

2024 RESIDENTIAL SERVICES HANDBOOK

For Parents, Family and Friends



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OVERVIEW

Welcome to TERI Campus of Life

Moving out of the family home and into a home of your own is a major life transition. This is especially true for individuals with special needs and their families. In choosing a TERI home for your loved one, you have found a place that cares about the same things that are important to you—a home that is comfortable, safe, and designed to assure that each person living there is able to lead a “happy life,” however that is defined by the individual. Since 1980, TERI has ensured that the lives of those we serve are filled with new experiences, meaningful relationships, and the highest quality of care. We are your partner now, and in the future, as your loved one begins a new life filled with possibility and promise.

This handbook is your guide through this transition and introduces TERI, its philosophy, policies, and beliefs. In it you may find the answers to many frequently asked questions as well as information on the day-to-day practices at our TERI homes. We look forward to providing your family member, son, or daughter with the care they deserve.

Who We Are

Cheryl Kilmer founded TERI, Inc. as a nonprofit agency in 1980. Her primary goal, both then and now, is to improve the quality of life available to individuals with disabilities and their families. TERI started with just four residential homes and an adult day program and within 2 years, was cited by the State of California as a model for its quality of residential care. Now, TERI serves hundreds of families and has impacted national standards of excellence within this field of service. Throughout this time, Cheryl’s commitment never wavered: “Watching our students and adults with significant challenges lead happy and fulfilling lives...I can’t think of anything that compares to that.”

With over four hundred employees, multiple residential homes, 2 non-public K-12 schools, adult programs, family support services, and enrichment programs like therapeutic equestrian, organic agriculture, performing arts and culinary, TERI stands alone in the richness and diversity of lifespan services it provides for children and adults with autism and other special needs. TERI is tireless in pursuing new and better opportunities for those we serve.

It is our philosophy at TERI that every human being has the inherent right to enhance their development, maximize their potential, and be a valued and contributing member of society. This commitment extends to families – they are partners in all our endeavors.

WE ARE HERE TO HELP

Administrative Team

TERI has an administrative team that works closely together and is devoted to continuously monitoring, developing, and enriching all aspects of residential life. This team includes:

Chief Executive Officer (CEO)

The CEO is the visionary for the agency, both the present and the future, and provides oversight in all matters that impact TERI as a whole.

Board of Directors

TERI's committed Board of Directors supports our mission, vision, and philosophy and assists the CEO with our goals and with guiding TERI's future.

Chief Operations Officer (COO)

The COO is responsible for ensuring that the day-to-day operations of the organization are carefully and strategically managed.

Chief Financial Officer (CFO)

The CFO handles all money related matters for TERI. They ensure that the bills are paid and that resident accounts are in good standing. The CFO supervises the accounting and finance department and oversees all financial operations.

Chief Program Officer (CPO)

The Chief Program Officer oversees all our program services, providing support and resources for our Program Directors. These programs include Residential Services, CAL Program, Learning Academy, Country School, and Center for the Arts and Adult Education.

Director of Residential Services

The Director of Residential Services oversees the daily operations of the residences at TERI, Inc. They interview and hire direct support staff and managers for the residential homes and ensures they are trained to provide quality services that are the hallmark of TERI, Inc. You may have worked closely with the Director of Residential Services during the placement process up to this point.

Director of Adult Day Program Services

The Director of Adult Day Program Services oversees the Center for the Arts and Adult Education, TERI's Adult Day Program and the Vocational Internship Program.

Registered Nurse

The Registered Nurse oversees all the residents' medical issues on a day-to-day basis and is a vital part of the interdisciplinary team. They work closely with all medical professionals to ensure that our residents' health care needs are met. The RN assures that the proper forms are in place for the correct administration of medications, schedules and oversees medical appointments, and trains and supports staff with providing the best medical care to the residents.

Qualified Intellectual Disability Professional (QIDP)

Each QIDP or "Q" is the team leader for 3 TERI homes and is the coordinating member of the Interdisciplinary Team (IDT) for each resident. The QIDP wears many hats at TERI. You may have already worked very closely with them during the admission/intake process, and they may be your main contact person for anything related to your family member.

The QIDP maintains the permanent record established for each resident as well as conducting both the annual and quarterly reviews. The QIDP is responsible for continuous program training and implementation necessary to provide active support for the residents. In addition to developing the Individual Service Plans (ISP) for each resident in their homes, the QIDP is responsible for implementing and monitoring these programs once they are approved by the interdisciplinary team.

Residential House Manager

The Residential Program Manager is responsible for the day-to-day running of the home. They are in charge of ensuring that all needs of the residents are met and that the residence, as well as each individual, has the specialized foods, clothing, materials, and supplies needed.

Residential Direct Support Professional

These dedicated individuals are the backbone of the TERI team. These are the people who wake your loved one up in the morning, tuck them in at night, and care for them in between, day in and day out. Each home is staffed based on the needs of the individuals who live there. Generally, there are 2 to 3 staff on duty Monday-Friday from 6:30 a.m. until the resident leaves for work, school, or day program, returning when residents get home and working with

them until the nighttime staff arrive. At 9:00 p.m. our overnight staff takes over and they are there to offer support as needed throughout the night. On the weekends, staff work throughout the day (usually 8:00 a.m.-9:00 pm) until evening support arrives.

HOW WE GET THINGS DONE

The “On Call” System

TERI provides care for your family member/son/daughter 24 hours per day, 7 days per week and 365 days per year. There is always someone working in the home to care for the residents. In addition, TERI uses an “on call” system that is comprised of members of the administrative team. In the event of an emergency the on-call staff member responds as necessary, often in person, to provide support. Should such an emergency occur involving your family member/son/daughter, you may be notified as soon as it is safe to do so.

The Inter-Disciplinary Team (IDT) Approach

Nothing at TERI gets decided by one person. “Team Process” is a term you may hear often, and it is the way we operate. The Interdisciplinary Team (IDT) is comprised of the QIDP, who is the team leader, the Director of Residential Services, the Registered Nurse, adult day program or school provider representative, other clinicians who work with the resident, the Regional Center Service Coordinator, the resident, and you.

Each year a meeting is held to discuss your family member/son/daughter’s goals and progress. This is known as the Annual Individual Service Plan (ISP) meeting. This is a time for the entire IDT to come together to discuss progress made and plan for future goals. Prior to the meeting each team member reviews the resident’s progress. They look at strengths and needs, person-centered plans, future goals, and develop a list of recommendations for training and services to be provided during the upcoming year. **Conservators are required to participate in this meeting.**

This meeting then moves into a more detailed discussion of the progress that the resident has made over the past year. Your input is vital in creating these goals as is the input of ALL members of the team – no one IDT member’s thoughts or ideas take priority over another’s. As with any team, consensus is reached based on all member’s feedback on what is best for the individual. Remember that each residence is licensed, and the agency has policies and procedures, so it is necessary to consider all of this when it comes to decision making.

You may be notified in advance of the date and time of the annual ISP meeting. Every effort is made to schedule a date and that works for you.

Once an IDT meeting is over and a consensus is reached for the upcoming goals and objectives, ALL members of the team must work to support the decisions made by the team.

This is done by the careful recording of data on formal programs and by more informal observations and anecdotal information. The QIDP is responsible for reviewing this data on a regular basis and training and monitoring staff for accurate data recording practices. If a resident is not making progress, the QIDP may look closely at possible reasons for this. If no progress is made for a period of time determined by the QIDP, the program may be revised, or new instructional strategies used to better assist the resident in maximizing success.

Special IDT Meetings

Typically, the QIDP may schedule a “Special IDT Meeting” to discuss urgent matters that fall outside of the standard meeting schedule. These types of decisions could include the need to discontinue or change medications, the implementation of a safety plan for the individual if there are concerns about health and safety, a significant change in behavioral support, and/or urgent medical needs.

A Special IDT meeting is not called unless the situation needs immediate attention. For this reason, you should be prepared to arrange your schedule to attend should this ever be necessary. Special IDT meetings can take place in person, over the phone, or as a video conference.

Special IDT meetings may be called if the resident, family members, or conservators do not follow TERI rules or if specific rules need to be enacted for the health and safety of all involved. TERI, Inc. reserves the right to enact and/or change such rules as necessary. The decision of TERI management in such matters is final.

Active Support

Active Support is an approach that is fundamental to the provision of effective, person-centered support. It is a way of providing assistance to people that focuses on making sure that individuals are engaged and participating in all areas of their life. We often say that “every moment is a teaching moment” and this is exactly what Active Support is...finding those teachable moments each day.

Active Support is a way of life at TERI, and everyone involved with your loved one is committed to them reaching their full potential.

Educational and Vocational Programs

All of the residents living in a TERI home attend a school (for those who are 22 years old or younger) or an adult day program/vocational program during the week, and residential schedules are planned to accommodate this. Most of the adults who live in our homes attend the TERI Center for the Arts & Adult Education (CAAE); a few attend an adult program operated by another agency. CAAE is funded by the Regional Center. Transportation is provided for our residents, and the Center uses its own vehicles for activities that take place in the community.

The curriculum at CAAE is individualized and includes both center based and community training environments. Participants experience continuing opportunities to explore and expand their interests through participation in fine arts and crafts, theater, music, agricultural activities, vocational training, as well as opportunities to integrate with community members through volunteer programs.

For adults who need more intensive behavior support, TERI's Choices for Adult Learning (CAL) program may be an option. This program, the only one of its kind in California, offers a two staff to three clients support ratio and specializes in the delivery of behavior services. Admission into the CAL program is contingent on Regional Center approval and is limited to adults who have a particular behavior profile. If you have questions about this program, please contact the CAL Program Director.

Residents who are still school aged generally attend the local public school program. TERI does operate two nonpublic schools (The Learning Academy and The Country School). Tuition at a nonpublic school is paid by the student's home school district, and transportation door to door is also provided by the district. Students are usually placed in a nonpublic school if the public school is unable to provide a safe or effective educational environment. This is determined through an IEP team meeting.

Transfer and Discharge

There are times when it is necessary to transfer a resident from one TERI home to another, or from one bedroom in a home to another. This may be because of aging and associated

mobility or medical needs, behavioral needs that are better met in an alternate setting, or other circumstances that occur as our residents grow and change.

Because our homes regularly get together for social activities, and many of our staff know residents from other homes, a move to a new TERI home is often accompanied by a chance to live around friends and familiar staff. Transfers between homes are treated in a comparable manner to admissions and your family member/son/daughter may have numerous opportunities to visit the new home before the transfer takes place. Transfers are carefully considered and are done with your input whenever possible, however, final decisions are made by TERI Management based on what is best for both the person and other residents.

Very rarely, residents may be discharged from TERI. Discharges can occur for various reasons and are never taken lightly. In our history, most discharges occur when an individual's medical needs are so intensive, they cannot be met within the home setting. Infrequently, an individual's behavioral support needs require a higher level of support/staffing that may be best met in another residential setting. Meetings are held to discuss the reasons for discharge, and a plan is developed to help the transition to the next placement go smoothly. An appropriate notice may be provided based upon the circumstances of the discharge.

Consents and Release of Information Forms

Upon admission we ask you to sign various consents and release of information forms. Consent forms are used for many reasons, from taking photographs for use in TERI materials and social media to consents to administering medications.

Release of information forms enable us to share information about your family member/son/daughter with outside agencies and parties. Publicity release forms may be provided so that your family member/son/daughter can be part of the photos that are posted on the home's Facebook pages or used for publicity purposes. No information about your family member/son/daughter may be shared without your written consent.

Confidentiality

The information you have provided about your family member/son/daughter is privileged and confidential. Only select individuals have access to the permanent record that is created and maintained for each resident. These permanent records are kept in a secure location in each residence and/or in online files. Department of Public Health and San Diego Regional Center representatives have access to the residents' charts and information upon request.

TERI complies with all Federal HIPAA laws and regulations and all confidentiality requirements.

HOW WE HANDLE MEDICAL ISSUES

TERI takes the health and well-being of our residents very seriously. We provide the best possible health care for our residents at all times. We use a variety of health care providers in and around the north San Diego area. You may always select your own health care provider if you have one that you prefer and if it is feasible for our staff to easily transport this individual. If you choose to use your own health care provider, TERI's medical staff must be included in all appointments and must be able to directly communicate with the physician.

General Health Care

The Medical Director at TERI is Dr. Mark Sendar, who specializes in caring for patients with autism spectrum disorders, intellectual disabilities and other types of developmental disabilities and has worked with TERI and the residents for over 20 years. Dr. Sendar sees residents at least bi-monthly at our Health Services office in the CAAE building. He oversees the health care for all our clients, to include medications, labs, and special procedures.

Medical/Dental Care

All residents have a physical examination within 48 hours of admission to TERI. In addition, each resident is required to have recurring medical exams as determined by a physician which may include, but are not limited to, eye examinations, hearing screenings, gynecological exams, dental exams, physical examination, and blood work. All medical examinations are billed to MediCal, Medicare, or your private insurance company directly by the provider.

Parents/Family members cannot request tests, special procedures, or special diets without approval from the team.

Dental exams and cleanings are provided regularly depending upon the individual's needs. Generally, one cleaning per year is covered by MediCal. Additional dental care, exams and/or cleanings can be arranged and paid for privately.

Urgent Care

There are times when your family member/son/daughter may not be feeling well and a regular appointment with the general practitioner cannot be obtained. There may also be times when medical care is needed on an urgent, but not emergency, basis. In these cases, TERI utilizes an Urgent Care Center authorized by the insurance coverage of the resident. We have

developed long-term relationships with several North San Diego County Urgent Care Centers, and the medical personnel at these facilities are very familiar with our residents and staff. Residential staff bring along all necessary information ensuring quick and efficient treatment.

Emergency Services

In the event that a resident requires emergency medical care, they may be transported by staff to a local hospital. If immediate emergency care is necessary, 911 may be called and residents may be transported to the nearest hospital via ambulance. A residential representative may always go along so that your loved one is comforted by a familiar face during what can be a very scary time for them. Residential staff may bring along all necessary personal and medical information. You may be notified as soon as possible after an emergency—please understand that your loved one’s care is our first responsibility. You have already signed a consent form to admit and treat in case of emergency, so there may be no delay in caring for your family member/son/daughter.

Hospitalization

Should it become necessary for a resident to be admitted to the hospital or a rehabilitation facility for care, TERI procedure is to have someone with them as much as possible—at a minimum during waking hours. We find that this assists nursing staff who are unfamiliar with a resident’s communication style or unique needs and provides comfort and added security to the person hospitalized. We routinely ask family members to assist with the necessary extra staffing required during a hospitalization. Unless all staffing is provided by the family, you may be asked to contribute toward the cost of providing a staff person to be present.

Medications

All medications must be prescribed by a physician, have a written prescription signed by a physician, and dispensed by the pharmacy. They provide prescribed medications, both oral and topical, and necessary paperwork related to medication administration for each resident. No medication may be administered without a written doctor’s order; this includes over the counter medications.

No new medications, supplements or over-the-counter medications are to be brought into the residential home unless there are doctor's orders for each one and only after the RN has first been informed and the team has agreed to their use.

Psychotropic medications require written consent from a parent or Conservator before the medication can be started. There may be times when verbal consent is temporarily accepted to get a medication started for an individual in need.

Prescription medications are billed directly to MediCal and/or Medicare or billed to your private medical insurance company. Medications and supplements can be paid privately, as well.

Medications are provided to you when you take your son/daughter/family member out for a daytime or overnight visit. We ask that you give at least three days' notice to allow the pharmacy and/or staff to package medications specifically for your visit.

Family members **CANNOT** deviate from giving medications as prescribed by the doctor should the resident be with them when medications need to be given. This includes withholding a routine medication; giving a PRN ("as needed") medication in a way not prescribed by the physician; giving additional medication; administering medication on a different schedule, or adding a new vitamin, cream or supplement not prescribed by a doctor. Our nursing staff must know that all medications are given as prescribed, and that no new medications have been introduced, to ensure the best possible medical care.

Per our licensing requirements, we may not give any medication or supplement without a physician's order. Supplements that are not ordered by a physician but are desired by the resident or his parent/conservator are to be purchased by the resident or parent/conservator and must be accompanied by a doctor's order.

Psychiatrist

Dr. Robert Bradley Sanders and his partner Dr. Amanda Brannen serve as the psychiatrists for our residents who need psychotropic medications. They see the clients and meet with QIDP's and Nurses, at least monthly, to review behavioral status and use of medications for behavioral support. Family members are notified by the RN of any recommended changes to an individual's psychotropic medication regime and asked to consent to the changes.

HOW WE HANDLE BEHAVIORAL ISSUES

TERI utilizes a structured behavioral approach when working with our residents. Positive behavioral support and reinforcement are a way of life and used in all aspects of programming.

Many of our residents exhibit problem behaviors that we are working hard to replace or eliminate. Members of each IDT at TERI have extensive experience in all forms of problem behavior and many techniques are used to support residents. Each resident's IDT reviews and approves an individual's Behavior Support Plan (BSP), however minor modifications can be made without calling a team meeting.

The ways in which we approach problem behavior are closely monitored and reviewed by our licensing agencies. All aversive and/or restrictive procedures must be approved by you as well as by the Human Rights Committee (see page 16).

Should a change of condition bring about a new psychiatric/medical diagnosis, this may be discussed at an upcoming IDT meeting.

Behavior Programs/Plans

Behavior programs are developed as part of a Team process by a behavioral specialist with input from the QIDP. These plans address the nature of the behavior; the function of the behavior (why the behavior happens); replacement behaviors or new skills an individual must learn; staff response to behavior; emergency response; and reinforcement schedules. Once completed and approved by the IDT, Direct Support Staff are trained in individual protocols. Once each year, the TERI Human Rights Committee (see page 16) reviews and approves all Behavior Plans.

Restrictive Techniques

TERI uses the least restrictive techniques possible for problem behavior.

Restrictive techniques are only considered when all other techniques have been attempted and deemed unsuccessful or when the immediate safety of the person or others is at risk. All staff participate annually in positive approaches to behavior support and behavior safety trainings. The primary focus of these classes is how to AVOID using restrictive procedures whenever possible.

The use of these techniques and procedures is closely monitored and is approved by the Human Rights Committee (see page 16), established by TERI. If you wish to have a full description of any of these techniques or procedures, ask the QIDP.

It is understood by staff that they may only utilize restrictive techniques which have been written into the approved individual behavior plan for any particular resident. However, there are rare times when a restrictive technique that is not written into a plan must be used to keep a resident safe. When this happens, it is called an “Emergency Intervention.” When an emergency intervention is used, the QIDP, Residential Director and you are notified as quickly as possible.

TERI staff are only permitted to use behavior intervention and support techniques that are approved and taught by TERI. Given this, staff may not be able to use behavior intervention techniques that families employ in their home.

Because environment is such an important factor in behavior (both positive and negative), you may receive reports that your family member/son/daughter exhibited a behavior that is completely new to you. Conversely, behaviors that may have been a problem in the family home setting may not be a problem at the current residence. This scenario is common. If you have questions about behaviors, please contact your QIDP.

Medications for Behavior Management

Many of our residents take some form of medication for the purpose of behavior support. These medications are generally prescribed by the consulting psychiatrist—less often by the primary physician. If your family member/son/daughter has a historical or current need for psychiatric care, he/she may be introduced to the psychiatrist who may then consult with TERI staff for ongoing treatment and care. Your feedback is very important in maintaining effective care. Please routinely share with the QIDP all information related to a resident’s behaviors and medications.

In all cases, TERI prefers to use antecedent strategies (changing what happens in the environment just before a problem behavior happens) and consequence strategies (what happens after the resident displays a problem behavior) to help individuals change behavior. In some cases, these strategies are not sufficient, and the resident is a danger to himself, others, property, or simply very uncomfortable (example: extreme hyperactivity) much of the time. In these situations, the decision about whether or not to use medication for behavior control begins with the psychiatrist. Behavioral profiles are shared, and the psychiatrist then decides whether there might be a medication that would make the client less anxious, angry,

depressed, etc. This information is then discussed by the TERI team and your feedback is gathered.

Medications for behavior support and their effectiveness are monitored closely by the physician, psychiatrist, and members of the TERI team. This review happens on a monthly basis but may occur more frequently if the need arises. Use of these medications is also reviewed by the Human Rights Committee (see page15) quarterly. If a resident's behavior improves and remains stable, decreasing these medications is always considered. Conversely, if a resident's behavior and stability deteriorate, increases of these medications may be considered or new medications may be prescribed.

Some families are against any form of medication for behavior support, regardless of the situation or circumstances. It is important to understand that, while your feedback is of critical importance, if the majority of the team believes medications are warranted, your consent may be required in order for TERI to continue to provide services to your family member.

This consent, in writing, is necessary prior to TERI's administration of psychotropic medication(s). Psychotropic medications are defined as any drugs prescribed to affect the mind, emotions, or behavior of an individual. You may also be asked to renew this written consent on an annual basis. Please be aware that abruptly stopping or changing many psychotropic medications can be harmful to the individual. If you decide to revoke your consent for the administration of medication for behavior support, you must do so with advance notice by contacting your resident's QIDT and asking for a Special IDT meeting.

Your attendance at the Special IDT meeting for this purpose is required. If a majority of the members of the IDT agree with the medication adjustment or that a new medication is appropriate and necessary, we expect the family/conservator to support that decision as a condition of continued placement. Revoking consent for medication in cases such as this could result in your family member/son/daughter being unable to continue to live in a TERI residence.

THERAPY

For individuals who have autism spectrum disorder and private insurance (excluding MediCal/Medicare), TERI is typically able to provide Applied Behavior Analysis (ABA) therapy in the residential setting. Depending on the insurance company, TERI may already be an approved vendor or may be able to become an approved vendor. In very isolated cases, if

TERI is not able to provide the ABA therapy, the team may agree to using an outside vendor. If you are interested in having your family member/son/daughter receive ABA therapy in the home, please let your QIDP know.

Some residents, though adults, continue to benefit from access to speech (including augmentative speech systems such as communication devices), occupational, or physical therapy. If a resident has private insurance that may cover these therapies, talk with your QIDP to see whether the home can coordinate therapy sessions. Often, parents may choose to privately pay for consultation or ongoing speech, physical, or occupational therapy. We are happy to assist in assuring that these services are available whenever possible.

Other types of therapy may be accessed by our residents through private pay. This could include, but is not limited to, massage therapy, equestrian therapy (beyond that which is provided to some residents as part of their CAAE, CAL, or TERI nonpublic school program), cognitive therapy, and animal assisted therapy. Please note that TERI may refuse to allow residents to participate in a therapy that could cause harm to the individual (example: chelation therapy not related to a specific medical condition).

The Human Rights Committee

The Human Rights Committee is a committee comprised of the QIDP's, RN's, Residential Director, a representative from the Regional Center, a TERI residential parent volunteer, and community volunteers who may or may not have any direct connection to TERI. This committee meets at least once quarterly to review and approve behavior plans as well as to review all emergency interventions that have occurred. In addition, the Committee carefully reviews the use of all medications for behavioral management. This committee makes recommendations to TERI on how best to preserve and maintain the rights of our residents.

Abuse, Neglect and Exploitation

In the event that abuse, neglect or exploitation is suspected, we ensure the safety of the resident immediately. The on-call QIDP is notified. Statements are taken from all staff who may have witnessed or been involved in the incident. In cases where the resident can report, they are also interviewed. In addition, there are other levels of reporting that occur, including several at the state level. Law enforcement may be contacted, if necessary. Under no circumstances does TERI continue to employ staff who, following an investigation, have engaged in abuse, neglect, or exploitation.

Grievance, Concerns, Complaints

We understand that you may have concerns from time to time. If you have a concern, we ask that you bring it to our attention immediately so that we may resolve it quickly. Begin by reporting concerns directly to the QIDP. If necessary, or if you are not satisfied, the next step is to contact the Residential Director. After the Residential Director, the Chief Program Officer, Chief Operations Officer, and finally the Chief Executive Officer complete the chain of the grievance process.

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, LICENSING AND CERTIFICATION DIVISION

Licensure and Accreditation

TERI, Inc.'s homes are licensed through The State of California, Department of Public Health. TERI's residences are ICFDD-H level homes (Intermediate Care Facilities Individuals with Developmental Disabilities-Habilitative). All homes receive funding from the Medicaid system.

TERI is visited annually by representatives of the State of California, Department of Public Health, Licensing and Certification Division. They look at all aspects of the home and the resident's life within the home and community, making a determination about whether the standards set by the State are being met.

The representatives of the Licensing and Certification Division also address complaints received to their office by concerned parties. You may, at any time, call the Licensing Division to report a complaint. They may visit the residence and conduct a thorough investigation. Following the investigation, you may receive a letter stating any findings. You may make this call anonymously and your confidentiality may be maintained. You can reach a representative of the Licensing and Certification Division by calling 1-619-688-6190.

BASICS ABOUT LIFE IN TERI RESIDENTIAL HOMES

Basic Care

During the first 30 days that your loved one lives at TERI, staff assess their ability to participate in a wide range of daily activities and the level of support they may need while involved in these activities. All areas are assessed, including bathing, dressing, toileting, tooth brushing/flossing, dining, leisure, community access, etc. If an individual requires support in any area of daily living, staff may assure that they receive this support, or they may complete the activity for the resident (example: tooth brushing; hair washing; etc.) until the resident gains more skills. New skills that would improve a person's self-sufficiency or quality of life are prioritized and typically included in the Individual Support Plan goals. Staff assure that tasks are done correctly and focus on cleanliness and proper hygiene. Once a resident has reached their optimum level of participation in any skill area, staff continue close monitoring to ensure maintenance of these skills and that high standards of care are met.

Hair Cuts

We provide or take our residents for haircuts regularly. If you wish to assume this responsibility you are welcome to, but please know that if your family member/son/daughter needs a trim to maintain a clean and neat appearance, we may take them for a trim. TERI pays for the basic haircut; however, any special treatments, products or services are paid for out of the resident's funds. If there is a particular way that you would like your family member/son/daughter's hair cut or styled, please let the Program Manager know so they may give that information to the stylist.

Clothing

The staff and the Program Manager work together to see that our residents have enough clothing in the correct size and in good condition. Clothing is purchased using funds from the resident's personal account. You may also purchase clothing for your family member if you desire or you may add additional funds to their Personal and Incidental Account (P & I) that staff can use for purchases. If an item becomes damaged or ill-fitting, it may be replaced.

We mark all residents' clothes using a permanent marker on the tag or another spot that is not visible. This prevents the sharing of clothing between residents and assures that the right

clothes end up in the right location. We highly recommend that all clothing be easy care as there is little time for ironing or hand washing delicate items. If your family member/son/daughter routinely needs clothing altered (example: pants hemmed), it would be very helpful if you arranged for this to be done.

Many families are very particular about the clothing they want their resident to wear—rightly so! Please note that TERI is committed to having all residents wear clothing that is age appropriate, helps them fit in with mainstream styles, and is easy to manage. For example, if someone cannot button or zip their pants, try to find ones that are equally attractive but are a pull on/off style. If your loved one is really attached to certain clothes or accessories that are not age or functionally appropriate, they may certainly have these, however we might encourage them to wear them around the residence rather than to public events.

Each resident has at least one and sometimes two days each week to do their laundry. It is asked that you initially provide enough clothing for your loved one to last between scheduled laundry times.

Money and Financial Matters

Residents living in ICFDD-H level homes receive \$35-\$50 each month from Social Security or Supplemental Security Income. The TERI Finance Department is responsible for keeping track of individual residents' accounts and disbursing funds as necessary. Soap, shampoo, toothpaste, and other general toiletries are provided by the TERI. If you wish to use particular items or brands for your loved one, these are paid using the residents' own funds or provided by you.

Residents also use their own money for personal items, special toiletries, DVD players, games, clothing, shoes, etc. As you can see, \$35-50 doesn't stretch very far. It is recommended that you supplement this account as you are able. Should you purchase specialty or preferred hygiene or personal items and wish to be reimbursed from your loved one's personal account, please provide receipts to your QIDP.

Day and Overnight Visits with Family and Friends

The number of nights a resident can sleep somewhere other than their residence is regulated by MediCal. Per our licensing requirements, each resident is allowed 73 overnight visits per calendar year. It is good practice to keep visits within reason so that active treatment and training provided by the residence can be maximized. If a resident is hospitalized for any reason, these nights **do not** get deducted from the 73-night limit. If a resident has more than

73 nights away from the residence in any calendar year, MediCal may not pay the cost of care for those nights and it becomes your responsibility. You may be billed the current daily rate. The TERI Finance Manager, who is responsible for billing MediCal, tracks the number of nights used. You may contact the TERI finance department if you have any questions about the number of nights you have used in any given calendar year. The QIDP may also contact you if you are getting close to the limit on overnight visits.

Our licensing agency allows an **unlimited** number of day visits. Residents can be picked up as early as 8:00 AM and should be returned no later than 8:00 PM so they can get back into their evening routine before their established bedtime. Please arrange your drop-off and pick-up times with the program manager, ***in advance***. **Drop off and pick up times need to be arranged to accommodate the activity schedule in the house.**

We have found that clients fear missing out on fun weekend activities. As such, we routinely coordinate, “all house family home visit weekends.” This works great and nobody misses any fun weekend outings. Please see your QIDP for family home visit weekend information.

We ask that you call in advance for a visit. We do have an open-door policy, but our residents are often out and about in the community. This is especially true on the weekends. If you are taking your loved one for a family home overnight visit, we ask that you call at least 3 days in advance. This allows staff enough time to assist the resident with packing a bag and to get medications ready for you to take home.

If you wish to visit with your family member/son/daughter at their home, we encourage you to do so. We do ask that you be mindful of the other residents living in the home and respect their privacy. We also ask that you limit the number of people that come along for the visit. Many of our residents are sensitive to having unfamiliar people in their home, so please respect this when you visit. Please schedule visits at your family member/son/daughter’s home so that they end by 7:00 PM.

Telephone, Cable TV, Internet, and Mail

Our residents love receiving mail!! Letters, cards, and packages are eagerly awaited by all. Mail is opened by the resident, with assistance if necessary. Privacy is maintained with written correspondence.

All of our homes have a group Facebook site. This is where the staff and QIDP's post pictures of the residents at events, on community outings and having fun in their everyday activities with friends and housemates. Be sure to "like" us on Facebook and regularly check out the pictures. We would love to "friend" any friends or family of our residents so they can stay in touch with all that is happening in the resident's busy life at TERI. A happy life is all about good relationships—please help us build these for your loved one!

Residents are permitted to have personal cell phones, technology, and computers, however any costs associated with these types of items are at the resident's expense, including hook-ups, additional services, or replacement costs should equipment be lost or broken by the resident.

Cable TV is provided by TERI in the common areas of the residence, typically the living or leisure rooms. If a resident wishes to have cable TV installed in his/her bedroom, the cost is assumed by the resident and/or their family. You may purchase a television set for your loved one's bedroom. TVs in individual bedrooms are best mounted on wall brackets which we ask that you include as part of installing a private television. We are happy to do the installation at your request.

Currently there is no internet service in any of the resident bedrooms. Should you wish to have internet installed for your family member/son/daughter, you may do so at your expense. TERI is not responsible for damage caused by a resident to his/her personal items.

Phone Calls/Keeping in Touch

Many of our residents love making and receiving phone calls! Please try to keep calls to the residence phone somewhat brief as there is generally only one line into each residence. There are no private lines in any of the bedrooms, however a private line can be installed upon request and commitment for payment.

Many families, especially when their loved one first moves into their new home, are anxious for news about how things are going. We fully understand this! Some family members, however, may make multiple calls each day to "checkup" on how things are going. We hope you understand how disruptive this is for our staff. They are responsible not only to your family member/son/daughter but also to others living in the home. The best solution is to work out a system with the QIDP that meets the needs of both you and the home.

Should you choose to call to check on your family member/son/daughter during the day with questions about residential or medical issues, we ask that you contact the QIDP. Residential

Direct Care Staff are off duty during the day program hours and are not available to you by phone.

TERI always has a QIDP on-call during the weekend hours. This individual may not be the QIDP who is assigned to your family member/son/daughter's residence, but they are authorized to help you access information you may require. If necessary, you can contact the Direct Care Staff at the residence on the weekends. If you are unable to reach them, you can call the QIDP on duty. Unless it is urgent, we strongly recommend that you check up on your resident during the week, speaking with the QIDP who oversees their home. This approach may give you the most accurate information.

We greatly appreciate your efforts in this regard, and we want to answer your calls. Scheduling these may assure that everyone has the time to talk and share information.

If your family member, son/daughter attends one of our schools or adult programs and you want information about that program, please contact the designated supervisor/teacher, not the instructors.

Bedrooms

TERI provides furnishings including a single bed, dresser, and nightstand. Other furniture may be acquired for the resident. You are allowed to bring the resident's personal furniture if there is space in the bedroom. Mattresses and box springs are provided and replaced as necessary.

TERI encourages our residents and their families to decorate their rooms in a way that reflects each individual's interests and preferences, including the ability to hang items on walls. Window treatments are provided by TERI. Any items placed in bedrooms must be durable and replaceable. If your family member/son/daughter shares a bedroom with another resident, we like the furnishings to be compatible so that the appearance of the bedroom looks neat and organized. We may help you coordinate with the roommate's preferences so that both people are happy with the end result!!

TERI furnishes basic bed linens, pillows, and towels. If you wish to purchase special sheets, comforters, and other bed linens this is welcome, but not necessary.

In the event a resident's personal property is damaged by another resident, it may be the responsibility of the individual who damaged the item to repair/replace each item, which may include a financial charge to the parents/family of that individual if their funds are

unable to cover the cost. If an item is damaged by the resident him/herself, it may be up to them to replace it.

Please be advised that should your loved one damage household items (outside of typical wear and tear), the resident and/or family may be responsible for the cost of repair or replacement.

TERI'S HEALTHY LIVING CULTURE

TERI's Healthy Living Culture ensures that the health and wellness of each person served by TERI is a top priority. TERI's Physical Fitness Director and Culinary Director have set the highest standards possible in the interest of our residents' health. The policies they have developed are based on proven strategies to promote health and fitness. By following these guidelines and setting the best possible example, you ensure your loved one's long-term wellbeing.

Food & Drink Guidelines

Many of our residents are at a disadvantage health-wise due to the nature of their special needs, resulting in the necessity of being even more vigilant than the "average person" when it comes to diet and exercise. We understand that many of our residents LOVE their sodas and fast food. We also know that they come to love other, healthier foods, just as much! TERI is very committed to its culture of health and fitness, and we ask that you honor this by supporting our policies and procedures in this regard, even when the resident is in your care. We have countless recipes and healthy eating resources you can access—just ask your QIDP for the information.

We are SODA and FAST FOOD FREE at all TERI PROGRAMS. Please do not bring these types of food or drink into any of our homes or other programs. If you do so, they may be returned to you or disposed of by staff.

	NOT Allowed at TERI	Allowed at TERI
Drinks & Beverages	<ul style="list-style-type: none">• Soda or diet soda• Drinks containing excessive sugar• Drinks containing non-caloric sweeteners (Equal, Aspartame, Splenda, Sweet-n- Low, etc.)• High sugar, high fat, high calorie drinks and smoothies from Starbucks, Jamba Juice, Slurpees, etc.• Monster drinks, energy booster drinks, sports drinks, etc.	<ul style="list-style-type: none">• Sparkling or purified/filtered drinking water• Iced or hot tea• V8 Tomato Juice• Skim or fat-free milk• 100% fruit juice• Coffee (decaf for residents)

	NOT Allowed at TERI	Allowed at TERI
Foods	<ul style="list-style-type: none"> • Bakery items full of excess sugar (donuts, cinnamon rolls, Pop Tarts) • Fried snacks and chips • Fried foods • Candy in excess of an individual's approved plan • Whole milk ice cream • Cereals high in sugars • Fast food of any kind 	<ul style="list-style-type: none"> • Bakery items made from TERI recipes, or other healthy baked goods. • Baked snacks and chips, nuts and seeds, cheese, turkey jerky and veggies • Fresh fruit, dried fruit, and fat free yogurt • Frozen yogurt or low-fat/low cal ice cream • Oatmeal, Fiber One, Chex, Kashi cereals • Restaurants who use fresh ingredients and with low fat menu options.

TERI consults with a registered dietician who works with each of the residential homes. She assesses each resident's needs, likes, and dislikes on a semi-annual basis. The dietician is a member of the IDT and prepares reports for the IDT related to diet and nutrition. This individual, as well as our Fitness Director, monitors weight, height, overall fitness level, and lab information to ensure proper nutritional/health status and addresses any dietary or fitness needs in a timely manner.

Each home supplies residents with three balanced meals a day as well as a minimum of two snacks. Each resident has their own diet order as well as a listing of any dietary restrictions, needs, likes, and dislikes. These are all considered in meal planning, shopping, and preparation. All residents are encouraged to assist in the preparation of meals, and kitchen skills are practiced daily.

Snacks at TERI homes consist mainly of fruits and vegetables. Occasionally a "special" snack may be offered. Likewise, desserts are generally sugar free. Again, the occasional sugary/salty snack or dessert may be offered, but this is rare and usually reserved for birthdays or special celebrations.

Exercise is an integral and important part of the daily routine in each home, promoting good health and weight management. Exercise programs are individually developed to assist in maintaining optimum health.

Pets

Some TERI homes have “residence pets.” This could include specially trained companion dogs, cats, fish, or reptiles. These animals belong to the home at large, and staff as well as interested residents participate in their care. TERI does not allow personal pets to live with the residents. Please notify the QIDP if your family member/son/daughter has any allergies or fears related to pets.

Outings and Activities

TERI works hard to ensure that our residents keep busy and have ongoing opportunities to participate in their community by engaging in a wide range of activities they find fun. These include horseback riding at our Therapeutic Equestrian Program, movies, sporting events, live performances, and dining out. Several of our homes have pools, so outdoor BBQ’s and pool parties are a favorite. If there is a specific hobby or activity your family member/son/daughter enjoys, be sure to mention it to the QIDP to see how it might get integrated into the residence activity schedule.

For some residents, attending church, synagogue, or other religious services is very important to them and their families. Many residents regularly attend religious services. While we may not be able to accommodate everyone’s specific preferences due to time and staffing constraints, please be sure to let us know if your family member/son/daughter would like to be involved with a religious community.

Your Involvement with TERI, Inc.

We are so glad to have your family member/son/daughter living at TERI. We are also glad to have you as part of the team and TERI Family. There are many ways in which you can support TERI.

Please keep us informed of changes to telephone numbers, email addresses, and other contact information. This enables us to reach you quickly and efficiently in case of emergency, or to just send you updates on your family member. Much of our communication with you may be done via email, so accurate email addresses are essential. In addition, we ask that you leave us contact information when you are vacationing. Again, this allows us to be able to reach you should we need to do so.

As part of the TERI family, we ask you to support TERI, financially and through participation in events. TERI plans and hosts fundraising and “fun raising” events. The fundraising events are held to help us raise money to support our programs and meet various short and long-term goals. The “fun raising” events include our annual Spring Fling, Halloween Chili Cook-off, and Snow Ball, with the sole goal of getting everyone together to have a great time. Please remember that friends and extended family are very welcome at these events.

We are sure your decision to become part of the TERI family was for access to our extensive array of enrichment activities, including horseback riding, theater and performing arts, fine arts, ceramics, music therapy, recreation therapy, adaptive sports, access to culinary arts training, agricultural arts training, and campus vocational work sites such as our Common Grounds Café. The sustainability of these enrichment activities depends on you! To assist, our families contribute monthly. Contributions to TERI’s Sustaining Fund are tax deductible.

We appreciate any form of support you can give, not only financial but also your time and talent. We have many volunteer opportunities, and we can always use help getting the word out about TERI and the wonderful, standards-setting, work we do every day. Please share our story with colleagues, family, and friends. ***At TERI, we change lives.*** This is a cause that many people would love to support if they only knew....

Another way you can support TERI is by supporting the direct care staff with positive feedback, compliments, and simple thanks when deserved. This is SO appreciated and totally makes their day. Although the administration thanks them as often as possible for the hard and tireless work they do on behalf of our residents, it means even more coming from parents and family members.

We expect you and your friends and family to treat our staff the way we treat them and your loved one - with kindness, dignity, and respect.

Holiday Gift Giving to Staff

We are so grateful for the appreciation you show our staff in the residential program. Once a year, we conduct a Holiday Staff Bonus fundraiser so TERI can provide a cash bonus to all TERI staff who are so hardworking and devoted to your loved ones. This bonus means so much to our staff. We ask you to contribute to the TERI Holiday Staff Bonus Fund instead of giving individual cash gifts to staff. Contributions to the TERI Holiday Bonus Fund are tax deductible.

If you would like to also recognize specific staff members, TERI's policy limits staff's ability to receive more than \$25.00 gift card per person. Gifts to the house for meals out or special events are always appreciated and acceptable.

CONTACT & CONNECT WITH TERI

Mailing Address: TERI INC., 251 Airport Road, Oceanside, CA 92058

Phone: 760-721-1706 | **Fax:** 760-721-9872

Email: info@teriinc.org

Website: www.teriinc.org

Follow us on social media:

