There are many types of services available through Starbridge. As a service recipient, there are several things we would like to let you know. Some items, we are required by our funders to inform you about. Other information may just be good to know.

Some topics covered in this booklet are:

- The Justice Center
- Incident reporting
- Corporate Compliance
- Internal Events

**The Justice Center**

The Protection of People with Special Needs Act ("the Act") establishes the Justice Center for the Protection of People with Special Needs ("Justice Center") and requires that this Code of Conduct be read and signed by anyone who will have regular and substantial contact with any person who is receiving Residential Services.

All Starbridge staff are trained on and will implement the Justice Center’s Code of Conduct.

The Code of Conduct represents a framework that will help staff determine how to help people with special needs live self-directed, meaningful lives in their communities, free from abuse and neglect, and protected from harm.

Staff must abide by the following Code of Conduct provisions. If you feel your staff is not following the Code of Conduct provisions, contact your Service Director.

**Code of Conduct Provisions:**

1. **Person-Centered Approach**
   The primary duty of staff is to the people who receive supports and services from Starbridge and each person of suitable age must have the opportunity to direct his or her own life, honoring, where appropriate, their right to assume risk in a safe manner, and recognizing each person’s potential for lifelong learning and growth. Staff will require flexibility, creativity and commitment. Whenever appropriate, staff will work to support the individual’s preferences and interests.

2. **Physical, Emotional and Personal Well-being**
   Staff will promote the physical, emotional and personal well-being of any person who receives services and supports from Starbridge, including their protection from abuse and neglect and reducing their risk of harm. Staff will immediately report any situation in which any person receiving services or supports is experiencing, or is at risk of experiencing abuse or neglect.

3. **Respect, Dignity and Choice**
   Staff will respect the dignity and individuality of any person who receives services and supports from Starbridge and honor their choices and preferences whenever possible and appropriate. Staff will help people receiving supports and services use the opportunities and resources available to all in the community, whenever possible and appropriate.

4. **Self-Determination**
   Staff will help people receiving supports and services realize their rights and responsibilities, and, as appropriate, make informed decisions and understand their options related to their physical health and emotional well-being.

5. **Relationships**
   Staff will help people who receive services and supports from Starbridge maintain or develop healthy relationships with family and friends. Staff will support them in making informed choices about safely expressing their sexuality and other preferences.

How does this information affect you? With this information, we encourage you to expect and demand quality services!
6. Advocacy
Staff will advocate for justice, inclusion and community participation with, or on behalf of, any person who receives services and supports from Starbridge as appropriate. Staff will promote justice, fairness and equality, and respect their human, civil and legal rights.

7. Personal Health Information and Confidentiality
Staff understand that persons served by Starbridge have the right to privacy and confidentiality with respect to their personal health information and will protect this information from unauthorized use or disclosure, except as required or permitted by law.

8. Non-Discrimination
Staff will not discriminate against people receiving services and supports or colleagues based on race, religion, national origin, sex, age, sexual orientation, economic condition or disability.

9. Integrity, Responsibility and Professional Competency
Staff will reinforce the values of Starbridge when it does not compromise the wellbeing of any person who receives services and supports. Staff will maintain their skills and competency through continued learning, including all training provided by this organization. Staff will actively seek advice and guidance of others whenever uncertain about an appropriate course of action. Staff will not misrepresent professional qualifications or affiliations. Staff will demonstrate model behavior to all, including persons receiving services and supports.

10. Reporting Requirement
As mandated reporters, Staff acknowledge their legal obligation to report all allegations of reportable incidents immediately upon discovery to the Justice Center’s Vulnerable Persons’ Central Register by calling 1-855-373-2122.

There are changes to Incident Categories as of June 30, 2013.

Under the auspices of Starbridge:
**Abuse and Neglect** - Physical Abuse, Sexual Abuse, Psychological Abuse, Deliberate Inappropriate Use of Restraints, Use of Aversive Conditioning, Obstruction of Reports of Reportable Incidents, Unlawful Use/Administration of Controlled Substance, Neglect

**Significant Incidents** - Conduct Between Individuals Receiving Services, Seclusion, Unauthorized use of Time-Out, Medication Error with Adverse Effect, Inappropriate use of Restraints, Other Significant Incident, Unexplained Injury, Other Significant Incident

**Notable Occurrences**: Injury, Choking With No Known Risk, Sensitive Situation, Unauthorized Absence, Theft and Financial Exploitation (over $15.00), ICF (Intermediate Care Facility) violations, Death

Not under the auspices of Starbridge:

**INCIDENT REVIEW COMMITTEE**
The purpose of the Incident Review Committee (IRC) is to ensure that programs of Starbridge are provided in a manner that protects the safety and welfare of the individual while preserving their rights as adults and facilitating their movement toward greater self determination and independence. The IRC shall review and monitor reportable incidents, serious reportable incidents, and notable occurrences that occur to people receiving OPWDD services.

**Membership includes:** Board Member, Starbridge employees, at least one individual receiving services, and at least one representative of an advocacy organization.
Corporate Compliance

Corporate Compliance Overview

Starbridge is committed to conducting business in a manner that promotes compliance with laws and regulations, continually monitor for compliance, and create systems that allow Starbridge to be responsive to identified risk areas and changes in the regulatory environment. Starbridge has a Corporate Compliance Plan and we are dedicated to managing and operating our services in keeping with the highest of business, ethical and moral principles. Our Board of Directors, Employees, Interns, Volunteers and Contractors contribute to achieving these principles by conducting business activities for the agency with integrity and high ethical standards.

We want to hear from you!

If you have any comments or suggestions on how to improve our Compliance Plan please contact the Quality Improvement Director.

You can access copies of these standards/policies and procedures by contacting the Quality Improvement Director.

Report any concerns or issues to the Quality Improvement Director immediately.

The Quality Improvement Director can be reached at:

(585) 224-7242 or email at: qualityandcompliancedirector@starbridgeinc.org. or

The Quality Improvement Director may be contacted anonymously at *67 (585) 224-7202

No one who reports an issue or concern shall suffer any harassment, intimidation, retaliation.

How does this information affect you? With this information, we encourage you to expect and demand quality services!

Corporate Compliance Plan:

Education and Training  Staff and others associated with Starbridge Services must be informed about regulatory requirements and agency policies and procedures, as they apply to each individual/entity.

Communication  Staff and others associated with Starbridge Services have a responsibility to initiate good faith reports for any potential violations of the Agency’s Code of Conduct and Compliance Plan.

Performance Management to Encourage Good Faith Participation  Staff and others associated with Starbridge are responsible for conducting him or herself according to the Code of Conduct and legal and ethical standards. Starbridge Services implements policies and procedures to ensure that all agents are aware of their responsibility to initiate good faith reporting for any potential compliance issues.

Internal Auditing Process  The Quality and Compliance Director is responsible for ensuring that internal auditing takes place on a regular basis for the services provided by Starbridge Services.

Responding to Compliance Issues  Starbridge is committed to a culture of compliance through detecting, correcting and preventing non-compliance behavior.

Policy of Non-Intimidation and Non-Retaliation  Starbridge recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to federal and state requirements and payor requirements, as well as the organization’s Code of Conduct.

Conflict of Interest  Staff and others associated with Starbridge Services have an obligation to conduct business within guidelines that prohibit actual or potential conflicts of interest or those that may present the appearance of a conflict of interest. Starbridge Services will ensure that services and business activities are conducted in an objective manner and are not motivated by desire for personal or financial gain.

Gift Policy  Gifts and Entertainment shall not be offered to referral sources or potential referral sources of Starbridge. In addition, Gifts and Entertainment shall not be accepted from individuals or entities that receive referrals of health care business from Starbridge Services. Any exception to this policy can only be made after consultation with Star-
An **Internal Event** is any event that may result in a possible negative effect upon an individual supported by Starbridge Services. Internal Events are used for the purpose of supporting and assisting individuals we serve and tracking individual/staff behaviors/situations that are out of the ordinary. They are also used as a communication device to highlight unusual events that occur within the residence or services.

**INTERNAL EVENT DEFINITIONS FOR ALL SERVICES**

**UNUSUAL INAPPROPRIATE BEHAVIOR**

**All Services:** Any behavior that is unusual for the individual and the individual’s actions that may potentially put themselves or others at risk of injury, harm, loss of housing, loss of services, etc.

**Certified Site:** Any behavior that is not addressed within a Support Plan. (i.e., Inappropriate sexual behavior, Upset behavior, Self-injurious behavior (SIB), Any use of an object as a weapon, Stealing. Any unusually long or intense behavior that is addressed in a Support Plan.

**EMERGENCY ROOM VISIT/URGENT CARE FACILITY**

**All Services:** Whenever an individual is examined in a hospital emergency room/urgent care due to medical reasons and/or injury. Your guardian will be notified, parent/family member must be notified unless the individual objects to notification.

**MENTAL HEALTH ARREST**

**All Services:** Whenever law enforcement requires an individual that receives services to be immediately evaluated for Mental Health issues. The guardian must be notified, parent/family member must be notified unless the individual objects to notification.

**INJURY CAUSE UNKNOWN**

**All Services:** Any significant injury in which the person can not describe how the injury occurred.

**Certified Site:** Any injury in which the person can not describe how the injury occurred. RN will be notified.

**POSSIBLE THEFT**

**All Services:** Any possible theft of Starbridge monies or property. Any possible theft and/or financial exploitation against a person that receives services. Any suspected theft or financial exploitation that is less than or equal to $15.00 in value, that does not involve a debit, credit, or benefit card, must be reported as a Internal Event. Any theft and/or financial exploitation over $15.00 in value or involves a debit, credit, or benefit card shall be filed as a Notable Occurrence.

**PROPERTY DAMAGE**

**All Services:** Damage to Starbridge property.

**Certified Sites:** Damage to Starbridge or an individual who receives services’ property.

**VEHICLE ACCIDENT**

**All Services:** Any accident involving agency’s vehicle. Any van/car/bus accident that involves an individual that receives services and the individual sustained a significant injury.

**Certified Sites:** Any van/car/bus accident that involves an individual that receives services.

**COMPLAINT**

**All Services:** Any complaint by an individual that receives services, family member, neighbor, other service provider, someone in the community, etc., towards a person that receives service or an employee of Starbridge. This may also include any inappropriate behavior that is witnessed by or involves the general public.

**EMPLOYEE ISSUE**

**All Services:** Any situation involving an employee performance issue ONLY when directed by the Service Director/Quality and Compliance Director/Executive Director.

**REGULATORY OVERSIGHT OF ANOTHER STATE AGENCY**

**All Services:** Complete if any event or situation occurs in a facility or service setting subject to the regulatory oversight of another State Agency (e.g., school, hospital, article 28 clinic, physician’s office) and the event or situation meets the definitions of a Reportable Incident / Notable Occurrence. Notifications should include the report of the situation to the management of the facility or service setting.

**OTHER**

**All Services:** Any situation involving an individual that receives services that is not described in any other definitions for Internal Events but is deemed to be significant for that person/Starbridge. The situation may be of a delicate nature to Starbridge and should be reported to ensure awareness of the circumstances, review of monitoring, preventative measures and follow up was completed as appropriate.

How does this information affect you? With this information, we encourage you to expect and demand quality services!
INTERNAL EVENT DEFINITIONS FOR SUPERVISED AND SUPPORTIVE IRA’S ONLY

AGGRESSION TOWARDS ANOTHER
Person that receives services is physically and/or verbally aggressive towards another person.

INDIVIDUAL TARGETED BY ANOTHER PERSON THAT RECEIVES SERVICES
Any occurrence when one individual is targeted by another individual that receives services that involved physical assault. Staff should always check for injuries and document the results on the Internal Event. Any occurrence that had a significant impact on the individual.

EMERGENCY USE OF SCIP-R (Strategic Crisis Intervention and Prevention-Revised)
Any use of a SCIP-R personal intervention that is implemented to prevent the individual from injuring themselves or others and is not outlined in an approved Support Plan.

ANY USE OF SCIP-R RESTRICTIVE PERSONAL INTERVENTIONS
Any use of SCIP-R restrictive personal intervention that is implemented to prevent the individual from injuring themselves or others that is outlined in a Support Plan OR in an emergency situation.

MINOR INJURY
Any significant injury (i.e. cut, burn, bruise larger than a quarter, etc.) in which the cause is known, that requires first aid. Staff must document in the Medical Progress Notes. RN notification required.

DAY ACTIVITY/WORK ATTENDANCE
An individual has missed more than five consecutive days of their day activity/work due to medical or other reasons. (This does NOT include vacations.). Your guardian will be notified, parent/family member will be notified (unless the individual objects to notification) after the individual has missed seven or more days of their day activity due to a health issue.

MAINTENANCE SAFETY ISSUE
Any environmental/physical plant safety features that are not in working condition. A safety plan should be implemented and documented in the Internal Event form until the safety feature is repaired and deemed to be working properly. (i.e., fire door does not latch properly, fire alarm system has malfunctioned, high water temperature, etc.)

STAFF ERROR WITH INDIVIDUAL’S FINANCES
Any staff error discovered concerning Starbridge’s oversight and monitoring of the individuals finances. (i.e., amount discrepancy on PIA ledger, giving an individual more money than their established handling limit, PIA check late, etc.)

INDIVIDUAL ERROR WITH FINANCES
Any situation discovered involving discrepancies with the individual and how they are handling their finances. (i.e., obtained money that was over their handling limit, purchase of item that is well above their budget, etc.)

EMERGENCY EVACUATION
Any evacuation of the certified site that was not a planned drill. (i.e., gas leak, cooking caused the alarm to sound, smoke detector activated, etc.)

FAILURE TO EVACUATE
Any occurrence when an individual who receives services was unable/not willing to evacuate from the certified site during the required time frame. This would include planned drills and unplanned activation of the fire alarm system. Retesting of the individual’s ability to evacuate in an appropriate time frame should be documented on the Internal Event form. Retesting should occur within 24 hours and reflect the same conditions as the failed evacuation.

MEDICATION ISSUE
Any situation involving a medication that is NOT a med error. (i.e., found medication, missing controlled substance, missing med keys, medications not secured properly, etc.)

Agents of Starbridge can access copies of these standards/policies and procedures by contacting the Quality Improvement Director at (585) 224-7242 or email at qualityandcompliancedirector@starbridgeinc..org.
Acknowledgement Form for Incident Management and Corporate Compliance

I acknowledge that I have had the Knowledge is Power newsletter reviewed with me by Starbridge staff. This review included:

The Office of People for People with Developmental Disabilities (OPWDD) definitions of Reportable Incident, Notable Occurrences, Part 625, and Starbridge’s Internal Events Definitions. I have been provided training to protect myself from abuse and other events that are reportable incidents.

Overview of Starbridge’s Compliance Plan.

I am aware that I can review all Starbridge’s Polices and Procedures for Incident Management, 624 Regulations and written information developed by OPWDD in collaboration with the Justice Center located at www.Starbridgeinc.org.

I am aware that if I want to receive a hard copy of Starbridge’s Polices and Procedures for Incident Management and/or 624 Regulations and/or written information developed by the OPWDD in collaboration with the Justice Center, I will notify the Quality Improvement Director.

I am aware that I can report any compliance issue or concern confidentially and will not be intimidated or retaliated against for making a report. I can report recommendations, questions, issues or concerns directly to the Quality Improvement Director. If I choose to report anonymously, I can call Starbridge’s Compliance Hotline.

Compliance Hotline - *67 (585) 224-7202

Contact the Quality Improvement Director at:

Phone: (585) 224-7242
Email: qualityandcompliance@starbridgeinc.org

Signature: _______________________________ Date: ________________

Starbridge Staff Signature: _______________________________ Date: __________________

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