

Standards for Community Living Support Services

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Introduction

Why These Guidelines Were Created

In 1963, John F. Kennedy created Community Mental Health (CMH) centers as federal law. Before CMH, many individuals were placed in institutions, which were often cruel, inhumane, and segregated. Because of this law, community-based services were developed to help people who have a mental illness and/or an intellectual/developmental disability either return to or remain a member of their community. In order to do this well, individuals may require certain services to help them be healthy, safe and achieve their potential.

One of the available services is Community Living Supports (CLS), which is designed to teach, prompt, and monitor individuals. This document will help you understand CLS and your role.

As a CLS Direct Support Professional, you are there to support the individuals, to help them learn new skills, achieve their goals, and to make sure they are healthy and safe. You have an opportunity to have a powerful role in their life.

Your duties are defined by the individual's plan of service (IPOS) and the general expectations defined by these standards. You have a unique role that differs from family, legal representatives, and the CMH worker. These roles are <u>not</u> interchangeable.

Here are some important things to remember as you enter into an individual's life:

- 1. You are working in the individual's home; this requires you to respect them, their home, and their property.
- 2. Do not ask others (for example CMH staff, legal representatives, neighbors, or family members) to cover your responsibilities. If you are working, you are expected to provide the services in the IPOS.
- 3. Documentation is important. It is required for payment of service and is how you can inform other staff about what is happening with the individuals you serve. Please keep it up to date and timely.

Providing CLS services can be challenging at times – it is not always an easy job. But, you have the opportunity to make a difference in people's lives and can help to create meaningful relationships for the individuals we serve. This is a very honorable and important job that can lead to fulfilling careers.

Definitions

Arm's Length

• A distance approximately equal to the length of a human's arm.

Assist

• To help someone, typically by doing a share of the work. (e.g., some hand over hand, prompting, guiding, or reminding).

Assistive Device

• Any device that helps someone do something they might not otherwise be able to do on their own. These may be items used to promote, achieve, or maintain an individual's independence. (e.g. wheelchairs, adaptive switches, walkers, communication device).

Hand Over Hand

• Direct Support Professional performs task(s) along with the individual by guiding their hands through the process.

Incident

An unusual or significant event that disrupts or poorly affects the course of treatment or care
of an individual. Incidents may include but are not limited to: behavioral incidents, physical
intervention use, individual death, any accident or illness that requires hospitalization,
displays of serious hostility, attempts at self-inflicted harm or harm to others, instances of
destruction to property, the arrest or conviction of an individual, refusal of care or
medications, etc.

Legal Representative

- A legal representative is defined as any of the following:
 - 1. A court-appointed guardian.
 - 2. A parent with legal custody of a minor individual/consumer.
 - 3. In the case of a deceased individual, the executor of the estate or court appointed personal representative.
 - 4. A patient advocate under a durable power of attorney or other advanced directive.

Line of Sight

• The staff member has a clear view of the individual at all times.

Observe

• To notice or view, carefully and with attention to detail.

Physical Management

• An action used by staff in an emergency situation to restrict the movement of an individual by direct physical contact to prevent the individual from harming himself, herself, or others.

Prompt

• A reminder or cue; could be both verbal or with hand over hand assistance.

Remind

• To cause a person to remember; to cause a person to think of someone/something; to make someone aware.

Significant Change

• Observation or event that is out of the ordinary and may mean a change or potential risk.

Unreasonable Force

- Physical management or force that is applied by anyone to an individual/consumer in one or more of the following circumstances:
 - 1. There is no immediate risk of serious or non-serious harm to the individual, staff, or others.
 - 2. The physical management used is not approved by the provider and the CMH.
 - 3. The physical management used is not in compliance with the emergency interventions authorized in the individual's plan of service.
 - 4. The physical management or force is used when other less restrictive measures were possible but not attempted immediately before the use of physical management or force.

Examples:

- The individual is refusing to go somewhere, such as in or out of the vehicle, or leave a store and the staff grabs the individual's arm or clothing to make them move.
- An individual is having some challenging behaviors and staff push the individual down or push them into their bedroom.

General Standards of Care

The following is required of all CLS staff when they begin working with an individual. As a staff member, the more you know about the individual and their plan of care, the more successful you will be at carrying out your job duties.

- Complete minimum level of training per contract guidelines prior to starting work.
- Follow all current plans of care.
- You will be in-serviced on the IPOS by your employer.
- Keep good documentation while working with individuals.
- Individuals must feel safe and respected.
- Lock all doors when no one is in the individual's home.
- All laws must be followed while working with the individual.
- CLS staff must not be under the influence of drugs or alcohol.
- If you pass any medications, your medication training certificate must be current within 12 months.
- Limit use of cell phones to work related matters.
- Take care of your personal business either before or after your CLS shift.
- You are working in someone's personal space so do not bring your children, significant other, friends, or pets to work.
- Leave all personal belongings at home or in your vehicle.
- You must remain awake during your whole shift.
- As a CLS staff, you are responsible to assist, guide, prompt the individual per the plan of care. You are not responsible for the full cleaning of a family home or to run errands, wash laundry, cook, etc. for a family member.

Keep in Mind

- When watching television with the individual, make sure the shows are their choice.
- Give the individual choice in all recreational activities.
- Be respectful when eating in front of an individual.
- Do not eat the individual's food.
- Do not open individual's mail, unless upon request.
- Respect individual's privacy by knocking before entering any closed door.

Boundaries

As a CLS staff member, it is important to keep and maintain healthy professional boundaries while working with individuals. If you need assistance in understanding, or defining this, you should contact your supervisor. Here are some things to keep in mind:

- You are here to complete a job.
- Be very careful about socializing with individuals and/or their family members outside of your work environment.
- Socialization with the individual should be for developing skills in the IPOS.

- Limit sharing your personal information with the individual(s) you work with (e.g. family, employment and relationship information).
- You should not be "borrowing" anything from an individual or their family members.
- Do not use social media as a way to connect with an individual or their family members (e.g. Facebook, Twitter, Snapchat, E-mail, Instagram, etc.).

Outings

Consider the following when going on community outings:

- The individual should choose outings. Often the IPOS will contain suggestions of outings for an individual.
- Community outings must be legal.
- When you are in the community, remember that you are a representative of your agency.
- Always be prepared! It is important to bring extra supplies with you when you are going into the community as identified by the individual's needs (e.g. extra clothing, briefs, rubber gloves, wipes, etc.).
- If the outing occurs during normal medication administration time(s), follow guidelines to make sure the individual gets the medication.

Transportation

• Drivers must have a valid driver's license and follow agency guidelines.

Communication

- The CLS provider and CMH must work as a team in the care of the individual. Regular communication is important to accomplish this goal. It is expected that CLS staff will notify their supervisor when significant changes occur, who will then contact CMH to reduce the chance of a poor outcome.
- Sharing concerns and care coordination does not replace the incident reporting procedure. Continue to follow the Recipient Rights and incident reporting procedures.
- Each individual has a plan of service that must be followed. If there is any confusion about how to carry out service plan guidelines, CLS staff should contact their supervisor.
- In the case of a medical or behavioral crisis, the CLS staff must coordinate with area emergency services. In these cases, the staff should first contact emergency services and then contact their supervisor.
- The following are examples of significant changes. This list is not all-inclusive:
 - Noticeable <u>risk factors</u> that could negatively impact the overall health and safety of the individual or their living environment:
 - No smoke detector
 - Bio-waste (human or animal)
 - Burns on furnishings, carpet
 - Evidence of unsafe use of stove
 - Guest(s) that appear to be threatening or placing individual at risk

- Noticeable changes in the visible condition of the environment:
 - Clutter
 - Lack of cleanliness that is different from the normal condition of the environment
 - Potentially dangerous objects or behaviors that could become risky
 - Noticeable odors that may indicate changes in the environment
 - General environmental conditions that may be unsafe, hazardous, dangerous, etc.
- Observed changes in the individual's behavior/health/routine:
 - Changes in sleep patterns
 - Changes in appetite
 - Increased or unusual behaviors
 - Loss of functioning (ability to walk, talk, transfer, etc.)

Behavior Management

Some individuals require more specific, informative steps to help them succeed. These steps are written in a behavior plan or behavior guidelines and can be found in the IPOS. Providing feedback and information to the CMH team is necessary. Reporting this information can lead to changes that make the individual's life better and your job easier.

- Document in behavior logs
- Share behavior changes with supervisor and CMH staff
- If the behavior threatens the health or safety of themselves or others contact emergency services for assistance
- Staff may <u>NOT</u> do any of the following:
 - Use any form of punishment
 - Use any form of physical force
 - Restrict an individual's movement by any means not written in the behavior plan
 - Confine the individual to an area where there is no exit (e.g. closet, bed, box, chair, or room)
 - Withhold food, snacks, water, cigarettes, clothing, community activities, or toilet use
 - Physical, mental, or emotional cruelty
 - Verbal abuse including swearing or hurtful remarks
 - Threats and/or intimidating behavior
 - Refuse the individual entrance to the home

Limitation of Rights

 As CLS staff you may observe an individual making choices you do not agree with, for example you may want to stop them from making their own choices (excessive smoking, drinking, food choices and times to eat, having unwanted guests, etc.), but you cannot.

- It is the responsibility of the CLS staff to consult with CMH staff if there are any concerns about the choices and behaviors of an individual.
- CLS staff cannot restrict an individual's right to make their own choices unless there are certain limitations of rights procedures in place. Any restriction can only be put in place by CMH for the safety and welfare of an individual.
- CLS staff can only implement limitations that are in the IPOS.

Incident Reporting

All CLS staff who witness, discover, or are notified of unusual incidents will take the following steps:

- 1. Take immediate action to protect, comfort, and arrange for emergency medical treatment as necessary if the individual has been injured.
- 2. Immediately speak with a supervisor about the incident and follow their instructions.
- 3. Complete the Incident Report (IR), ensuring that all information is filled in completely, and give report to supervisor or home manager as soon as possible, but no later than the end of the shift in which the incident occurred.
- 4. Follow agency procedure to ensure IR is entered into CMH electronic health record.
- 5. Make a reasonable attempt to contact the individual's designated representative and responsible agency by telephone.
- If an individual is missing, staff will do the following:
 - Attempt to locate the individual
 - Make an attempt to contact the individual's designated representative and responsible agency
 - Contact police
 - Contact the Office of Recipient Rights (ORR) to make a verbal report
 - Staff will complete an incident report

^{**}Always follow written guidelines from IPOS, behavior plan, etc.

Activities of Daily Living

Refer to the individual's IPOS for directions regarding Activities of Daily Living (ADL). If you have any questions, contact your supervisor for assistance. CMH is available to assist with questions or concerns.

The current IPOS must be available onsite.

Your role, as a CLS staff, involves assisting the individual with ADLs. These are the basics of what an individual does every day – and for people with an intellectual and/or developmental disability or mental illness, these daily tasks/areas need some extra support. For the purpose of these standards, there are three main areas of ADLs: Meal Preparation, Household Maintenance, and Individual Care. You may be involved in all areas of these or only one small area and your level of involvement with each individual will vary. As a result, it is important that you understand your role at each location you are working at.

Meal Preparation

Menu Planning

- Consider the individual's preferences when menu planning.
- Consider any dietary and nutrition plans of the individual.

Grocery Shopping

- Assist the individual by prioritizing choice of foods for nutritional components, within their budget.
- Check expiration dates on products, do not purchase if items are expired.

Microwave and Stove Operation

• Operate household and cooking appliances according to the manufacturer's recommended safety practices.

Food Preparation and Storage

- Food must be safe for people to eat, clean, and not spoiled.
- All food will be safely stored, prepared, and served.
- Always wash your hands before preparing food.
- Label food with dates of when it was prepared and when it was put in the refrigerator.
- Check food and dispose of any with visible signs of decay (discoloration, mold, bad odor, sliminess, etc.) or past expiration dates.
- Keep food in sealed containers.

Food Safety

Although your role might not always include preparing, cooking, and taking care of food, it is important to be aware of safe food handling techniques. The following are tips on the 4 main

areas of food safety; Clean, Separate, Cook and Chill. For more information please visit: http://fightbac.org/, where this information was gathered from.

Clean

- Wash your hands with warm water and soap for at least 20 seconds before and after handling food.
- Wash the cutting boards, dishes, utensils, and counter tops with hot soapy water after preparing each food item and before you go on to the next food.
- Consider using paper towels to clean up kitchen surfaces. If you use cloth towels, wash them often in the hot cycle of the washing machine.
- Rinse fresh fruits and vegetables under running tap water, including those with skins and rinds that are not eaten.
- Rub firm-skin fruits and vegetables under running tap water or scrub with a clean vegetable brush while rinsing with running tap water.

Separate

- Separate raw meat, poultry, seafood and eggs from other foods in the grocery-shopping cart, grocery bags and in the refrigerator.
- Use one cutting board for fresh produce and a separate one for raw meat, poultry and seafood.
- Never place cooked food on a plate that previously held raw meat, poultry, seafood or eggs.

Cook

- Use a food thermometer, which measures the internal temperature of cooked meat, poultry and egg dishes, to make sure that the food is cooked to a safe internal temperature.
- Cook meat as directed on package.
- Make sure there are no cold spots in food (where bacteria can survive) when cooking in a microwave oven. For best results, cover food, stir and rotate for even cooking. If there is no turntable, rotate the dish by hand once or twice during cooking.

Chill

- Refrigerate or freeze meat, poultry, eggs and other perishables as soon as you get them home from the store.
- Never let raw meat, poultry, eggs, cooked food or cut fresh fruits or vegetables sit at room temperature more than two hours before putting them in the refrigerator or freezer.
- Never defrost food at room temperature. Food must be kept at a safe temperature during thawing. There are three safe ways to defrost food: in the refrigerator, in cold water, and in the microwave. Food thawed in cold water or in the microwave should be cooked immediately.
- Please remember all food has a shelf life please discard any food that has gone bad (past expiration dates, moldy, etc.).

Meal Clean Up

- Clean dishes and utensils with hot soapy water.
- Wipe tables and surfaces with cleaning supplies.

Household Maintenance

Laundry Care

- Staff will provide verbal prompting and assistance, when necessary, to do laundry.
- Refer to the laundry tags on clothing for instructions.
- Look inside the washer and dryer to make sure they are empty before using.
- Clean out lint trap after each use of the dryer in order to reduce risk of fire and to improve efficiency of unit.
- If the washer and dryer are not working properly, contact the landlord or maintenance manager. For homeowners, make sure the homeowner is aware of the issue.
- Follow the instructions on the detergent, bleach, fabric softener, etc. containers.

Routine Household Cleaning & Maintenance

- Refer to the IPOS for expectations of what you will be doing in each CLS setting.
- Please contact CMH staff with any questions or concerns.
- Contact landlord with any property maintenance issues or concerns.

Individual Care

Hand Washing

Procedure to Assist an Individual With Hand Washing

- Wet hands under running, warm water.
- Lather hands up to two inches above the wrist with soap for 20 seconds.
- Wash palms, sides and back of hands, in between fingers, thumbs and under fingernails.
- Rinse hands under warm running water.
- Dry hands with a clean towel or paper towel.
- Turn faucet off with paper towel.

When Both Individuals and CLS Staff Should Wash Their Hands

- Before and after wearing gloves.
- At the start of the workday and several times throughout.
- When hands are visibly soiled or contaminated by blood or bodily fluids.
- Before and after direct contact with skin that has wounds or is broken.
- After assisting an individual with toileting or changing incontinence products.
- After using the restroom.
- Before and after eating, preparing, and serving food.
- After wiping nose, sneezing, or touching your face.
- After cleaning.

Bathing and Hair Care

- Staff will provide the individual opportunity, encouragement and assistance when necessary, for bathing, individual hygiene, shaving, and dressing.
- Staff will provide the individual opportunity to obtain haircuts, styling, or other grooming procedures.

Daily Oral Hygiene

• Staff will provide the individual opportunity, and assistance when necessary, for daily oral hygiene.

Dressing

• Staff will provide the individual opportunity, and assistance, when necessary, to dress as fashion, fit, cleanliness, and season warrant.

General Medical Protocol

The CLS staff should always follow IPOS, doctors' orders, discharge plans, etc. If you have any questions, contact your supervisor for assistance. CMH is available to assist with questions or concerns.

The current IPOS must be available onsite.

The following chapter is to help address different medical needs that you might encounter while on the job. Please remember that you must have a doctor's order prior to performing any medical care (passing medications, wound care, tube feeding, etc.). This chapter does not replace any medication training classes that you are required to take.

Notification of Individual's Medical Situation

It is important to report medical changes to your supervisor, CMH, and/or the individual's doctor. The following are some, but not all, examples of medical changes to report:

- Changes in behavior (crying, restlessness, withdrawn or anxious).
- Signs or symptoms of infection, redness, pus, swelling.
- Urinary tract symptoms-painful, frequent, burning sensation during urination.
- Cold or flu-like symptoms-fever above 100, complaints of sore throat, rash, pain, vomiting, diarrhea, constipation, etc.
- Out of the ordinary physical complaints made by the individual or observed by staff.
- Weight gain or loss of 5 lbs. or more in one week's time.
- Minor injuries to the body: bruises, cuts, punctures, abrasions, swelling or pain.
- No bowel movement for 3-4 days. (Some individuals are on a "Constipation Protocol". In this case, follow the protocol).
- Signs of Illness:
 - Change in eating habits, an increase or decrease in appetite.
 - Change in sleep pattern, an increase or decrease or interrupted sleep pattern.
 - Changes in skin color: pale, flushed, bluish, gray, blotchy (reddish spots), jaundice (yellow).
 - Change in skin condition: dry, clammy, cold, hot, increased sweating, rash, itchy.

The following are some, but not all, examples of medical emergencies that need immediate professional medical attention, such as calling 911:

- Change in level of consciousness (confused, dizziness, fainting, coma).
- Hit their head.
- Change in body or limb movement (shaking, tremors, jerking, stiffness, paralysis, unsteadiness, staggering).

• Chest pains, shortness of breath, other changes in breathing (difficulty breathing, rapid, slow, wheezing, gasping, or coughing).

Primary Care Needs

- The CLS staff should always follow IPOS, doctors' orders, discharge plans, and/or healthcare guidelines. Your role as CLS staff could include:
 - Ensuring that all routine and emergency health care needs are met (includes dental).
 - Attending annual physical and assisting with follow up care instructions.
 - Information sharing with CMH, home staff, guardian, etc.
 - Informing CMH Nurse or other team members if guardian consent is needed.
 - Maintaining documentation of all health-related information.

General Seizure Guidelines

- 1. Observe any pre-seizure activity:
 - Change of behavior
 - Weakness
 - Dizziness, falling
 - Complaints of flash of lights, peculiar smell, sound or taste
- 2. Observe and record seizure activity, including duration (note the time start to finish).
- 3. Supportive care during seizure:
 - Support and protect head (can grab pillows, soft blanket for head).
 - Remove surrounding objects that may cause harm or injury.
 - Loosen constrictive clothing around neck.
 - Do not attempt to restrain or hold; Put nothing in mouth.
 - Call 911 if seizure lasts more than 5 minutes, or as directed by physician.
- 4. Post seizure care:
 - Re-orient to surroundings, talk calmly and slowly.
 - Assisting with personal hygiene, if needed, as a result of the seizure.
 - Provide emotional support.
- 5. Notify Nurse/Physician if:
 - An individual has a seizure after being seizure free for 6 months.
 - Cluster, more than 3 seizures in 24 hours.
 - Seizure has occurred after a medication change.

General Dehydration Guidelines

Dehydration can happen at any time, but staff should be more aware of the signs in extreme temperatures. Staff should monitor for signs of dehydration including:

- Decreased frequency of urination
- Decreased fluid intake

- Mouth or lips dry and cracked
- Dry or sunken eyes

Safety

The CLS staff should always follow IPOS. If you have any questions, contact your supervisor for assistance. CMH is available to assist with questions or concerns.

The current IPOS must be available onsite.

This chapter will introduce staff to ways of increasing the safety of the individual's living environment. As a staff, you are expected to help the individual thrive and live in a healthy environment. Safety starts with preparation, observation, and helping to reduce risk.

Emergency Plans

General Guidelines

As a CLS staff, it is important to be aware of basic emergency procedures, which are included as guides. These include how to prepare ahead of time, what to do during and what you can do after an emergency. Please remember that every situation is unique and it is important to familiarize yourself with the individual's home and environment.

- If required, specific evacuation procedures will be identified in the individual's IPOS.
- Emergency and evacuation procedures should be practiced frequently and if there are issues or concerns contact your supervisor. CMH is available to assist with questions or concerns.

Alert Systems

The National Weather Service will give alerts to warn you of potentially dangerous weather. Here is a breakdown of what the difference is between a warning and a watch:

- A watch means conditions are right for dangerous weather. In other words, a "watch" means to watch out for what the weather could do, be ready to act.
- A warning means that the dangerous weather is threatening the area.
- It is important to listen to the television and radio, as this is a way that the public is notified of any potential weather dangers.

Winter Storms and Extreme Cold Preparation:

- Make sure that there is adequate clothing and blankets available and a sufficient heating source. It is important to make sure there is enough food in the home, in case it is unreachable for several days. Establish who is responsible for clearing sidewalks and driveways after a snowstorm and get proper materials if needed (shovel, salt, sand, etc.).
- Make sure the individual has enough medication and it is properly stored.

During:

- Make sure the individual walks carefully on snowy, icy walkways.
- Drive the individual only if it is absolutely necessary.
- Dress appropriately for the weather.

- Watch for signs of frostbite (loss of feeling, white appearance in fingers, toes, ears, etc.).
- Watch for signs of hypothermia (uncontrollable shivering, memory loss, disorientation); get the individual to a warm location. Seek medical assistance as soon as possible.
- Let someone know where you are going, your route, and expected arrival time if you need to travel.

Extreme Heat

Preparation:

- Check the air conditioner (if applicable) to ensure that it is properly working and listen to weather forecast to stay up to date on extreme temperature changes.
- Make sure the individual has enough medication and it is properly stored.

During:

- Make sure the individual:
 - Stays indoors as much as possible and limits exposure to sun.
 - Drinks plenty of water even if they are not feeling thirsty. Avoid caffeinated drinks.
 - Is aware of any medication interactions with heat, as this could increase any symptoms someone might have.
 - Dresses in light colored, loose-fitting, lightweight clothing. Also protects face and head by wearing hats.
 - Avoids completing strenuous work during the warmest part of the day and takes frequent breaks when working outside.

Thunderstorms and Lightning

Preparation:

- Listen to or watch weather forecasts to stay up to date on any watches or warnings related to a thunderstorm. Avoid outdoor activities and unplug any electronic equipment that are not in use.
- Make sure the individual has enough medication and it is properly stored.

During:

- Make sure the individual:
 - Stays away from windows and doors.
 - Takes shelter in a sturdy building avoiding natural lightning rods (metal objects, tall isolated tree, hilltops, open fields, etc.).
 - Avoids contact with electrical equipment or cords.
 - Seeks medical attention if struck by lightning.
 - Stays away from storm damaged areas, downed power lines, and flooded roadways.

Tornados

Preparation:

- Listen to or watch weather forecasts to stay up to date on any watches or warnings related to a tornado. Be alert to any changing weather conditions. The following are signs of danger: dark, greenish skies, large hail, loud roar, a large, dark, low-lying cloud. If you see any of these danger signs take shelter immediately.
- Make sure the individual has enough medication and it is properly stored.

During:

- Make sure you and the individual:
 - Seeks shelter immediately. Here are guidelines of where to go:
 - If you are in a structure (e.g. residence, small building, school, nursing home, hospital, factory, shopping center, high-rise building)
 - Go to a pre-designated shelter area such as a safe room, basement, storm cellar, or the lowest building level. If there is no basement, go to the center of an interior room on the lowest level (closet, interior hallway) away from corners, windows, doors, and outside walls. Put as many walls as possible between you and the outside. Get under a sturdy table and use your arms to protect your head and neck.
 - If you are in a high-rise building:
 - Go to a small interior room or hallway on the lowest floor possible.
 - If you are in a trailer or mobile home:
 - Get out immediately and go to the lowest floor of a sturdy, nearby building or a storm shelter. Mobile homes, even if tied down, offer little protection from tornadoes.
 - If you are outside with no shelter:
 - Immediately get into a vehicle, buckle your seat belt and try to drive to the closest sturdy shelter.
 - Stay in the car with the seat belt on. Put your head down below the windows; cover your head with your hands and a blanket, coat or other cushion if possible.
 - Do not get under an overpass or bridge. You are safer in a low, flat location.
 - Watch out for flying debris. Flying debris from tornadoes causes most fatalities and injuries.

After:

- Injury may result from the direct impact of a tornado or it may occur afterward when people walk among debris and enter damaged buildings. Check for injuries. Do not attempt to move seriously injured people unless they are in immediate danger of further injury. Get medical assistance immediately. Here are some general safety precautions for the individual:
 - Continue to monitor the radio or television for emergency information.
 - Use caution when entering/exiting any buildings with damage.
 - Wear sturdy shoes/boots, if possible.

- Be aware of any hazards when walking (exposed nails, broken glass, etc.).
- Do not touch any downed power lines or objects in contact with downed lines. Report any electrical hazards to police.
- Cooperate with public safety officials.

Blackouts

Preparation:

- Make sure there are plenty of containers filled with water and place them in the refrigerator or freezer. Remember to leave space in containers that are freezing.
 Chilled and frozen water will help keep food cold during temporary power outages.
- Contact the power company before a blackout occurs if the individual uses a batteryoperated wheelchair or other power-dependent equipment. Utility companies keep a list of power-dependent customers and might be able to inform you of any alternatives available in your area.
- Have extra batteries available and charged.
- Make sure the individual has enough medication and it is properly stored.

During:

- Keep refrigerator and freezer doors closed as much as possible.
- Turn off or disconnect appliances/equipment to avoid any power surges that could damage these items.
- Use flashlights for emergency lighting as a safe alternative to candles.
- Leave on one light so you will know when the power returns.
- Listen to local radio for updated information.

After:

Assess to see if there is any damage and throw out any unsafe food. Review food
preparation and storage/food safety in these guidelines for direction on what is unsafe
food.

Household Chemical Emergencies

Preparation:

- When using household cleaners or other hazardous materials keep them in their original containers and make sure that all original labels are on the container.
- Never store hazardous chemicals with food or mix with other products.
- Follow the manufacturer's instructions for proper use.
- Never smoke while using household chemicals.
- Clean up any spill immediately, using precautions if necessary.
- Have the number for poison control readily available the national Poison Control number is (800) 222-1222.

During:

- Make sure the individual:
 - Avoids breathing toxic fumes.

- Recognizes and responds to symptoms of toxic poisoning (difficulty breathing, irritation of the eyes, skin, throat, changes in skin color, headache or blurred vision, dizziness, etc.).
- Follows all directions given by an emergency operator/dispatcher.

After:

- Discard all contaminated items and make sure the area has been cleaned.
- If applicable, follow doctor's orders.

Fire Safety

- Smoke detection equipment must be maintained, tested, and checked monthly for battery replacement.
- Do not leave lit candles unattended.

In closing....

Thank you for the work you chose to do! Providing CLS services can be challenging at times. Following all the CMH, state, and federal rules and regulations is certainly challenging a lot of the time. But, as a Direct Support Professional, you have the opportunity to improve the health and quality of life for the individuals we serve. You can literally change lives!

References

- Fight BAC! Partnership for Food Safety Education (http://fightbac.org)
- Ready! Prepare, Act, Stay Informed Federal Government (http://www.ready.gov)
- Community Mental Health Partnership of Southeast Michigan (CMHPSM) Prepaid Inpatient Hospital Program (PIHP) Policies: https://www.cmhpsm.org/regional-policies
 - CMHPSM PIHP Policy and Procedure on Abuse and Neglect https://www.cmhpsm.org/regional-policies
 - CMHPSM PIHP Policy and Procedure on Behavior Treatment Committee https://www.cmhpsm.org/regional-policies
 - CMHPSM PIHP Policy and Procedure on Consent to Treatment and Services https://www.cmhpsm.org/regional-policies
- Michigan Department of Health and Human Services Medicaid Provider Manual http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf