Center for Psychological Assessment and Treatment

PARTICIPANT MANUAL

INTRODUCTION

Welcome to our Team!

The Center for Psychological Assessment and Treatment (CPAT) is a quality provider of community-based day habilitation support and services to individuals with ID/DD. CPAT offers a unique evidence-based perspective to day habilitation as it is led by CEO Loren B. Amsell, PhD., a NJ and PA-licensed clinical psychologist with over 30 years' experience serving dually-diagnosed individuals. CPAT day habilitation services feature participation in small group education and boutique habilitation services, including training modules that reflect age-appropriate skills as well as individual rights and choices. CPAT services will assist the individual in the acquisition of skills and experience needed to participate in the community as indicated in the individual's Service Plan. Yoga, book club, etiquette, gardening, horseback riding, swimming, and culinary arts are a sample of the modules offered. At CPAT day habilitation services, individuals across a spectrum of capabilities, acuities, and physical needs will develop life skills, community integration preparedness, and individual personal development in a professional environment with exclusive clinical oversight. All CPAT day habilitation activities are approved by a CPAT officer and support participants as well as members of service participant's family. Service participants and their guardians, families, and support coordinators are welcomed to assist CPAT in the strategies and desired outcomes for the building of problem-solving skills, selfhelp, social skills, adaptive skills, daily living skills, and leisure skills needed for prosocial and adaptive community experiences. In addition to day habilitation services, CPAT offers a host of other clinical services. Please contact us for a full list of psychological services offered, including behavioral assessment, behavior support services, group and individual therapy, and evaluations.

We hope you find your time with us at our day habilitation to be a fun, enjoyable, and rewarding experience.

Sincerely, My Loren B. Amsell, Ph.D., NADD-CC Executive Director and CEO

OUR MISSION

Our mission, at CPAT, will provide a culturally-competent, safe, and state-of-the art day habilitation services where individuals served will engage in meaningful and purposeful activities designed to promulgate skill development, self-esteem, and independence moving toward vocational development and independent work abilities.

OUR WAY OF DAY HABILITATION

OUR ACTVITIES

CPAT Day Program - Through interaction with peers and staff and daily activities and adventures; individuals with intellectual and developmental delays/disabilities, Autistic Spectrum Disorder (ASD), behavior difficulties, mental health difficulties, and social difficulties will develop life skills, vocational preparedness, community integration and participation skills, and individualized personal development through activities listed above as well as individualized preferences for computer use, video games, movies, music, and arts and crafts. Individual's with acuity needs will receive individualized and specialized services that can include behavior support programming; counseling; assessment; and monitoring delivered by a highly trained Psychologist and/or behavior support professionals. In-home behavior support services can also be provided through the individual's supports program and with appropriate authorization(s).

CPAT DAY PROGRAM

SPECIALITY ACTIVITIES SCHEDULE - SAMPLE



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:30-9:00 a.m.	Pick up/Travel	Pick up/Travel	Pick up/Travel	Pick up/Travel	Pick up/Travel	
9:00-12:00 Chose from any of the events for that day and from 9-12.	Enjoy onsite - Spanish Class Zumba Pre-vocational: restaurant linens	Enjoy onsite - Women's Group Arts/Crafts Healthy Boundaries	Enjoy onsite - Chair Yoga Meal Planning TBC	Enjoy onsite - Men's Group Design your own meal with shopping list	Enjoy onsite - Wood works Weekend Warriors	
	Off we go Somerset County Library	Off we go Therapeutic Riding	Off we go Shopping trip to the Bridgewater Mall	Off we go Food shopping trip to Branchburg Shoprite	Off we go Somerset YMCA – Swimming	
12-12:45 LUNCH	Lunch	Lunch	Lunch	Lunch	Lunch	
Chose any activity from any of the events for that day from 12:45-3:30	Weather Zumba Pre-vocational	Women's Group Study Island/Computer Healthy Boundaries	Chair Yoga Pool Hall TBC	Men's Group Meal Planning Karaoke	CPAT Store Dessert Class Weekend Warriors	
	Spanish Class Zumba	Women's Group Art - Painting Art- Sculpting	Chair Yoga Gardening TBC	Men's Group Karaoke Photography	CPAT Store Scrap Booking Weekend Warriors	
3:30-5:00 Drop Off	Drop Off/Travel	Drop Off/Travel	Drop Off/Travel	Drop Off/Travel	Drop Off/Travel	

<u>Therapeutic Book Club</u> is a club a book is read/read to individuals) with a lively discussion about topics. <u>Men's/Women's Group</u> is a discussion group that focuses on todays' issues related to I/DD men/women. <u>Spanish Class</u> is a basic class learning introductory words in Spanish.

Healthy Boundaries is a discussion group about how to interact with others in a healthy/appropriate way.

OUR ADMISSION PROCESS

Our Admission process follows the State of New Jersey - Division of Developmental Disabilities Supports Policies and Procedures and is as follows:

ADMISSION REFERRAL AND DOCUMENTS REVIEW

- All admissions must be reviewed and communicated with the PD and CEO. Participants referred to CPAT day habilitation programs must first complete the preliminary referral form (on our Web Page). Once completed and submitted, CPAT will evaluate for appropriateness and then send, if indicated, CPAT's referral packet. The completed packet, after submitted, will undergo a review by the PD and CEO. Participant referral packets include, but are not limited to, the following:
 - New Jersey Comprehensive Assessment Tool (NJ CAT) & person-centered planning process as documented in the Person-Centered Planning Tool (PCPT);
 - Individual Support Plan (ISP);
 - Medical Information (including medical/diagnostic evaluation(s), school records, psychological evaluation within 5 years of referral date, and recent risk assessment, if applicable);
 - Psychosocial evaluation, if applicable.
- 2. Admission will be reviewed and identified with appropriateness of care and needs of the individual.
- 3. Internal notification of admission will precede admission notification to prospective participant, their families, and the Division of Developmental Disabilities.
- 4. Participants will receive a letter outlining acceptance or denial within 5 business days of receipt of referral packet.
- 5. Proprietary documentation of review and/or acceptance into CPAT day habilitation services are maintained by CPAT.

AUTHORIZATION

After need identification by the Support Coordinator and the person-centered planning process facilitated by the Person-Centered Planning Tool (PCPT) is established, individual needs and related goal will be identified and included in Day Habilitation Individualized Plan. These goals will be directed expected through participation in Day Habilitation services will be included in the Individualized Service Plan (ISP). The Support Coordinator will indicate, on the ISP and Service Delivery Report (SDR) noting the units, frequency, and duration for acceptance by CPAT Day Habilitation service. Prior authorization for services must be generated and received by CPAT before services can begin.

TRANSPORTATION

If indicated and within the catchment transportation area, defined as 5-mile round trip radius from the relevant CPAT Day Habitation Location. Transportation will be provided, if indicated, in compliance with the State of New Jersey's Division of Developmental Disabilities' Policies and Procedures for Day Habilitation transportation.

INDIVIDUALIZED EXPERIENCE AND GOALS

CPAT will develop strategies to assist the individual in reaching the outcome(s) related to the Day Habilitation services and can, if appropriate, designed to assist in progressing toward employment-related outcomes by providing education and training to acquire skills and experience that will potentially lead to the individual participating in the workforce (examples may include but are not limited to strategies to build social skills, address personal grooming concerns, increase attention to tasks, follow directions, etc.). These strategies will be completed within 15 business days of the date the individual begins to receive Day Habilitation services and will be documented on the Day Habilitation Individualized Goals Log. Strategies will be revised any time there is a modification to the ISP that changes the service specific outcome(s) and when the annual ISP is approved.

BEHAVIORAL SUPPORTS AND ACUITY SERVICES

Individuals in CPAT's Day Habilitation will have the availability to receive Behavior Support Services that can include but not be limited to

- Behavior Support Programs (if appropriate and indicated) can be developed for use at the Day Habilitation and in consideration of Acuity issues/tiering;
- Counseling (if appropriated, related to the Developmental/Intellectual Disability, and indicated) can be developed for use at the Day Habilitation and in consideration of Acuity issues/tiering;
- Psychosocial group interaction and interventions can be developed for use at the Day Habilitation and in consideration of Acuity issues/tiering;
- CPAT can also offer these same services to individual in Day Habilitation (without acuity designation) through the supports budget and delivered in the individual's home or group home. Please contract us for a more detailed description of these services.
- · Completion and submission of CPAT Intake and Referral Form.

SUSPENSION AND DISCHARGE

- 1. Suspension from CPAT day habilitation services will only occur after program participant and their families receive documentation of counseling and/or the problem continues to present as a violation of the rules and/or safety of CPAT program participants or property.
- 2. Written warning of potential suspension by PD or CEO will be served to program participant/guardian as well as Support Coordination Agency.
- 3. All Discharge notifications or requests will be communicated internally by the CEO prior to notification to the program participant/guardian, the Support Coordination Agency, and/or NJ DDD.

NON-DISCRIMINATION

- 1. Center for Psychological Assessment and Treatment (CPAT) will not tolerate discrimination based on race, sex, age, national origin, religion, sexual orientation, or disability.
- Admissions decisions will be made only based on sound clinical principles based on program appropriateness and other nondiscriminatory factors.

TRIAL/PROBATIONARY PERIOD

- 3. To help you be successful at CPAT's Day Habilitation Program you will go through a trial period that will proceed as follows:
 - Day visit/participation
 - Two-day visit/participation
 - One-week visit/participation
- 4. Questions during your trial period are strongly encouraged.
- 5. Depending on the outcome of the trial/probation period, and after mutual discussion and agreement, will determine CPAT's admission recommendation and outcome.
- 6. CPAT will go to considerable lengths to make your individualized Day Habilitation experience to be a positive and successful experience.

ABSENCES

1. Individuals authorized and participating in CPAT's Day Habilitation Program are expected to attend all scheduled and authorized sessions. Absences will need to be documented and explained. After 30 days of non-attendance, participants will be discharged.

CPAT's SAFETY AND EMERGENCY PROCEDURES

- 1. Emergency Drills for a variety of emergencies (fire, natural disaster, etc.) shall be conducted regularly to ensure individuals receiving Day Habilitation services understand the emergency procedures.
- 2. At a minimum emergency drills shall meet the following criteria:
 - a. Rotated between the variety of potential emergencies given the location and population served;
 - b. Conducted monthly with individuals served present;
 - c. Varied as to accessible exits: and
 - d. Documented to include date, time of drill, length of time to evacuate, number of individuals participating, name(s) of participating staff, problems identified, corrective actions for problems, and signature of person in charge.
- 3. CPAT shall maintain an Emergency Card for each individual. This card will consolidate relevant emergency, health, and medical information provided by the ISP into one, readily available and portable document in case of emergencies. The provider shall verify the information provided by the ISP and review and update the Emergency Card at least annually.
- 4. The Emergency Card shall include, at a minimum, the following information:
 - i. Individual's Name;
 - ii. Individual's Date of Birth;
 - iii. Individual's DDD ID Number;
 - iv. Emergency Contact Information;
 - v. Guardianship Information, if applicable;
 - vi. Diagnosis;
 - vii. Medications, if applicable;
 - viii. Individual Medical Restrictions/Special Instructions, if applicable;
 - ix. Medical Contact Information;
 - x. Primary Physician Information;
 - xi. Preferred Hospital;
 - xii. Healthcare Contact Information;
 - xiii. Administrative Services Organization (ASO), if applicable; and
 - xiv. Support Coordinator Contact Information.
- 5. CPAT Emergency Consent for Treatment Form CPAT shall discuss the individual's wishes related to emergency treatment and obtain a signed general statement of consent for emergent care that includes but is not limited to the following:
 - a. Medical or surgical treatment;
 - b. Hospital admission;
 - c. Examination and diagnostic procedures:
 - d. Anesthetics:
 - e. Transfusions: and
 - f. Operations deemed necessary by competent medical clinicians to save or preserve the life of the named individual in the event of an emergency.
- 6. CPAT's Medication Policies and Procedures are as follows:
 - All prescription medication shall be stored in the original container issued by the pharmacy and shall be properly labeled;
 - b. All OTC medication shall be stored in the original container in which they were purchased, and the labels kept intact;
 - c. CPAT will supervise the use and storage of prescription medication and ensure a storage area of adequate size for both prescription and non-prescription medications is provided and locked;
 - d. The medication storage area shall be inaccessible to all persons, except those designated by the service provider;
 - e. Designated staff shall have a key to permit access to all medications, at all times and to permit
 accountability checks and emergency access to medication; and no Specific controls regarding the use of
 the key to stored medication shall be established by the service provider;
 - f. Each individual's prescribed medication shall be separated and compartmentalized within the storage area (i.e. Tupperware, Zip-loc bags, etc.);

- If refrigeration is required, medication must be stored in a locked box in the refrigerator or in a separate locked refrigerator;
- h. Oral medications must be separated from other medications;
- i. OTC medications must be stored separately from prescription medications in a locked storage area;
- j. CPAT will have written documentation shall be filed in the individual record indicating that the prescribed medication is reviewed at least annually by the prescribing physician, i.e. prescriptions current within one year;
- k. A Medication Administration Record (MAR) shall be maintained for each individual receiving prescription medication:
- The staff person who prepares the medication must administer the medication and document it on the Medication Administration Record (MAR) immediately or upon return to the facility; and any change in medication dosage by the physician shall be immediately noted on the current MAR by staff, consistent with CPAT'S procedures;
- m. Verbal orders from a physician shall be confirmed in writing within 24 hours or by the first business day following receipt of the verbal order and the prescription shall be revised at the earliest opportunity;
- n. All medications received by CPAT shall be recorded at the time of receipt including the date received and the amount received (i.e. 30 pills, 1-5 oz tube, etc.);
- o. PRN (as needed) Prescription Medication PRN prescription medication must be authorized by a physician. The authorization must clearly state the following:
 - a. The individual's full name;
 - b. The date of the prescription;
 - c. The name of the medication;
 - d. The dosage;
 - e. The interval between doses;
 - f. Maximum amount to be given during a 24-hour period;
 - g. A stop-date, when appropriate; and,
 - h. Under what conditions the PRN medication shall be administered.

INDIVIDUAL HANDBOOK STATEMENT AND RECEIPT (Required prior to admission)

- This Participant Manual is a general guide and the provisions of this handbook do not constitute
 an employment agreement (contract) or a guarantee of continued employment. It is simply
 intended to outline the benefits and work requirements for all employees.
- It is understood that Center for Psychological Assessment and Treatment (CPAT) reserves the right to change the provisions in this Participation Manual and will provide notice of same.
- All CPAT Day Habilitation participants are expected to abide by the rules and regulations as set out in this Participant Manual.

I,	(participant)/	(guardian, if indicated) acknowledge that I have read or have ed to me by my guardian. By affixing my/guardian's signature below, I
		Center for Psychological Assessment and Treatment (CPAT)'s expectations
		s stated in the Participant Manual.
J B	and the same of th	
Participant	's/Guardian's Signature	Date
Participant	's/Guardian's Signature	Date