



North Metro Community Services Packet for Parents/Providers

Reviewed/Revised 10/2025

North Metro Community Services: Transportation Procedures

NMCS Day Program provides transportation services for each of our community groups. The size and distance of the transport region is dependent upon the number of people assigned to a group, and ensures that we do not spend an inordinate amount of time driving each day. We will make every effort to accommodate requests by each individual, but there are some limitations on when a pick-up or drop-off time can occur.

General Information

- We are a **curb-to-curb** service only. Due to liability concerns, staff cannot escort people to the front door. Drivers are not allowed to enter an individual's residence for any reason.
- Our transportation services are determined by the group, geographical location, and type of service required. You will be given an approximate time of arrival for the van, and our drivers will do their best to be there at that time. You should give them a 10-minute window on either side of that time to allow for weather and traffic. However, at the designated time, the individual should be ready and waiting for the van.
- Drivers are only allowed to wait for **5 minutes** for anyone. If nobody comes out in the morning, the driver will call the Program Manager in charge. If there is still no response, they will call the Program Manager. Then they will leave & proceed with the group.
- In the afternoon, drivers will not leave until they see the individual enter the residence. Again, if there is nobody home, they are allowed to wait for **5 minutes**. In this case, they will call the home number and if there is no answer, they will assist the person back on the van and transport the remaining riders to their residences. They will then follow up with the Program Manager to determine if the rider should return to NMCS.

Important Notes for HHP/Family

- Drivers will maintain the set schedule to avoid adversely affecting services for other riders. Any changes or adjustments need to be made with the assigned Program Manager with as much advance notice as possible.
- We do not lift/transfer individuals out of wheelchairs into passenger seats or lift wheelchairs into vans. We do not lift wheelchairs up or down stairs.
- It is your responsibility to have snow and/or ice cleared from the porch, steps, and sidewalks. If the presence of snow or ice creates a hazardous situation, drivers may refuse to transport the person until the snow or ice has been cleared and will review this information with the assigned PM for further follow-up.
- After medical appointments, it is your responsibility to transport the individual to their scheduled site or activity (not back to NMCS). Please communicate the appointment & schedule change as far in advance as possible.

If you have any questions or concerns about transportation, please do not hesitate to contact your Program Manager.

North Metro Community Services Medication and Oxygen Administration Policy

The following is North Metro Community Services Day Program's Medication and Oxygen Administration Policy. To adhere to state and federal rules we must comply with the policies listed below.

1. **Oxygen** is considered a medication and must have a doctor's order.
 - Please call or e-mail Program Manager to make prior arrangements before an individual comes to day program with oxygen.
 - The doctor's order must state the following: continuous oxygen, the liter or amount of oxygen, reason for being on oxygen, and the doctor's signature. We cannot accept titrated orders as it is not within the scope of practice for a QMAP (Qualified Medication Administration Person.)
 - An extra oxygen tank and stand must be supplied based on liters of oxygen the person uses. This is dependent upon the type of tank they have.
2. **Medications** will not be administered at day program unless we have a current doctor's order.
 - *Doctor's orders expire one year from the day they were written.*
 - The doctor's order can be e-mailed to the Day Services Program Manager.
3. **Medications and medical supplies (test strips, lancets, etc.) must be hand delivered** to the Program Manager, Direct Support Staff, or Nurse.
 - If the medication/medical supplies are sent in with the person attending day services through transportation, then they must come in a Medication Reminder Box (MRB) or a sealed Dispill package labelled correctly. All MRB's must have the person's full name on them and complete instructions for administration. Ex: *Tegretol 100 mg tabs- take 1 tab orally every day for seizure disorder.*
 - Please contact your Program Manager to discuss how medications will be handled regarding the individual, especially regarding insulin and testing supplies.
4. **Original bottles/pill pack:** If the medication is stored on site for in-house groups, it must be in its original bottle/pill pack. This means if the medication is taken outside of day program, you will need one bottle for home and one bottle for day program. Just let the pharmacy know that you need two bottles when refilling the prescription. Most pharmacies are more than happy to do this for you.
 - Medications must have the original pharmacy label.
 - **Medications poured from one bottle to another bottle will not be accepted.** For example, you should not pour a new refill into an old bottle.
 - Medication Reminder Boxes (MRBs) can be used at DP, but they must be labeled with the person's name and complete instructions for administration. Ex: *Tegretol 100 mg tabs- take 1 tab orally every day for seizure disorder.*

5. **Controlled substances** must be counted and signed for by the Program Manager, Direct Support Staff, or Nurse and provider/family member/staff. The medication must be in its *original* bottle or pill pack if stored in house. Controlled medications that are picked up daily in an MRB will not be counted by DP staff as they are only receiving the amount to be administered daily and that count is indicated on the MAR sheet. If you have to keep track on your end, you will need to do so on your own documentation per your agencies policies and procedures.

North Metro Community Services

Day Services Illness Procedures: When to Stay Home

The following information is designed to assist guardians, family members, and host home providers when individuals are ill or recovering from illness.

If someone is ill, please refrain from sending them to day program. Unfortunately, we are not able to designate staff members to monitor people who are ill nor do we have suitable facilities for ill people. We work so closely with individuals each day that one ill person can spread sickness within a team without much difficulty. Anyone who exhibits the following symptoms should receive treatment in the comfort of their own home:

- Elevated temperature: if above 100° F and not coming down with medications or if present with any other symptoms
- Vomiting
- Loss of appetite
- Diarrhea
- Excessive cough
- Lack of energy

Anyone presenting with these symptoms will not be transported with the community group. A call will be made to the Program Manager and the Provider/Family will be notified of this step. If the individual displays any of the above symptoms during program activity, the Program Manager will be notified immediately and a plan for immediate pick up will be determined.

Anyone who has been seen at an emergency room, hospitalized, had a surgical procedure, or had a serious illness for more than two weeks will need to follow up with the Program Manager to review the outcome of the medical follow-up and determine if any adjustments to program services are needed and if they can be accommodated in the group setting.

If the person will be taking medication during day program hours please bring in the medications and the physician's order for the medication. A medication reminder box or DISPILL pack are recommended for day program use. The family or provider will provide the DSP the medication on a daily basis, and it will be stored in a locked medication bag during the activity. Please provide ample notice to the PM in regard to any new medication orders and process to avoid confusion and errors in the delivery of medication.

People with open skin wounds (breakdown) will be asked to stay home until they are healed. We are unable to provide sufficient wound care at day program. This includes any open areas on the body that are actively bleeding, wounds anywhere near the bottom or groin, and pressure ulcers. If you have any questions please contact the Program Manager.

North Metro Community Services
Day Services: Illnesses- When to Stay Home

The following is North Metro Community Services Illness guidelines detailing when someone should stay home due to common illnesses. To adhere to state and federal rules, we must comply with the guidelines listed below.

Illness	Should I Stay Home?
Diarrhea	Yes If they have had 1-2 loose bowel movements at day program, the Program Manager will call the caretaker to come pick them up.
Fever	Yes If they have a fever over 100°, they should stay home. If they have a fever at day program, the PM will contact the caretaker to come pick them up.
Flu-like Symptoms, Covid: Fever above 100°, coughing, body aches, cold/hot flashes, nausea, etc.	Yes Stay home for at least 24 hours after the fever is gone without having to use medicine to reduce the fever.
Coughing	Yes If the coughing is persistent and does not subside with medication or they are having trouble breathing.
Mild Respiratory/Cold Symptoms: Stuffy nose with clear drainage, sneezing, mild cough	No They may come to DP, but if the symptoms continue and interfere with daily activities, the PM may call the caretaker to come pick them up.
Rash with Fever	Yes If they have any rash with fever, they must be seen by a doctor.
Rash	Yes If the rash is on multiple areas of the body, please get written clearance from a doctor before returning. If the rash is spreading quickly, please obtain written clearance from a doctor before returning. If the rash is weeping, they must stay home until resolved. No If the rash is mild and does not itch, burn, or accompany any other symptom, they may come to DP as long as the area is covered. If it is assessed by nursing staff and they feel further evaluation is needed, the PM may call the caretaker to pick them up and request written clearance from a doctor prior to returning.
Vomiting	Yes Until vomiting has stopped for 24 hours

Chicken Pox	Yes Until all blisters have dried and crusted over.
Conjunctivitis (Pink eye)	Yes The person must have been on antibiotics for at least 24 hours before they may return. If pink eye is suspected at DP, the PM may call the caretaker to come pick them up to have further follow-up with a physician.
Croup	No They may attend but may be sent home if coughing is interfering with daily activities.
Fifth's Disease	No -They are no longer contagious once the rash appears.
Hand Foot & Mouth Disease	Yes -If there are any open sores, or they are running a fever.
Head Lice	Yes Until after the first treatment. If lice are discovered at DP, the PM will call the caretaker to come pick them up.
Scabies	Yes Until the rash has resolved and treatment has been provided.
Hepatitis A	Yes Until 1 week after the start of the illness and when able to take part in usual activities.
Herpes (cold sores)	No Unless the person has open sores that cannot be covered or is drooling/spitting. The sores have to be oozing to be kept at home. If they are crusted and treatment has started, they may come to DP.
Impetigo	Yes Stay home until a full 24 hours of antibiotic treatment has been completed.
Ringworm	Yes From the time it is discovered until after treatment has been started. The area must be covered for a full 2 days when they do return to DP.
Roseola	Yes If the person has a fever or a rash, they must stay home until both are resolved.
RSV	Yes For the first 3 days after being diagnosed and if they are running a temperature higher than 100°
Strep Throat	Yes For 24 hours after starting antibiotics and once they are able to take part in usual activities. If they are running a fever higher than 100°.
Measles, Mumps, Rubella	Yes -Until cleared by a doctor

North Metro Community Services Policy regarding Do Not Resuscitate Orders (DNRs)

Do Not Resuscitate orders, commonly known as “DNRs” are problematic for North Metro to follow for a number of reasons. Unlike a hospital or nursing home we do not have a medical professional on site at all times to make a determination of what the individual needs and whether or not that assistance should be provided because of a DNR. This becomes even more difficult in our Day Program where we have so many staff and people receiving services and where people are receiving those services at locations scattered all over the metro area. The last thing we want to do is to fail to provide assistance to someone who could have been easily saved. For these reasons and others North Metro will only recognize DNRs in very limited circumstances as set out below.

1. Day Program and Support Services: NMCS Day Program and Support Services will not honor DNR orders due to the risk involved. We serve so many people and have so many staff it is impossible to make sure that all staff will be informed and have the right information about the right person. This creates a situation where staff might fail to perform CPR on someone who did not have a DNR order, which is obviously the worst case scenario. All of our staff in Day Program and Support Services are trained to perform CPR if they believe, based on their training, that CPR is necessary. Day Program will keep the DNR order on file and will provide it to the EMTs when they arrive so that advanced life saving techniques will not be continued in a hospital setting.
2. Nursing Staff: If they are present when CPR is required or if they come onsite while CPR is already being performed and they are certain that a DNR is in place for an individual involved then they will either tell staff not to start CPR or they will tell staff to stop CPR.
3. Residential Host Homes: The decision of whether or not to honor a DNR is a decision that must be made by the Host Home Provider. As an independent contractor they need to decide how they will respond in such a situation and communicate that decision to the entire team working with the individual that they serve.
4. Apartment Program: We will not honor DNRs in the Apartment Program.
5. Family Care Giver: The decision of how to respond when a DNR is in place is up to the Family Caregiver.
6. Support Services: Support Partners who are the parent or legal guardian of the individual they are paid to support will make their own decision regarding how to respond when a DNR is in place.

If a parent, guardian or family is unwilling to have their loved one served in a setting with these rules we will work with them to transition their loved one to a program or facility that they believe is better suited to their needs.

**North Metro Community Services
Policy/Procedure Signature Page**

My signature below indicates that I have received copies of the following NMCS policies/procedures:

- Transportation Procedures
- Medication & Oxygen Administration Policy
- Guidelines/Protocol for Illness
- DNR Policy

Signature of Parent/Provider/Guardian

Date