

Program Abuse Prevention Plan

Program:	
Program Address:	
Date plan developed:	

EACH PROGRAM MUST ENSURE THAT:

- A. People receiving services are provided with an orientation to the program abuse prevention plan. This orientation must be within 24 hours of admission or within 72 hours for individuals who would benefit from a later orientation.
- B. The license holder's governing body or the governing body's delegated representative shall review the plan at least annually using the assessment factors in the plan and any substantiated maltreatment findings that occurred since the last review period. The governing body or the governing body's delegated representative shall revise the plan, if necessary, to reflect the review results.
- C. A copy of the program abuse prevention plan must be posted in a prominent place in the facility and be available, upon request, to mandated reporters, people receiving services, and legal representatives.
- D. If the assessment indicates that the vulnerable adult does not need specific risk reduction measures in addition to those identified in the program abuse prevention plan, the individual abuse prevention plan must document this determination.
- E. In addition to the program abuse prevention plan, an individual abuse prevention plan must be developed for each new person receiving services. A review of the individual abuse prevention plan must be done as part of the review of the program plan. The persons receiving services must participate in the development of the individual abuse prevention plan to the best of their abilities. All abuse prevention plans must be reviewed at least annually by the interdisciplinary team.

POPULATION ASSESSMENT (generalizations throughout entirety of license, not specific to current clients):

- 1. Age range of persons the program intends to serve throughout the entirety of the licensed program:
What age range are you willing to serve? Do you have a target population of Elderly, younger adults, or all adults?
- 2. What specific measures has the program taken to minimize the risk of abuse to people related to the age of people receiving services? *This should be for all INTENDED residents, not just current residents.*
Are there any specific risks related to age? If so, describe them generally. Do not include resident specific information. If not, state that there are no risks.
- 3. Gender of persons the program plans to serve throughout the license:
Indicate which gender(s) you are able to care for in your home or if you have a preference.

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4. What specific measures has the program taken to minimize the risk of abuse to people as related to the gender of people receiving services? *This should be for all INTENDED residents, not just current residents.*
Are there specific risks related to gender? Consider yourself, family members if applicable, past history from resident served, etc.
5. Describe the range of mental functioning of persons the program plans to serve throughout the entirety of the license:
Without providing resident specific information, describe the mental functioning level you plan to serve. For family license holders, the consideration should be based on license holder capacity to provide care without significant use of substitute caregivers.
6. What specific measure has the program take to minimize the risk of abuse to people as related to the mental functioning of people receiving services? *This should be for all INTENDED residents, not just current residents.*
How will you reduce risk, if there is any? Consider the following: the layout of your home, terrain around the home, do you live on a busy street or in a remote area that could pose risk, transportation to appointments, hobbies, and vocational training, etc.
7. Describe the general range of adaptive/maladaptive behavior(s) of persons the program intends to serve throughout the license:
Are you able to serve a wide range of adaptive and maladaptive behaviors without significant use of substitute caregivers? Generally describe the types of behaviors that you plan to provide care for.
8. What specific measure has the program take to minimize the risk of abuse to people as related to the adaptive/maladaptive behavior(s) of people receiving services served? *This should be for all INTENDED residents, not just current residents.*
How will you reduce risk, if there is any? Consider the following: the layout of your home, terrain around the home, do you live on a busy street or in a remote area that could pose risk, transportation to appointments, hobbies, and vocational training, etc.
9. Describe the general range of physical and emotional health of persons the program intends to serve throughout the license:
Are you able to serve a wide range of physical and emotional health? Consider the following: layout of your home, do you have stairs that would prevent access to all common areas of the home (including entering the home or to all levels of the home, are you physically able to assist individuals with physical needs if needed, what other obligations do you have that may impact your ability to provide care for persons with high emotional health needs without the significant use of substitute caregivers?

10. What specific measures has the program taken to minimize the risk of abuse to people as related to the physical and emotional health of the people receiving services served? This should be for all INTENDED residents, not just current residents.

Describe any risks related to physical and emotional health. Consider the layout of your home and the surrounding terrain. Are you close to an emergency transportation service, or would it take a while for emergency services to respond? If you care for someone with high emotion needs, how you minimizing risk to the resident(s)?
11. Describe the need for specialized programs of care for persons the program plans to serve throughout the license:
Are there any specialized programs that will be used in your home?
12. What specific measures has the program taken to minimize the risk of abuse to people as related to the need for specialized programs of care for people receiving services? *This should be for all INTENDED residents, not just current residents.*
Describe how you will minimize risk related to any specialized programs that are used, if any.
13. Describe the need for specific caregiver training to meet individual service needs:
If you do not have your OWN HCBS license, do not reference meeting those training requirements. Do you and any substitute caregivers need specialized training to meet needs? This could be related to medical, physical, mental/emotional health, or other needs.
14. What specific measures has the program taken to minimize the risk of abuse to people as related to the need for specific caregiver training designed to meet individual service needs?
How will you reduce risk related to training requirements?
15. Describe any knowledge of previous abuse that is relevant to minimizing the risk of abuse to people receiving services:
Without providing individual details, describe any knowledge of previous abuse.
16. What specific measures has the program taken to minimize the risk of abuse to people as related to the knowledge of previous abuse?
Based on any abuse indicated, how will you reduce risk to help ensure abuse does not occur again?

PHYSICAL PLANT ASSESSMENT:

1. Describe the condition and design of the home as it relates to safety for the people receiving services:
Considerations: Is the home single or multi-level, how will you ensure access and safety for people? What year was the home built, are there concerns about lead paint, need for replacement of roof, utilities, etc.? Homes must be maintained in good condition and repair. If the home has multiple levels, how will you ensure access for residents with mobility needs? What else is unique about your home?
2. What specific measures has the program taken to minimize the risk of abuse to people as related to the condition and design of the home in terms of safety for people receiving services?

What is your plan to maintain your home in good repair? How else will you reduce risk based on the design of your home?

3. Describe any areas of the home that are difficult to supervise:
What areas may be difficult to supervise? Bathrooms, bedrooms, upper/lower levels, etc?
4. What specific measures has the program taken to minimize the risk of abuse to people as related to the areas of the facility that are difficult to supervise?
How will you ensure adequate supervision to the areas that are difficult to supervise? What other ways will you reduce risk without restricting access? Any restrictions to areas of the home should be discussed with individual teams and your county delegated licensor.

ENVIRONMENTAL ASSESSMENT:

1. Describe the location of the home including information about the neighborhood and community in which the home is located (neighbors, friendliness, activities, resources, etc):
Where do you live? What is immediately around you and on the blocks or acres surrounding your home? Do you have any outbuildings?
2. What specific measures has the program taken to minimize the risk of abuse to people as related to the location of the facility, including factors about the neighborhood and community?
How will you reduce risk based on the factors described above?
3. Describe the type of grounds and terrain that surround the home (accessibility):
Is your property mostly flat? Is it uneven? Is it grassy? Do you have fields or water? Any gardens or farm animals?
4. What specific measures has the program taken to minimize the risk of abuse to people as related to the type of grounds and terrain that surround the facility?
How will you reduce risk based on the factors described above?
5. Describe the type of internal programming provided at the program:
Indicate here if you hold your own HCBS license, do not have an HCBS license, or contract with any agency that holds an HCBS license.
6. What specific measures has the program taken to minimize the risk of abuse to people through the type of internal programming provided at the program?
How will you reduce risk based on this?
7. Describe the program's staffing pattern:
For family adult foster care, the license holder must be the primary caregiver for all residents in the home. If you regularly utilize substitute caregivers, describe how and when they are used. If you have a personal or family emergency, is there a substitute caregiver available to step in?
8. What specific measures has the program taken to minimize the risk of abuse to people through the
Describe how you minimize risk of abuse based on the factors above.

_____	_____	_____
Print name and title of Governing body or Governing body's Delegated Representative	Signature	Date

Review: Name_____Signature_____Date

The review occurred at least on an annual basis.

The review included assessing the factors in the plan and any maltreatment determinations that occurred since the last review. The plan was update, if necessary.

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Legal Authority: Minn. Stat. § 245A.65, subd. 2