealth, the state Medicaid agency, and by the Department of Developmental Services (DDS) to provide Individual Supported Employment services, Group Supported Employment services, Community Based Day Supports, and supplemental day habilitation supports required for our particular population.

NLG's Adult Day Program welcomes Members with autism and related disorders and does not discriminate in admission or administration of its policies on the basis of gender, gender identity and/or expression, race, creed, color, religious affiliation, socioeconomic status, sex, sexual orientation, sexual identity, national or ethnic origin. NLG does require evidence of secured funding prior to admitting any Member.

NLG shall ensure that the candidate, their guardian(s), DDS and others, as appropriate, are provided reasonable opportunity to participate in the admission process and decisions.

An admissions study shall be completed before a Member is accepted into the program. This admissions study shall contain information regarding a candidate's referral, all relevant intake data considered and reason for accepting or declining the candidate. NLG will require some or all of the following as part of the admissions study process:

- A written assessment of the candidate's social skills completed within the prior twelve (12) months;
- A written assessment of the candidates medical, mental, functional, and developmental status completed within the prior twelve (12) months;
- A home assessment that includes a family history, the person's developmental history, and a description of the candidate's adaptation to the home environment completed within the prior twelve (12) months;

- Any existing or past functional assessments, behavior plans, summarized behavior data, and/or reports and graphical summaries from Applied Behavior Analysis (ABA) programs;
- A record of all past and present immunizations and diagnostic tests;
- Recommendation by a physician of the candidate's need for day habilitation services;
- Written approval that, upon review for admission, the NLG Adult Program will be provided with contact information and permission to discuss, receive and share information with the candidate's personal physician.

Intake may include observation of the Member in their current placement and/or assessment of the applicant at NLG. Other relevant information (some of these may be documents submitted to satisfy certain requirements above if done within the prior 12 months) to be provided to NLG's Adult Program include, as applicable: a diagnostic evaluation, prior Individual Education Plans or Service plans and recent progress reports; any relevant reports from treating clinicians, including: behavior analysts; psychologists; and, physicians, including pediatricians, neurologists, psychopharmacologists, and psychiatrists.

For candidates with complex medical needs, NLG will work with the candidate's physician and guardian(s) to determine whether and how NLG's Adult Program can serve them.

NLG also requires permission to contact the candidate's current and/or prior placement(s).

NLG's Adult Program Interdisciplinary Team, consisting of a combination of four (4) individual's in the roles of Program Director/Behaviorist/Supervising Clinician (behavior specialist), Health Care Supervisor, Developmental Specialist, and Occupational, Physical, or Speech and Language Specialist, will review all information received and determine whether NLG's Adult Program is appropriate for the candidate. This Team will also determine if the candidate may be appropriate for the program with a recommendation for additional supports including recommendations for personnel requirements and timing.

In a manner appropriate to the Member, NLG will make clear its expectations and requirements for behavior, and provide the candidate with an explanation of the program's criteria for successful participation in the program. If during the Admissions process it is determined that the potential Member may require it, NLG will develop a preliminary behavior management plan to be effective when the individual begins at the program and a comprehensive behavior plan based on functional behavior assessment (FBA) within 60 days. NLG will initiate a functional behavior assessment and behavior planning process for any Member during their tenure at NLG's Adult Program if the Member exhibits new behaviors that present a clear and present danger to self and others or if the behaviors included in the existing plan increase to a level indicating that the plan requires review.

Within the initial ninety (90) days of enrollment, for members with MassHealth funding, NLG will complete a comprehensive Service Needs Assessment, and Day Hab Leveling Tool in order to assist the Interdisciplinary Team in the development of their DHSP or

propose modifications to an existing DHSP so that NLG can satisfactorily deliver services that will enable the Member to achieve their goals. The SNA, DHSP, and leveling tool will all be submitted to Mass Health within 60 days and every 2 years, in order to secure each member's funding.

Upon request, NLG will provide a written statement of the reason for the refusal of admission to the guardian(s) and/or the referring agency.

Admissions Procedures

NLG does not have a list of candidates waiting for admission whereby the next candidate on the list is the next Member to be accepted. Rather, NLG follows the procedural steps listed below:

- 1. Guardian(s) or DDS representatives interested in pursuing admission for potential Members are invited to visit our program. If they remain interested in seeking admission, a referral packet should be submitted.
- 2. When an opening becomes available, NLG will review current applications to determine which candidate(s) appear to be appropriate for the particular opening.
- 3. NLG's Adult Program will contact the DDS representative and/or the Guardian for candidate(s) who may be appropriate for admission to determine if the candidate is still interested in/available for placement in NLG's Adult Program.
 - 4. NLG will arrange a time to observe the candidate in their current placement.
- 5. If the candidate continues to appear appropriate for admission, then the Guardian(s) and DDS personnel are invited to return to NLG with the candidate in order for NLG's personnel to complete an observation of the candidate in multiple environments within the Program and review any additional information that had been requested of the Member or their Guardian. NLG will require that the potential Member's existing staff and/or Parent/Guardian be responsible to address any physical management requirements while on NLG's premises during this observation. At this time, NLG personnel will also provide the candidate's guardian with an explanation of the program's purpose and services, policies regarding Member rights and program costs and funding requirements.
- 6. Once all of the candidates' information is received, the Interdisciplinary Team will meet to review the information and determine if the individual is the best candidate for the opening available and will benefit from the services provided in NLG's Adult Program, may benefit from services provided in NLG's Adult Program with recommendation for additional supports, or is not appropriate for the program and/or opening available and why.
- 7. For candidates who will be offered placement, NLG personnel will contact the DDS representative and Guardian, if NLG had been in discussion with the Member and/or Guardian directly, with the Interdisciplinary Team's determination.
- 8. Once a Member is accepted into the program, the Member and/or Parent(s)/Guardian(s) and DDS are granted access to the *Member/Guardian Policies and*

Procedures Manual which will also be sent to the Member/Guardian as part of their Admissions package.

- 9. Once a potential Member is offered admission, NLG requires proof of appropriate funding for placement.
- 10. Prior to the Member's start date, documentation is required from a licensed physician of a complete physical examination that has been completed not more than twelve (12) months prior to the Member's date of admission into the program.

B. Communication with Outside Parties

Except as required by law, Nashoba Learning Group will not provide any information about a Member to any parties outside of NLG's Adult Day Program other than DDS or MassHealth, as allowed by regulation, without a Member's/Guardian's prior written consent.

C. Confidentiality

It is Nashoba Learning Group's policy to keep confidential all identifying information about a Member with the exception of information available by law to relevant agencies (DDS and MassHealth) or by the Member/Guardian's prior written consent to outside parties. Nashoba Learning Group adheres to the code of ethics established by the Behavior Analyst Certification Board.

We ask that you support the right of each Member in our program to confidentiality through adherence to the following guidelines:

- Do not discuss any other Member in our program with anyone in a way that could allow the identity of the Member to be surmised.
- Do not ask questions of NLG staff that would require them to breach our confidentiality guidelines to answer. Staff will be trained to refrain from responding to such questions.
- Do not assume any information that you have about a Member can be shared unless you have explicit permission from the Member/Guardian.

D. No Smoking Policy

Nashoba Learning Group is a no-smoking environment. There is no smoking/vaping in any of our facilities or on their grounds. We do not permit cigarettes, electronic cigarettes or other smoking/vaping paraphernalia in our facilities. Staff members, visitors, program Members, persons providing transport to Members and other associates are not permitted to smoke/vape on our grounds at any time even if they are in a vehicle. Staff members and program Members are not permitted to smoke/vape during program hours' even if they are out in the community and not on NLG grounds.

E. Cancellation, Emergency Closings, Early Dismissal and Delayed Openings

In the event that NLG cancels or delays the adult day program, in addition to posting the information on the official NLG website (www.NashobaLearningGroup.org) and the official NLG Facebook page, there will be notification via the following media outlets:

- WCVB Channel 5
- WBZ Channel 4
- WHDH Channel 7

In addition to the media, in the event that NLG cancels or delays the adult day program, a text message, voice message and email will be sent to all parents/guardians through the Parent Square Alerts system. Parent/guardians are automatically signed up to receive Parent Square Alerts. It will be the responsibility of the parents/guardians to update NLG if their email address or phone number changes.

To ensure the safety of our members and staff, NLG management will make a decision to close the program due to inclement weather and if a number of the school districts that students are coming from (approximately 1/3 or greater) are closed or a large number of the surrounding school districts are closed (such as Billerica, Burlington, Lexington, Chelmsford, or Concord) due to unsafe road conditions.

In the event that the program must be dismissed early for any reason, the parent/guardian will receive the alert notification, a message will be put on our website and each parent/guardian of members who are in attendance on that day will be called as soon as the decision is made to dismiss. If a member must be picked up at program, we will request that the parent/guardian pick up the member as quickly as possible (or the transportation company if that arrangement is made). If they cannot and/or we are unable to reach the parent/guardian, we will contact the other names provided on the emergency information card.

F. Fire Drill Procedures

The NLG Adult Day Program practices fire drill and emergency evacuation procedures once every quarter. Procedures for emergency evacuation are posted in each room in the facility for reference and the Program Director maintains a log of the date and time that a drill has been completed.

G. Health and Safety Procedures

Nashoba Learning Group's Nursing Coordinator for the entire organization is Jaime Breingan (Beckford), RN. Shelli works full-time and is available during program hours.

The NLG Adult Day Program follows Health and Safety procedures as outlined in the Adult Day Program Health Manual.

As noted above in NLG's Wellness Policy, the following are reasons for dismissal during program hours and the method for notification of Guardians. These are also emphasized in the Adult Day Program Wellness Policy notice provided by the Nursing Coordinator to Members/Guardians as part of the new Members packet sent to Members/Guardians prior to their admission date:

- 1. Temperature of 100 degrees or over (oral/ear/temporal temperature)
- 2. Disruptive cough or cough with fever
- 3. Suspected infection of eye, ears, nose, throat, skin, scalp
- 4. Severe abdominal pain or headache
- 5. Suspected communicable disease
- 6. Suspected Pediculosis (head lice)
- 7. Suspected fractures or any severe or disabling injury
- 8. Questionable need for sutures
- 9. Vomiting or diarrhea
- 10. Head injury

If a member exhibits any of the above symptoms, the nursing staff will call the Member's Guardian and/or residence to have the Member immediately picked up. Guardians will be notified using the Emergency Information Card, which is filled out prior to admission and updated annually thereafter. If the Guardian or residence personnel cannot be reached, then the emergency contacts will be notified. The Member will only be dismissed to the Guardian, approved residence personnel, or the emergency contacts listed on the Emergency Information Card. If an emergency contact with whom program personnel are not familiar picks up the Member, they will be required to show a photo ID.

NLG employees are provided with the training required to receive and maintain their certifications in First Aid and in CPR within three months of becoming employed at NLG's Adult Day Program.

As specified in that training, NLG always calls in Emergency Medical Personnel to transport a Member to a hospital, if such transport is needed. NLG staff will never drive a Member to a hospital because of the risk that the Member will need emergency treatment while en route. NLG staff will call Emergency Medical Personnel in any situation where the Member exhibits any signs of respiratory or cardiac distress, severe bleeding or any other significant trauma.

Finally, NLG follows procedures outlined in Members Individual Health Plans (IHP) where these are applicable. A Member with an IHP will only be accepted at NLG if we determine that we are able to implement the conditions required in the IHP within the scope of our program. It is possible that implementing an IHP may require actions by other Members attending NLG's Adult Program. For example, it is possible that we may ask that Members refrain from bringing in certain foods that contain specific allergens if we accept a Member with severe allergies that may lead to anaphylaxis as long as that restriction is not a hardship on the programming of any other Members in the program.

H. Preventative Health and Communicable Diseases

Members are required to receive an annual, comprehensive medical exam which includes ongoing assessment and care for any condition diagnosed by their medical provider such as hearing and vision screenings. Member's immunizations must be kept up to date according to the Department of Public Health requirement. It is the nursing department's responsibility to request from providers and guardians up to date documentation of all required medication paperwork in order to keep accurate records of this information.

It is the policy of NLG to comply with local, state and federal laws and regulations pertaining to the prevention and/or identification of communicable diseases. Subject to the foregoing, it is the intent of NLG to ensure that information regarding communicable diseases is available to all employees and Members that the rights of individuals are protected in as confidential and nondiscriminatory fashion and that appropriate prevention measures are utilized to provide for a safe work and programming environment. An employee or Member who has been diagnosed with a communicable disease will be subject to these policies and procedures in the same manner as employees or Members with any illness. A Member may be assured of continued participation if there is medical certification, if required, that the Member's condition does not present a significant risk to self, other Members, or other employees. A Member's health is personal and confidential. Only those for whom it is determined by NLG as essential to know will be informed of a Member's medical condition. It is the Member's, their Guardian's or their physician's responsibility to inform the Program Director or Health Care Supervisor in the event they have been diagnosed with a communicable disease. The nursing staff is responsible to review with the Member or Guardian all related policies, and, if appropriate, to notify the appropriate local authorities and/or the Massachusetts Department of Public Health concerning relevant communicable diseases. NLG reserves the right at its expense to require a medical examination and report in the event there is a dispute or uncertainty concerning a potential risk to self, other Members or other employees.

I. MRSA (Methicillin-Resistant Staphylococcus Aureus)

Staph is a type of bacteria commonly carried on the skin or in the nose of healthy people. About 25-30% of the U.S. population carries staph on their bodies at any time. Sometimes, though, staph can cause a skin infection that look like pimples or boils. Skin infections caused by staph may be red, swollen, painful, or have pus or other drainage. Some staph (known as Methicillin-Resistant Staphylococcus Aureus or MRSA) is resistant to certain antibiotics, making it harder to treat. Only a doctor can determine if you have a staph infection by doing lab testing.

Anyone can get a staph infection. People are more likely to get a staph infection if they have: skin-to-skin contact with someone who has a staph infection, contact with items and surfaces that have staph on them, openings in their skin such as cuts or scrapes, crowded living conditions or poor hygiene.

Staph infection can be prevented. Regular hand washing is the best way to prevent getting and spreading staph, including MRSA. Keep hands clean by washing them frequently with soap and warm water or use an alcohol-based hand sanitizer, especially after direct contact with another person's skin. Keep cuts and scrapes clean and covered with a bandage until they have healed. Avoid contact with other people's wounds and do not touch other people's cuts or bandages. Do not share personal items such as towels, washcloths, toothbrushes and razors. Sharing these items may transfer staph from one person to another. Keep your skin healthy, and avoid getting dry, cracked skin, especially during the winter. Healthy skin helps to keep the staph on the surface of your skin from causing an infection underneath your skin. Most importantly, contact your doctor if you have any kind of skin infection that does not improve.

For more information on MRSA, go to the Center for Disease Control web site. http://www.cdc.gov/ncidod/dhqp/armrsa.html

Any staff or Member presenting with signs of a skin infection are referred to their PCP for medical evaluation and treatment as soon as possible. A note from the attending physician is required before the employee or Member is able to return to the program.

All staff at NLG's Adult Day Program are required to attend annual OSHA training sessions given by the Health Care Supervisor or other Registered Nurse. All the above mentioned methods to prevent spread of infection are covered in this session. It is the Health Care Supervisor's responsibility to monitor staff for compliance in preventing the spread of infections.

J. Influenza

Influenza (the "flu") is an illness with fever, headache, sore throat, cough and muscle ache, caused by the influenza virus (germ). "Seasonal" flu occurs every year, usually during the late fall and winter. Getting a flu vaccine can prevent seasonal flu, but because the virus changes each year, and the effect of the vaccine does not last long, a new shot and often a new vaccine, is needed each year. The flu is spread person-to-person. People with the flu can spread their infection before they have symptoms as well as during the time they have the flu. The flu is spread through wet droplets that are produced when people cough, sneeze, or speak. If these infectious droplets get into the nose, mouth or eyes they may cause the flu. If these droplets get on hands or contaminate surfaces, they may be brought to the nose, mouth or eyes and cause the flu.

H1N1 flu is caused by a newer virus that was first recognized in April of 2009, and was called "swine flu." H1N1 flu had quickly spread to many parts of the world and had become a "pandemic," or global outbreak. H1N1 flu is not the same as swine flu, which is a virus that pigs can get. It is not the same as seasonal flu which occurs every year, during the winter and early spring. But H1N1 flu causes symptoms that are similar to seasonal flu, is spread like seasonal flu (from person to person), and can be prevented like seasonal flu. H1N1 flu symptoms are very similar to seasonal flu symptoms. Most common are fever, cough, and sore throat. Symptoms can also include

body aches, headache, chills, runny nose and feeling very tired. Some people also have diarrhea and vomiting. Symptoms last from a few days to up to a week or more. Illness with H1N1 flu has ranged from mild to severe. While most people sick with H1N1 flu get better without needing medical treatment; severe illness and deaths have occurred in some people. Like seasonal flu, some people are at higher risk of serious health problems when they get the H1N1 flu. This includes pregnant women, infants, and people with medical conditions like asthma, diabetes, heart disease, kidney disease, muscle or nerve conditions that affect their breathing and weakened immune systems. The flu virus is in the wet spray (droplets of saliva and mucous) that comes out of the nose and mouth of someone who coughs or sneezes. If you are close enough to a person with the flu (3 - 6 feet) when they cough or sneeze, you can breathe in the virus and get sick. Flu symptoms start 1 - 4 days (usually 2 days) after a person breathes in the virus.

Flu is spread easily from person to person. The virus can also live for a short time on things you touch like doorknobs, phones and toys. After you touch these objects, you can catch the virus when you touch your mouth, nose, or eyes. However, when the wet droplets on these types of objects dry out, the virus can't cause infection. Adults with the H1N1 flu can spread it from about one day before symptoms appear to about one week after. Children can spread the flu even longer after they get sick.

Pandemic & Infection Control

Pandemic flu occurs approximately every 20-40 years; a new strain of the flu virus appears which is very different from the ordinary seasonal flu virus. Because most people do not have immunity to this new strain of flu virus, it can spread to many people, across the world, over a short period of time. Existing types of vaccines will not prevent people from getting this new type of flu, and a vaccine to prevent illness from the new strain typically takes 5-6 months to develop, long after a pandemic begins. The most recent flu pandemics occurred in 1889-90, 1918, 1957, 1968, and 2009 (as noted above). Another pandemic may occur at any time. Flu illness during pandemics is similar to the flu that occurs every year, but pandemics can start at any time during the year, not just the typical "winter flu" season.

You can protect yourself and others from pandemic flu the same way as you can protect yourself from seasonal flu.

The staff at NLG's Adult Day Program are made aware of the many ways in which they can protect themselves and others from catching or spreading the flu germ. Washing hands often with soap and warm water, or use an alcohol-based hand sanitizer, avoid touching your nose, mouth or eyes and cover mouth when you cough or sneeze. Never cough in the direction of someone else. Cough or sneeze into a tissue or the inside of your elbow. Clean things that are touched often like door handles, telephones, etc. Avoid holding, hugging, kissing, or shaking hands with anyone who has a cold or the flu.

Any staff or Member diagnosed with the flu is directed by the Health Care Supervisor and/or Program Director to stay home from the program only to return with physician's note stating they may return.

For more information about seasonal, H1N1 or pandemic flu, please visit the Massachusetts Department of Public Health website on Influenza. http://www.mass.gov/dph/flu

COVID-19: In 2019, a new coronavirus was identified as the cause of a disease outbreak that originated in China. This new coronavirus, known as COVID-19, has spread globally and is a highly contagious respiratory virus. In March of 2020 the WHO declared COVID-19 a pandemic. The virus spreads mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- People are thought to be most contagious when they are most symptomatic (the sickest).
- Spread is also believed to be possible before people show symptoms or through asymptomatic carriers (those who never show symptoms or feel ill). It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

You can find a COVID-19 fact sheet by clicking on the following link: https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf

The staff at NLG's Adult Day Program are made aware of the many ways in which they can protect themselves and others from catching or spreading viruses. Staff are annually educated in infection control measures including but not limited to, washing hands often for at least 20 seconds with soap and warm water, using an alcohol-based hand sanitizer if soap and water is unavailable, avoiding touching of the nose, mouth or eyes, covering the mouth when coughing or sneezing, as well as, coughing or sneezing into a tissue or the inside of your elbow as well as in a direction away from others to aid in the prevention of spreading. At NLG Cleaning and disinfecting of high touch surface items and shared areas, such as bathrooms, are completed at multiple intervals throughout the day. It is important to avoid holding, hugging, kissing, or shaking hands with anyone who has a cold or the flu and to socially distance during the midst of a pandemic.

K. Hiring of NLG Employees

NLG recognizes that families or Guardians may seek to hire NLG staff members to provide additional services outside of program hours. NLG neither encourages nor discourages this practice. However, the following policies apply:

- NLG is not responsible for any compensation, liability or worker's compensation insurance for time contracted by a Member/Guardian outside of the staff member's NLG commitment.
- No NLG employee will ever be required by NLG to provide additional private pay hours for any Member.
- NLG is not responsible for, does not supervise, or in any way endorse the quality of therapy provided by NLG employees during hours they are paid privately.
- Staff members who are hired privately may not provide any preferential treatment during program hours to the Member/Guardian who hires them.

If it is determined that the NLG employee's private pay commitments are interfering with their employment commitment to the NLG Adult Day Program, that employee will be required to terminate their private employment with that Member/Guardian or resign from their position with NLG.

L. Designated Reporting Responsibilities

All NLG Adult Day Program staff, along with staff at all other day habilitation and adult services programs for disabled persons, are considered by the Massachusetts Disabled Persons Protection Commission (DPPC) to be mandated reporters. The DPPC addresses complaints of abuse and/or neglect of disabled persons between the ages of 18 and 59.

Information on what is reportable to DPPC.

The standard for reporting suspected abuse and neglect is "reasonable cause to believe" which means that mandated reporters need only a "**mere suspicion**" that abuse or neglect was committed against a person with a disability. If abuse or neglect is suspected, trust your feeling and report to the Disabled Person's Protection Commission (DPPC) 24-hour Hotline at 1-800-426-9009. It is better to err on the side of action.

In addition to reporting suspected abuse and neglect, mandated reporters are also required to report to the DPPC all cases in which an individual with a disability has died, regardless of whether or not abuse or neglect is suspected.

For reporting suspected abuse and neglect committed against children, elders and persons residing in long-term care facilities (otherwise known as nursing homes) refer to the following numbers.

1.1 Massachusetts abuse reporting numbers

• Disabled Persons Protection Commission (DPPC)

(24 hours / 7 days a week)
Ages 18 to 59
1-800-426-9009
Deaf and Hard of Hearing callers, please use Video Relay Services (VRS) or MARelay (711)

• Executive Office of Elder Affairs (EOEA)

(24 hours / 7 days a week) Ages 60 and over 1-800-922-2275

• Department of Public Health (DPH)

All ages residing in long term care facilities 1-800-462-5540

Department of Children and Families (DCF)

(24 hours / 7 days a week) Birth to age 17 1-800-792-5200

1.2 Explanations of abuse

- **Physical** Physical abuse refers to the use of physical force against someone in a way that injures or causes pain to that person.
- **Sexual** Sexual abuse occurs when someone is forced to engage in unwanted, unsafe, or degrading sexual activity or exploitation without their express permission or knowledge.
- **Financial** Financial abuse is the illegal or improper use of another person's funds, property or assets without their express permission or knowledge, by a person in a position of trust.
- Neglect/Omission Neglect or omission occurs when someone responsible for the
 care and well-being of another fails to provide for the basic daily living needs of
 that person resulting in, or placing them at risk of, serious physical or emotional
 injury.
- **Emotional** Emotional abuse may be verbal or non-verbal, and occurs when someone is attempting to control another person through threatening, humiliating, or intimidating actions.
- **Mistreatment** Mistreatment refers to the use of medications or treatments, isolation or physical or chemical restraints which harms or creates a substantial likelihood of harm

1.3 Indicators of physical abuse

- Puncture wounds
- Bruises on several different surface areas reportedly due to bumping into bedrail, while bruises are also present on top of head, and inside of thighs or on buttocks
- Bruises in various stages of healing from fresh to faded
- Multiple bruises or bruises forming patterns or clusters such as bruising on top of both forearms to elbows
- Multiple bruises on various parts of the body, and in various stages of healing, should receive particular attention
- Bruise is the shape/size of a familiar object such as handprint or belt buckle
- Bruises repeatedly occur after certain events such as home visits, stressful events in the family or staff visits
- Human bite marks
- Fracture to ribs, skull, arms and leg bones

- Unexplained internal injuries
- Bilateral bruises (e.g. top of shoulders, both sides of face, insides of thighs)
- Burns the shape of a familiar object such as an iron or electric burner
- Small burns in the shape of cigarette marks, especially on the soles of feet, palms or back of buttocks
- Scalding burns causing skin blistering from hot water
- Burns showing a clear boundary line from emersion in hot liquid (e.g. foot burns up to the ankle, resembling a sock)
- Burn marks on fingers or toes
- Abrasion marks from rope or other restraints, especially on arms, legs, neck, hands, ankles, or mouth
- Sprains, dislocations, fractures and/or broken bones involving ribs, skull, arms, legs, neck
- Unexplained internal injuries
- Cuts, lacerations, puncture wounds
- Unexplained chipped teeth
- Ulcers in the mouth from chemicals or poison
- Tears/swelling in the mouth possibly from forced feeding

1.4 Indicators of sexual abuse

- Torn or stained clothing
- Stained bed/bedding
- Difficulty walking or sitting
- Vaginal or rectal bleeding
- Itching, swelling or pain in the genital area
- Vaginal infections or sexually transmitted diseases
- Bruising in the genital area or inner thighs
- Incontinence
- Pregnancy
- Stares, day dreaming, fantasizing
- Fear of the dark, nightmares, disturbed sleep
- Extreme changes in behavior
- Bed wetting
- Sexual promiscuity
- Dressing provocatively
- Unexplained money or gifts following contact with a specific caregiver
- Fear of a person or place
- Fear of being left alone or going home
- Frequent bathing
- Refusal to disrobe for bedtime or showers in front of familiar or trusted others
- Aggressive or disruptive behavior
- Running away
- Shy, withdrawn, isolated, depressed, crying
- Talk of suicide or attempts
- Excessive interest in pornography
- Abusing alcohol or drugs
- Engaging in illegal activities

• Asking another adult if he/she can live with them

1.5 Indicators of neglect (omission)

- Patient on Patient abuse
- Dehydration: low or non-existent intake of fluids, low urinary output, dry fragile skin, dry sore mouth, constipation, apathy, lack of energy or mental confusion
- Malnourishment: low, sporadic, or non-existent intake of food; constant hunger; apathy; confusion and edema
- Inadequate food storage, spoiled food
- Inadequate food supply
- Water unpalatable
- Water unavailable
- Decubiti (bedsores), skin rashes related to unchanged bedding, urine-soaked diapers, or linens
- Evidence of poor hygiene (e.g. matted or lice-infested hair; soiled clothing; odors; presence of feces/urine or dirty nails/skin
- Lack of clothing, improperly clothed for weather conditions
- Untreated medical or mental conditions (e.g. infection, unattended fractures, soiled bandages)
- Restraining devices are evident
- Medication mismanagement (e.g. over-medication, medications not given at prescribed times, outdated/unmarked medications are present)
- Lack of needed assistive devices such as dentures, eyeglasses, hearing aide, walker, wheelchair, communication board, etc.
- No toilet or commode
- Inadequate living conditions
- Inadequate heating, ventilation/cooling, lighting, no electricity
- Inadequate sanitation, substandard cleanliness
- Heating system is dangerous, in disrepair, or unable to be repaired
- Animal/insect infestation such as fleas, mice, rats, cats, dogs
- Living space crowded: the individual sleeping on a sofa, in kitchen, living room or basement
- Housing structurally unsafe
- Architectural barriers
- Fire hazard present: faulty wiring, newspaper clutter, barriers to ambulation, blocked exits
- Hazardous substances such as toxic materials
- Empty liquor/beer bottles present or evidence of other drugs No telephone or access to outside help (in case of fire or medical emergency)
- Frequent moves between residences are made
- Caregiver evicts or abandons victim
- Caregiver leaves victim unsupervised
- Caregiver fails to
 - o wash or bathe victim
 - o shop, prepare meals, feed victim or meals are missed
 - o launder, dress, or change victim's clothes

- assist victim to toilet or commode
- o administer medications properly
- o change bed pads or turn victim in bed to avoid decubiti (bedsores)

1.6 Indicators of financial abuse

- Substantial increase in account activity, particularly when a joint bank account has
 recently been established or someone is now assisting the individual with their
 finances
- Person with a disability is accompanied by family, staff or others who appear to coax, or otherwise pressure, the individual into making transactions
- Persons accompanying the individual speak for her/him, and do not allow the individual to speak or make decisions
- Individual expresses concern that he/she does not have enough money for basic needs
- Individual is confused about missing funds in accounts
- Sudden increase in checking overdrafts
- Unusually large cash withdrawals or transfers to other accounts from a joint bank account, without the individual's knowledge or consent
- Individual cannot obtain checking or savings passbooks from person assisting with finances, or passbook/checkbook are frequently missing
- Individual signs blank checks, with large amounts filled in by another party
- Someone else signs/forges individual's signature.
- Individual complains that furniture, jewelry, credit cards, or other items are missing
- Individual expresses fear that he/she will be evicted from home, or placed in an institution, if money is not given to caregiver
- A Guardianship or Conservatorship is obtained for an individual who appears competent, and has recently been handling her/his own finances
- Certificates of Deposit are withdrawn, incurring penalties by persons acting on behalf of the individual or the individual appears under duress to obtain cash for someone else
- Caregiver seeks to cash the individual's disability or paycheck
- The individual complains about not having access to her/his own money
- Caregiver charging personal expenses to the credit card of an individual
- Caregiver spending the individual's money for his/her own use
- Caregiver coercing an individual to pay for his/her own expenses
- Caregiver coercing an individual to give away property, possessions, assets
- Caregiver coercing an individual to sign legally binding papers regarding financial assets
- Withholding an individual's funds
- Caregiver coercing an individual to name a specific beneficiary in insurance matters
- Forging the signature of an individual
- Not allowing an individual to discuss financial or legal matters with others
- Caregiver mismanaging or misappropriating victim's funds for own use

1.7 Indicators of emotional abuse

Screaming, shouting, yelling

- Cursing
- Threatening violence
- Threatening withdrawal of food, shelter, care, clothes, possessions or necessary equipment
- Name calling, belittling
- Cruel teasing
- Mimicking
- Making discriminatory remarks
- Ridiculing culture or heritage
- Belittling
- Degrading
- Using demeaning labels
- Telling lies
- General harassment
- Sexual harassment
- Humiliation
- Intimidating gestures or posture

1.8 Behavioral indicators of abuse and neglect

- Screaming, shouting, yelling
- Exhibit distrust of others
- Exhibit emotional outbursts
- Obsess, worry or appear anxious about her/his own performance
- Have low self-esteem or confidence
- Have a sudden loss of appetite
- Criticize caretaker constantly
- Curse, hit, scratch caregiver
- Request separation from caregiver
- Exhibit fear of the caregiver
- Exhibit fear of the dark, being alone, people, places or going home
- Cry easily, frequently
- Express feelings of hopelessness
- Want to die
- Exhibit stress-related illness
- Exhibit self-injurious behaviors
- Have nightmares or difficulty sleeping
- Be isolated from others
- Be emotionally withdrawn, detached
- Have startled response to movement
- Be incontinent, malodorous, unpleasant
- Be resistant to taking medication, being bathed, eating or allowing caregiver to provide care
- Abuse alcohol or other substances
- Have rapid physical deterioration
- Refuse offers of assistance
- Be fearful of intimacy and touch
- Be sexually promiscuous

- Exhibit aggressive, disruptive or delinquent behavior
- Express self-hate, self-blame, guilt or shame
- Be fearful of abandonment, rejection or retaliation
- Experience stunted growth and developmental delays
- Have attention and learning disorders
- Engage in destructive activities
- Learn passive/aggressive behaviors
- Adopt same behaviors as the abuser

All reports are referred to the State Police Detective Unit (SPDU) which resides within the DPPC. If upon review the SPDU determines the report constitutes criminal activity against the person with a disability, the report is referred to the appropriate District Attorney's office.

All NLG Adult Day Program staff members receive in-service training regarding what it means to be a mandated reporter including the procedures and protocols required when an issue arises. Any reports made are kept confidential. Additionally, all members will receive direct training in what abuse & neglect are and how to report. This training is conducted annually and when appropriate, members may also have specific programming targeting their understanding in these areas.

M. Transportation Policy and Community Outings

NLG's first priority when bringing Members into the community is safety. Any potential issues regarding a Member's safety in the car or while in the community must be brought to the attention of NLG staff, in writing. These may include unsafe behaviors observed such as removing seat belts, opening windows or doors, etc. While being a part of the community is an important part of NLG's Adult Day Program, NLG staff may restrict whether and where a Member is transported due to safety concerns as safety will take precedence at all times. If/When this is the case, NLG staff will work with the Member and/or their Guardian to develop an appropriate behavior plan to work toward having that Member become successfully engaged in the community.

When a Member starts at NLG's Adult Day Program, the Member or their Guardian is required to sign an authorization to go on community outings with NLG staff members as part of the programming provided. Members will be transported in Program provided vans. All vans and drivers are fully licensed and insured. In some cases (limited seating on the van or a trip being scheduled with a smaller group), Members may be transported in NLG staff member's cars. NLG keeps on file current driver's licenses and confirmation of insurance coverage for all staff members who provide transportation. Each NLG staff member who is responsible for transporting Members is given a portable first aid kit to keep in their car.

Generally there will be no fewer than two NLG staff for any group of members going into the community. However, exceptions may be made by the Program Director for specific members or situations. NLG staff members will practice good safety habits at all times with Members. All occupants of the van and/or car are required to wear seat belts.

N. Member Release Authorization

For safety reasons, the NLG Adult Program will only release a Member to an individual who has been authorized by the Member/Guardian in writing. If NLG staff are not familiar with that person, that person will be required to provide picture identification before the Member will be released to them. Below is the release authorization that is signed by each Member/Guardian when they are admitted. This form should also be completed at any time that there is a change. For example, if the Member/Guardian would like to add or delete an authorized person to the list NLG needs to receive a newly completed form by the Member/Guardian. A Member will not be released to an individual not included on the release authorization form.

Nashoba Learning Group Adult Day Program Member Release Authorization

I/we authorize Nashoba Learning Group to release my child/ward to the following individuals other than their Guardian(s):

Bus/Van Company:	Phone
#:	
Other Authorized Person:Relationship	
Other Authorized Person:Relationship	
Other Authorized Person:Relationship	
I/we recognize that Nashoba Learning Group will no individuals other than those on this list. I/we author identification from any individual picking up my ch	rize Nashoba Learning Group to request
Signature of Guardian	Date

O. Medication Administration Policies

NLG's medication administration policies are overseen by our Nursing Coordinator, Jaime Breingan (Beckford), R.N. All medicine will be kept in a locked secure cabinet and labeled with the Member's name, the name of the drug, and the directions for its administration. The program will dispose of or return to the Member/Guardian any unused or expired medication. A separate refrigerator will be kept in the nursing office for medications in need of refrigeration. Provisions are taken to have all toxic substances, medication and sharp objects kept out of the reach of the Members. Medication and toxic substances are not stored together. Medications are secured in locked cabinets located in the nursing office. All member specific medications must be hand delivered to nursing by a responsible adult.

Prescription Medications: In order for NLG to administer a doctor prescribed medication to a Member, we require that the prescribing physician complete and submit a signed medication order form. This form specifies the dosage and timing of administration and a start and end date. NLG will not start or discontinue any medication administration without this signed authorization. If there are any changes made to the original orders, new orders are required. All medication orders will be renewed annually. In addition to the signed authorization form, NLG requires that the Member/Guardian provide the medication to us in the original container with the pharmacy label and dosage instructions. NLG will not accept more than a thirty day supply of prescription medication. We notify the Member/Guardian when the supply is running low. However, it is the Member/Guardian's responsibility to ensure that the medication is available at the program. All staff working with Members are to be informed of all medications the Members are on and updated on any changes in medication

Non-Prescription Medications: It will be administered only if there is a signed Authorization for Non-prescription Medication Form signed by a physician. When non-prescription medication is administered, it will be recorded in the Member's Medication Log. All non-prescriptions (i.e. OTC med) permission forms must be signed annually by a physician.

Short-Term Medication: Nursing or approved, specially trained staff will administer short term treatment medications at the program without requiring a written physicians order in place. A short term treatment medication would be considered a medication that is to be administered for no longer than 10 consecutive days, such as an antibiotic. Nursing will administer oral antibiotics, ophthalmic antibiotic drops and otic antibiotic drops for a period of no longer than 10 consecutive days without requiring a written physicians order but there must be a member specific pharmacy label. The medication must be received at the Adult Day Program in the original container with the pharmacy label and dosage instructions. The pharmacy label must have the follow information: Members Name, Members date of birth, medication name, medication strength, dosage and route and duration of medication to be administered.

Antipsychotic Medications: In order for NLG to administer antipsychotic medication to a Member, we require that the prescribing physician complete and submit a signed medication order form. This form specifies the dosage and timing of administration and a start and end date. NLG will not start antipsychotic medication without this signed authorization. The prescribing physician will submit a written report to NLG detailing the necessity for the medication, staff monitoring requirements, potential side effects that may or may not require medical attention and the next scheduled clinical meeting or series of meetings with the Member. No antipsychotic prescription shall be administered for a period longer than is medically necessary and Members on antipsychotic medication must be carefully monitored by a physician. Staff caring for a Member on anti-psychotic medication will be educated on the nature of the medication as well as potential side effects.

P. Allergy and Anaphylaxis in the Adult Program Setting

All staff members at NLG are certified in Adult and Child First Aid, CPR and AED at hire and then again every two years. Additionally, all staff that are trained to work with members diagnosed with life threatening allergies are trained bi-annually to recognize an anaphylactic reaction, as well as, when to administer an Epi-pen auto-injector in the case of anaphylaxis. In the event that a member has a medical emergency while on site at NLG, nursing is notified immediately over the walkie with member initials, the term "code red", and the exact location of where the reaction is occurring. Nursing is then able to respond with member specific medication, doctors' orders and emergency care plans. If the member does not have an Individualized Health Care Plan (IHCP) to address the emergency the nurse will assess and monitor medically while 9-11 is called. Member specific ordered Epi-pens are stored in the nursing office. Nursing also has available two stock Epi-pens which can be used in an emergency for an undiagnosed anaphylactic reaction.

To best manage allergens within the Adult Program setting, NLG has signage posted outside of each classroom where a member that has an allergy is located. Allergy signs are also posted at the member areas as an additional precaution to remind staff working with those members of their diagnosed allergens. Allergens are not allowed at specific common tables within classrooms and signage is also posted at these tables as an additional visual reminder so that all members are able to socialize and enjoy a meal safely together. NLG has also designated specific common rooms such as the library, exercise room, research library, PT room and gym as peanut/tree nut free areas in order to provide an area safe for all members and staff to enjoy without the worry of cross contamination or airborne anaphylaxis. All NLG staff are routinely reminded on safety around cross contamination which includes surface cleaning/disinfecting, hand washing, leaving food items out of reach of students and the avoidance of sharing foods with students.

Q. First Aid and Emergencies in the Community

All staff members are First Aid and CPR certified. Each staff member is trained on how to respond to seizures, allergies and anaphylaxis, in addition to being trained on their

individual members emergency protocol, annually. In the event an allergic reaction or asthmatic episode occurs in the community, staff are to follow the emergency care plan and administer rescue medication. Rescue medication for seizures cannot be delegated, therefore, they cannot be given in the community. If a seizure occurs in the community, NLG protocol is to follow doctor's orders which are established within the individual emergency care plan and to call 9-11, if indicated.

R. Suspected Opioid Overdose Response Plan

Treatment of overdose should be initiated if the person is not able to be alerted into consciousness and the respiratory rate is visibly slowed (i.e. less than 10 breaths per minute). In managing opioid overdose, nursing will focus on treatment pertaining to maintaining adequate respiration and oxygenation, including assisted ventilation with rescue breathing or bag and mask, if needed. Program staff or nursing will respond whether the person overdosing is a staff or a person served in the event of a suspected opiate overdose by calling 9-11. Following assessment by nursing, if needed, a Registered Nurse will administer Narcan/Naloxone as soon as possible. NLG has an Overdose Prevention Plan that is reviewed annually and signed by the Program Physician. On hand in the nursing office, is Narcan for the nursing staff to utilize in the event of an overdose while at NLG.

S. Use of Physical Restraint Policy

NLG, in accordance with relevant statutes and regulations, uses various therapeutic methods and techniques for behavioral intervention with its Members. Physical restraint is not utilized by NLG as a behavioral intervention except in situations where the severity of the behavior and functional assessment results support it as the least restrictive, effective treatment. In these cases, parent/guardians will be asked to provide informed consent to the specific procedures utilized within a comprehensive behavior plan. In all other cases, physical restraint is utilized only when other relevant forms of intervention have been thoroughly exhausted and the form of restraint used will be the least intrusive necessary to protect the Member, other NLG Members, and NLG staff. NLG provides training and refresher training annually to its employees in appropriate restraint techniques utilizing the Strategies for Limiting Violent Episodes (SOLVE) techniques. No employee can engage in the physical restraint of a Member without completing this training. This training is overseen by one of NLG's Clinical staff and is run by specific NLG staff who have been certified as instructors by SOLVE and are required to undergo recertification training and testing annually.

Physical restraint can only be implemented when there is the immediate need to:

- protect a Member from self-abuse
- protect other Members from assault
- protect employees, parents/Guardians and/or visitors from assault
- protect property when failure to do so may cause harm or risk of injury to self or others.

Any restraint administered is documented in the Member's data. In addition, a functional assessment process under the direction of a staff Board Certified Behavior Analyst must

begin immediately in order to develop a behavior plan for the Member that reduces or eliminates the need for physical restraint.

NLG provides Guardians with notification of this restraint policy and requires that they sign a consent form in case of the need for NLG staff to use restraint. The notification and consent form is sent to the Guardian with the initial forms required for a Member prior to their placement with NLG and annually thereafter.

T. Discharge Policy

A Member will be discharged from the NLG Adult Day Program under one of the following conditions:

- A periodic review shows that the Member has met the goals defined in their DHSP/ISP and the development of new goals are not in the Member's best interest given the programming offered;
- The Member has ceased to benefit from the programming offered;
- The Member exhibits dangerous, aggressive or self-injurious behaviors which pose a safety concern for the Member, other Members, staff or visitors for which the Member/Guardian and NLG's Adult Day Program are unable to agree to a plan to address the behavior(s).
- The program and guardian cannot reach alignment on the services for the member which results in the member no being able to be served in an agreed upon way after reasonable efforts have been made toward resolution.

NLG's Adult Day Program will work with the Member, their family and/or Guardian, their DDS office, and the staff of the program or agency to which the Member is being transferred (if applicable) to assist in the successful transition of the Member out of the Program. A discharge plan, inclusive of the reason for discharge and dated and signed by the Program Director, will be maintained in the Member's file and be accessible to those authorized continued access to it for four (4) years after the date of discharge after which it will be destroyed.

U. Policy for Registering Complaints

At Nashoba Learning Group, our mission is to provide our Members, in partnership with their families, with the highest quality programming that we can. We strive to involve Members/Guardians in that process and provide multiple means for them to communicate with us. NLG also strives to provide an environment for its families and Members that is free from discrimination based on race, color, national origin, gender, religion, ancestry, sexual orientation, or disability. If Members/Guardians have concerns or complaints about a Member's programming, or believe that the Member has been subject to discrimination, we ask that these concerns be brought to our attention immediately so that we can work with you to address them. In many cases, your concerns may be raised and addressed through a phone call to the Program Director or the Member's Team Leader.

If the concern is not addressed through these channels, or you feel it is best raised with an officer of Nashoba Learning Group, we ask that you use the following process: Write a note outlining your concern or complaint and address it to either to Liz Martineau, President or Lori Steers, Executive Director Nashoba Learning Group 10 Oak Park Drive, Bedford, MA 01730.

Liz or Lori will call you within 3 days of receiving the note. We will discuss your concerns over the telephone and arrange a mutually convenient meeting time (within a week), if needed, to address the concern or complaint. Lori and/or Liz will involve others at Nashoba Learning Group in the process if they feel that is needed. We will document the resolution of the concern or complaint in a note to you within 1 week after our telephone call or meeting.

Members/Guardians are always welcome to raise any concerns or complaints with their Department of Developmental Services representative. Members/Guardians can raise any issue(s) or complaint(s) with the assurance that doing so would not result in retaliation or barriers to services.

If there is a complaint or concern relating to the Human Rights of the members those should be handled in the following way.

The current NLG Human Rights Officers should be contacted for specific complaints:

Lauren Savioli 978-528-5210 Lauren.savioli@nashobalearninggroup.org

Samantha Carroll
978-528-5210
Sam.Carroll@nashobalearninggroup.org

If you feel your needs are not being met or have additional questions or concerns contact our Regional Human Rights Specialist:

Alexandra Selman Human Rights Specialists DDS Northeast Regional Office 450 Maple Street Hathorne, MA 1937 Phone: 781,771,3031

Phone: 781-771-3931

Email Alexandra.E.Selman@mass.gov

If you suspect abuse or neglect of your member, or of any of the adults we serve, you may report that to the Disabled Persons Protection Commission. This organization investigates any suspected abuse and neglect and deals with situations accordingly. This is a hotline

that you may call at any time to report suspected abuse and neglect and you may do so independently.

Disabled Persons Protection (DPPC) Contact for suspected abuse or neglect 1-800-426-9009

Nashoba Learning Group

2025-2026 Adult Program Calendar

	July 2025								
Su	Su M Tu W Th F								
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6	7	8	9	10	11	12			
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	August 2025								
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September 2025								
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In Session: 19.5									
	October 2025								
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	In Session: 21								
	November 2025								
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In Session: 21									
	December 2025								
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In Session: 21.5									
	January 2026								
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	In Session: 17.5								
	February 2026								
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	In Session: 17								
	March 2026								
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	In Session: 18.5 April 2026								
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	In Session: 19 May 2026							
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In Session 22							
	June 2026						
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Adult Program Closed/Holidays	2025-2026
July Vacation/Independence Day	Wed., July 2 – Fri., July 4
Labor Day	Mon., Sept 1
Indigenous Peoples' Day	Mon., Oct 13
Thanksgiving Break	Thur., Nov 27 – Fri., Nov 28
Winter Vacation	Wed., Dec 24 – Wed., Dec 31
New Year's Day observed	Thurs., Jan 1
Adult Program Closed	Friday, Jan 2
Martin Luther King, Jr. Day	Mon., Jan. 19
Presidents' Day	Mon., Feb. 16
Memorial Day	Mon., May 25
Juneteenth Day	Fri., June 19

Total: 239.5 days in session

VI. Guardian/Member Manual Sign-off Sheet

Guardian Sign-Off:					
ve, the Guardian(s) of, the Guardian(s) of, a Member at NLG's Adult Day Program, have reviewed all of the formation in this Member/Guardian Manual.					
By my/our signature, we acknowledge that we information contained in this manual.	e understand and will abide by the				
Signed:	Date:				
Guardian					
Guardian					
Member Sign-Off (if no Guardian):					
, a Member at NLG's Adult Day Program, ave reviewed all of the information in this Member/Guardian Manual.					
By my signature, I acknowledge that I underst contained in this manual.	tand and will abide by the information				
Signed:	Date:				
Member					