Hello Tour Guides:

I am excited to share the enclosed REVISED Tour Guide Manual with you. Please throw all of your other Tour Guide Manuals away.

Procedures on tours have changed over the years. Understandably, veteran tour guides were trained in earlier procedures and unfortunately these old procedures have been shown to new tour guides. Obviously, this is not what we want.

Whether you are a brand new tour guide or someone who has been going on tours and/or even leading tours for years, I am asking you to study this manual as if you have never been on a tour. Please do not assume that you already know this material. The way you were trained may not be the way we now want you trained!

Please keep this manual with you at all times while on tour. It would be impossible for anyone to memorize all of these procedures and we do not expect this. We do expect you to refer to this manual as needed during your tours.

Again, this revised Tour Guide Manual has New Directions “official” procedures. THESE are the PROPER procedures. These are the procedures that I am positive if you follow, your travelers will be safe and they will have a fabulous experience. These are the procedures to use to train any new tour guides.

We will be periodically updating this Tour Guide Manual. I would love to have your comments and suggestions. Please feel free to email me with your thoughts, not only about this manual but any aspect of our tours. I look forward to hearing from you.

Sincerely,

[Signature]

Dee Duncan
Executive Director
Welcome to New Directions!

A Message from Dee Duncan

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Welcome to New Directions Travel!

Our Mission
"New Directions provides local, national, and international travel vacations and holiday programs for people with intellectual and developmental disabilities. These profoundly enriching educational travel opportunities expand experiential learning and dramatically enhance the self-esteem of every traveler. Our programs open whole new worlds of understanding for both the participants and the general population. Through these programs, people with disabilities are increasingly understood, appreciated, and accepted as important and contributing members of our world."

History
Dee Duncan started New Directions in 1985 after having worked for eight years in a large residential facility for adults with intellectual and developmental disabilities (IDD). As part of her duties at this facility, she frequently arranged travel vacations for its two hundred residents. Of all the therapeutic programs that this care facility provided, the travel vacations stood out as the most beneficial. The tours proved to be the perfect environment for "hands-on" education (so much better than classroom or textbook education!), for practicing independent living skills in the "real" world, and for fostering flexibility in new or different situations (a critical need for all persons with brain impairment). In addition, the tours were the ideal avenue for promoting acceptance and inclusion among the general population.

The benefits were so enormous that Dee felt compelled to offer these programs to others with brain impairments. She researched and found no other organization that provided this type of specialized travel service.

Dee started from the dining room table of her small studio apartment, with a cardboard box for files, and her 75-year old mother as her assistant! Starting capital was $8,000--the total of Dee’s personal savings. Most important, she had an unwavering commitment to making these important travel programs available to people with IDD.

In 2015 New Directions celebrated its 30th year. We have successfully taken over 18,000 people on life-enriching vacations all over the world--promoting inclusion all along the way. Currently with an annual budget of over $1,000,000 we offer more than 40 travel vacation programs annually, a variety of day tours, and a bi-monthly travel club all of which serve approximately 700 participants annually. Most participants live in the Southern California area, but some live in other states and even in other countries. To date, our youngest traveler has been 7 and oldest 93.
A Message from Dee Duncan

I want to welcome you and deeply thank you for taking on this exciting adventure of being a New Directions (NDI) tour guide. You are joining a group of tour guides and an organization that is widely regarded as providing the best travel services in the world for people with IDD.

This is not an easy job. We expect a great deal from our tour guides. However, I’m certain that it will be one of the most rewarding things you’ve ever done.

This manual is full of procedures and “do’s and don’ts.” These are all extremely important and you need to know this to keep our travelers safe. However, our best tour guides are those who also combine this with a deep commitment to our mission.

NDI’s mission is rather bold. We are striving for nothing less than changing the perception of people with IDD. Through your work as a tour guide, you are truly changing the world.

There has been much research done on what makes an organization great. This research indicates that of all things, “employee gossip” is the main thing that can completely destroy a great organization.

NDI has been fortunate to keep gossip at a minimum. We have done this by encouraging all tour guides and office staff to recognize that gossip is actually a legitimate complaint about something. A complaint is simply a hidden request.

As the founder of this great company, I most earnestly ask you to help find the hidden request behind any complaint (gossip) that you may be a part of, and please help turn it in to a request, and bring it to the appropriate person’s attention.

You may bring this request to the tour guide involved, your tour leader, your tour manager, or to me. Please know that all written tour evaluations are completely confidential and come directly to me. You may also contact your tour manager directly or contact me anytime by email at Dee@NewDirectionsTravel.org. I look forward to hearing from you.

Again, welcome to New Directions and thank you. It is an honor to have your partnership in this exciting adventure.

Dee Duncan
Executive Director
Tour Guide Position

Description
As a tour guide, you will accompany people with IDD on their vacations with New Directions Travel. Your primary responsibilities are to ensure the safety of our travelers and to help create a fun, exciting, and memorable experience for everyone on the tour!

New Directions tour guides staff travelers at either a 1:4, 1:3 or 1:1 ratio. For the duration of the tour you will accompany a specific group of travelers (your “core group”) and take responsibility for their health, safety, and general well-being.

Tour guides at New Directions:

- Value our mission and consider it the highest priority of the tour
- Generally have at least some experience working with people with disabilities, or at least a strong desire to learn to work with this population
- Are willing to go the extra mile to assure an EXCELLENT tour

Remuneration
Tour guides are paid as independent contractors at a rate of $65 per day. Tour Leads (which you may become upon approval after completing several tours and tour lead training) are paid at a rate of $100 per day. Tour guides may also choose to go on tours as volunteers, which is an in-kind tax-deductible donation. In all cases, New Directions covers all expenses of a tour guide while on tour.

Requirements
Before going on tour, tour guides must fulfill the following requirements:

Certification/Training
1. Current CPR Certification
2. Current First Aid Certification/Training
3. Current medication training or commensurate experience
4. Completion of New Directions orientation/training
5. View the New Directions Medication Video
6. Pass the New Directions online exam

Documents on file at New Directions
1. Copy of your Drivers License
2. Privileged Communication Agreement
3. Independent Contractor Agreement
4. W-9 Form
5. 1099 Form (only if salary exceeds $600 annually through ND)
6. Live Scan Fingerprint Form
Expectations of Tour Guides

Your role as a tour guide is to give the travelers the BEST vacation they’ve ever had. Treat them as if they are customers on a very expensive, high-quality tour—they are!

1. Maintain a positive Attitude!
   Your attitude helps determine the success of the tour. The following guidelines will help you maintain and convey a positive attitude:

   - Always remain calm and patient, even in the most stressful situations. Travelers will model your attitude, so if you are stressed, they will be, too. Likewise, if you are positive and happy, so will be your traveler!
   - Always treat travelers with respect and dignity.
   - Always offer choices to the travelers. We want to make their dreams come true!
   - Avoid behavior management or disciplining travelers. Instead, offer guidance and redirect behaviors. Try to turn a negative situation into a positive one.
   - Always have a sense of humor. The tour will be much more enjoyable!

2. Work as a Team!
   Teamwork is the most important aspect to ensure a safe, smooth, and fun tour. The following guidelines outline keys to successful teamwork:

   - Don’t gossip! Turn the problem into a request to the appropriate person.
   - Always support each other. If you see another tour guide struggling, offer to help.
   - Always support the tour leader. It’s a tough job!
   - Always communicate. If you have needs, don’t suffer in silence. Ask for help from another tour guide or the tour lead. Communicate any problems at the nightly tour guide meeting.

   You are representing New Directions everywhere you go, so professionalism is essential. The following guidelines outline how to be professional on tour:

   - Always dress appropriately. Casual professional is acceptable.
   - No flip-flops except at swimming pools.
   - No facial piercings or unnatural hair colors (pink, blue, green, purple, etc.)
   - No visible tattoos or other body art (such as surgically implanted ball bearings, spikes, and the like) are permitted. Exceptions may be made for small, non-offensive tattoos that cannot easily be covered by standard clothing (i.e., wrist, neck, etc.). All exceptions require the approval of Dee Duncan.
   - No tattered clothing.
   - No cleavage-baring tops or skimpy bathing suits.
   - No clothing with inappropriate advertisements, logos, or designs.
   - Always remember that the public is watching the New Directions group with eager and curious eyes. Act appropriately and friendly.
   - Always use appropriate language and gestures. Smiling and laughing are the best expressions.
# New Directions Policies

## Signing-up
To sign up for a tour, you must let New Directions/Danna Mead know well in advance. (danna@newdirectionstravel.org). New Directions will collect the names of all available tour guides, and once all the travelers have signed up, New Directions will match the tour guides to the travelers on the tour. Tour guides are usually selected 30-45 days prior to a tour. Signing up and stating your availability for a tour does not guarantee you a spot on that tour.

We know you love your job as a tour guide, and we want you to be able to go on your preferred tours. New Directions may not be able to take all tour guides on every tour they request, but will try to be fair and consider all requests.

## Commitment
When signing up for a tour, it is very important to be **absolutely positive** that you are available for that tour. Once you have committed to a tour, New Directions begins booking nonrefundable airline tickets, making room lists, arranging transportation details, and putting together logistics of the entire tour. If a tour guide cancels after this process, it is extremely difficult to change arrangements and find a last-minute replacement.

Here at New Directions we understand that life is not always predictable, and we try to be very flexible and sensitive to that. If a last-minute emergency occurs and you must cancel, please notify New Directions **as soon as possible**. If, however, you cancel because you “forgot you had other plans,” you may forfeit your position as a tour guide with New Directions.

*If you have any doubt at all about being able to fulfill the tour guide responsibilities, please do not commit to the tour.*

## Alcohol
New Directions has a NO DRINKING policy on tour for tour guides, with no exceptions. If you see or know that another staff is drinking, you must report it to the tour lead immediately. Travelers may only drink alcohol if indicated on their profile; if the profile says they may drink, double check that they do not take any medication and discuss the situation with the lead. Always recommend virgin drinks.

## Smoking
Tour guides may smoke while on tour, but may not smoke around the travelers. Please reserve smoking for times when you are not in a meeting, a vehicle, or anywhere that will disturb other staff or the public. Travelers may smoke, but please encourage them to move away from other travelers and the public when doing so.
On Tour Responsibilities: General

There are a wide variety of responsibilities you will undertake while on tour. Below is a list of general things you will need to do while on tour, and the following pages outline your most important responsibilities in more detail.

1. **Meetings:** All tour guides will attend a meeting every evening of the tour. These meetings usually take place around 10:00pm, after the travelers have gone to bed. The meetings will be facilitated by the tour lead. The purpose of the meetings is to review the day’s events, plan for the next day, check each other’s medications, answer any questions, and solve any problems.

   Bring to each meeting:
   - Your tour guide notebook
   - Traveler medications & medication sheets
   - Money and receipts for that day
   - Traveler profiles
   - Ideas on what is and is not working on the tour

2. **Cameras:** Each tour guide is responsible for taking photos of all of their travelers. These photos should show what a great vacation the traveler had. There should be **at least 15 GOOD photos of each traveler.** This is usually the only way that travelers can share with others what they did while on tour. New Directions can provide a digital camera or the tour guide can use his/her own with a ND memory chip.

   **Tips for taking great pictures:**
   - Take pictures of the traveler, not just scenery
   - Take pictures that show the traveler smiling, laughing, and having a wonderful time. Remember, these are memories for the traveler!
   - Always use the flash when taking photos, even if you think there’s enough light, as it helps to brighten their faces
   - Make sure your finger is not covering the lens
   - Take photos in front of backgrounds that show where they are

3. **Backpack:** Always bring a backpack with you, as you will have many supplies to carry. Everywhere you go you should bring traveler medications, cameras, emergency supplies, tour paperwork, tour money, traveler money, and a cell phone.

4. **Reports:** If one of the travelers has a seizure or an unusual incident occurs involving harm or threat to a traveler or other person, an incident report and/or seizure report must be completed and submitted to the tour leader within the same day of the incident. Incident reports are considered a legal account of what occurred. Your tour lead will instruct you how to correctly fill out a report.
On Tour Responsibilities: Safety

The most important area of concern on a New Directions tour is SAFETY. As a general rule, *if it doesn’t feel safe, don’t do it.* Our job as New Directions tour guides and leaders is to provide experiences safely and with no threat to travelers. Follow these guidelines to help ensure a safe tour:

1. **Medication:** It is imperative that each traveler who takes medications receives prompt and correct dosages. Always follow the Medications Procedure, and if there is ever a question or doubt about medication, ask the tour lead for assistance.

2. **Allergies:** Always refer to the quick reference sheet and traveler profile for information on traveler allergies. Some allergies can be life-threatening. Some may not be life-threatening, but YOU will suffer if you forget (i.e. cleaning up vomit, diarrhea, etc).

3. **Swimming:** Always follow the swimming procedures. Remain extremely alert when travelers are in the pool. This is not a time for you to lounge in the sun or chat with others. Always refer to the traveler profile for a traveler’s swim level.

4. **Sunscreen:** New Directions travels to many hot, sunny destinations throughout the year. Sunburns can happen very quickly, especially to fair-skinned travelers and travelers on certain medications that increase their sensitivity to the sun. Always apply sunscreen to your travelers each morning, throughout the day, and after swimming. There is an ample supply of sunscreen in the tour bag. Watch closely for pinkness on the skin of the traveler. Burns can happen even on cloudy and overcast days.

5. **Lost travelers:** No one likes to be lost. (Actually there are a few who do, and these are the ones we have to be especially watchful of). Always refer to the traveler profile that addresses if the traveler tends to wander. Be pro-active with your group and create a family dynamic of watching out for each other and sticking together. Always refer to the Lost Traveler procedures to prevent a lost traveler or to effectively find a lost traveler.

6. **Traveling:** When traveling in cars, buses, planes, boats, etc., always make sure everyone is securely fastened in. IT IS UP TO YOU TO MAKE SURE THIS HAPPENS. A wheelchair could tip over on a shuttle bus if it is not securely fastened. A tour guide should always shut doors, to avoid a traveler smashing their fingers in a door.

7. **Hotel Safety Checklist:** As soon as travelers arrive in their rooms and begin getting settled in, go over the Hotel Safety Checklist with them. It is important to show the travelers how everything works in the room for their own safety and feeling of independence. It is imperative they understand how to adjust water temperature so they do not scald themselves, how to operate the lights so they do not fall in the dark, etc.
On Tour Responsibilities: Hygiene

The personal hygiene of travelers is very important on a New Directions tour. All travelers are required to bathe daily and wear a fresh set of clothing each day. Every traveler will require some assistance or prompting for hygiene, no matter how independent he or she is. One of the most common post tour complaints NDI receives from families and care providers is the proper hygiene of traveler. The following guidelines will help you maintain great hygiene for your travelers for the duration of the tour:

1. **Address hygiene matter-of-factly.** At the beginning of the tour, explain to the travelers the expectations of hygiene and that you will be checking and assisting them in this area. A New Directions rule is that **travelers must bathe and wear a clean pair of underwear every day.**

2. **Use the Hotel Checklist** when first settling in to the hotel room. Show and explain to the travelers how to do things in the hotel room such as turn on the shower, adjust the temperature of the water in the sink and tub, where the hygiene supplies are, etc. **Give the travelers a plastic bag and explain for them to put their dirty clothes in the bag at the end of the day.** If this bag is not filling up over the tour, the traveler is likely wearing the same clothes again. Count how many pairs of underwear are in the laundry bag (1 for each day of the tour)

3. **The highest-level travelers can present the greatest challenge in the area of hygiene.** They may often say they've showered or brushed their teeth, even if they have not. Do not assume they are telling you the truth. Always double check that the towels have been used, etc., to determine if the travelers have completed their hygiene. Gentle and frequent reminders to complete hygiene work best.

4. **Men must shave every day if they come with their own shaving supplies.** Travelers might think they don't have to shave because they're on vacation, but they should be clean-shaven every day. Some travelers may need assistance with this. Help the traveler shave or check afterward to be sure the traveler has shaved his face correctly. **Do not shave the traveler if they do not come with their own shaving supplies. Do not let travelers share shaving supplies.**

5. **Check suitcases, drawers, closets, etc. for unworn clothing.** Travelers often bring new clothes to the tour and sometimes go home without ever wearing them. Be sure the traveler is wearing a new outfit each day and always looks his or her best.

6. **At the end of the tour, neatly pack every traveler's suitcase** and place all the dirty clothes in plastic bags. When travelers go home, the suitcase is all the care providers see of our services, and they should know just how much we care about our travelers' hygiene and well-being!
On Tour Responsibilities: Photos

The importance of taking good quality photos of travelers during their tours cannot be overemphasized. They are essential for:

- Having the traveler remember what he/she did on tour, to share with others, and to relive what may be their first and/or only vacation

- To allow family members and care providers to see what the traveler did. Many travelers have communication issues or are non-verbal so there is no other way for others to get this information

- Promotion, Marketing and Fundraising which keeps NDI functioning!

Some travelers bring their own cameras, but rarely do they have the skills needed to take really good photos. Here are some guidelines that if followed will ensure that our travelers have memories for their lifetime:

NDI will supply you with a digital camera or you may choose to use your own camera or phone camera, whichever will ensure that you take the highest quality photos.

The photos you take will be posted on our website shortly after the tour so that the traveler and others can download those they want.

Jeanne screens the photos and must toss those that are not good. Don’t let any of your travelers be the ones who go on the website and see only 1 or 2 photos!

Take at least 15 **GOOD** photos of each traveler in your group, more for longer tours. (The more the better!)

Have travelers remove their hats and sunglasses and make sure that they are not partially or fully in the shade. Use the flash, even in the daylight, to avoid shadows.

Get a combination of individual and group shots of people. Avoid scenery, buildings, food/meals, parades. Everybody wants to see people! Help the travelers remember not only what they did, but who they met during the tour!
On Tour Responsibilities: Photos (cont’d)

Here are the easy to remember A, B, C’s (and d, e, f’s) of taking GOOD photos:

“A” = Attention. Before you take the photo make sure you get the traveler’s attention. Say something funny, make them laugh. We want the world to see what a great time they are having. Unfortunately, Jeanne has to throw away a lot of photos from tours because no one was looking at the camera or everyone had a grumpy face. Rarely do our travelers look their best in “candid” shots!

“B” = Background. Stage it a bit. Be sure to take photos of the travelers in front of interesting backgrounds, preferably ones that show where they went on their trip. Get some other travelers and tour guides in the photo as well. Group photos are a great way for the traveler to remember the new friends he/she made on the trip.

“C” = Close-up. Get in close, we want to see their happy faces.

“D” = Do it! Take lots of photos. There is never too many. Remember the more you take the better the chances are that you will have some fantastic pictures.

“E” = Excitement. Take photos of the traveler doing exciting things, like theme park rides, meeting Disney characters, singing karaoke, learning to surf, dancing, etc.

“F” = Focus & Flash. Using the flash during daytime prevents unwanted shadows. Especially in night photos, double check that the pictures you are taking are in focus and that the flash is working correctly.

If you are using a New Directions camera, give it to the tour leader at the end of the tour.

If you are using your own camera or phone camera, then you can send them to New Directions in any of the following ways:

1. UPLOAD – Contact Jeanne at Hello@newdirectionstravel.org to let her know you have photos to upload. She will then either send you a Dropbox link or a link to our photo website SmugMug.com.
2. EMAIL – You can email your photos to Jeanne at Hello@newdirectionstravel.org. This is the least effective way, as the photos HAVE to be sent at a high resolution. You will only be able to send about 5 at a time before you reach the server’s capacity.
3. BY MAIL – You can mail your personal memory card or flash drive to Jeanne at the New Directions office. She will send it back to you after removing the pictures.
4. IN PERSON – If you live in Santa Barbara, come by the office and Jeanne can transfer your photos from your phone onto her computer.
Tour Responsibilities: Cash and Receipts

On each tour, you will be responsible for three types of monies: a) Traveler’s spending money; b) New Directions tour money; c) Your own personal spending money.

A. Traveler’s spending money: Most travelers will require at least some assistance with their spending money. Some will be able to hold their own money, while others will require you to hold on to it. Always refer to the traveler profile for information as to whether the traveler or you should hold the money. Also, it is helpful to ask the travelers what they are most comfortable with and offer them assistance.

Always keep receipts for the traveler’s purchases; circle the amount spent, write what was purchased and initial it. Keep these receipts in a separate envelope labeled for that traveler and be sure they get sent home with the traveler at the end of the tour. Even if travelers say they do not need the receipt, it is New Directions’ policy to send it anyway, as care providers and Regional Centers often need proof of what was purchased. Record every purchase on the Traveler Balance Sheet and return the form to the tour leader at the end of the tour. Parents and care providers often call after the tour asking what a traveler purchased with their spending money.

B. Tour Money: Each day of the tour you will be given money from the tour leader to use for purchasing food, entertainment, transportation, etc. for your group. New Directions pays for all of your and your travelers’ expenses while on tour. Only personal souvenirs or expenses not included in the itinerary would you or your travelers pay for out of pocket.

Each tour, and each day of the tour, has a specific budget that must be followed. Your tour leader will let you know what the daily food and entertainment allotment is, as well as activities that have been prepaid.

You are required to keep an accurate account of the tour money by keeping all receipts, balancing, and returning the cash and receipts to the tour leader at the end of each day. Record all purchases on the Tour Guide Daily Balance Sheet.

On each receipt you must: 1) Circle the amount spent
2) Write the date
3) Write the category (ie. food, gas, tips, etc.)
4) Your initials

You must get a receipt for every purchase. If one is not available, write one yourself. Include what was purchased, the date, the amount, and your initials.

C. Your Personal Money: You are welcome to bring extra spending money for personal souvenirs. Please keep this money separate from all other money.
Tour Responsibilities: End of Tour

At the end of every tour each tour guide will be responsible for completing and returning all paperwork, phones, equipment, and tour money. *All paperwork, money, and equipment must be returned to the office within seven days. Your paycheck will be issued once everything has been turned in.*

**Evaluations**

*Traveler Report:* Fill out the traveler post-tour report with information on how the traveler did on the tour. Please be very detailed, and offer suggestions for future tours. On the backside of this report is an important survey. This information is required by a Foundation that generously gives NDI a $100,000! Your answers will keep these funds coming!

*Tour Leader Evaluation:* Be very honest in evaluating the tour leader. These evaluations are anonymous and ONLY seen by the Executive Director, Dee Duncan. Everything you say is completely confidential and will only be used to offer suggestions and additional training to improve the quality of our tour leaders.

*Tour Guide Evaluation:* Choose another tour guide to evaluate, unless the tour leader assigns you someone to evaluate. Again, these are anonymous. Please be very honest as this information helps us determine what areas of training to offer to our tour guides.

*Tour Evaluation:* This information is also anonymous and helps us at the office to know what worked and what didn't work on the tour. You won't be punished for telling the truth!

*Helpful Hints:* If you have any suggestions at all on how to improve the quality of New Directions tours, please offer it here. Any suggestion is appreciated and considered.

**Reports**

*Incident Reports:* If there were any incidents at all on the tour, fill out this report in detail. This report is considered a legal account of what occurred, and it's very important for New Directions to have documentation of any incident that may have occurred.

*Ratio Change Form:* This form is to be completed if a traveler seemed to be staffed at the wrong ratio and would require a change of ratio for the next tour. I.e., if the traveler came at a 1:4 but because of physical needs or behavioral issues should be staffed at a 1:1 ratio to better meet their needs. Offer any kind of information to help us explain the change needed to the care provider.

*Seizure Report:* To be completed if a traveler has a seizure at any time on tour. This report should be filled out for every seizure that occurs, even if a traveler has multiple seizures.

**Equipment**

Please return all phones, cameras, etc. immediately following the tour. New Directions often has tours going out back to back and needs the equipment for consecutive tours. Return all wheelchairs, supplies, traveler items, etc. to the New Directions office as soon as possible.

**Tour Money**

Please return all of the tour's last day money with a completed balance sheet as soon as possible. If you live out of town and need to mail the money, it is usually best if you send a check rather than the cash.
Procedures: Medication

Most travelers on a New Directions tour will require at least some assistance in taking medication. It is imperative the tour guide understands the significance medications hold for both the traveler and the organization. Medications not taken or taken incorrectly pose a health threat to the traveler. New Directions is liable for improperly dispensed medication.

*It is required that you view the New Directions Medication Video available through our website.*

**Checking in medications**

Prior to the tour, traveler profile and medication sheets are completed by the care provider with information on what medications the traveler is taking. The tour guide must have the medication sheet present when checking the traveler in. Usually, the care provider is present when the traveler is checked in. If the care provider is not present, then the medications will most likely be in the traveler’s own backpack. The tour guide should follow the process below to properly check in medications:

1. Tell the care provider they must wait with you until the medication check in process is completed.
2. Review all medications being sent with the traveler. They are usually in either a bubble pack listed by date, or in the original bottles with prescription labels; however they CAN come in any way, shape, or form.
3. Be sure there are enough of each medication for each day. There should also be two days extra of medication in case any pills are accidently lost, dropped, etc.
4. Compare the medications being sent with those listed on the medication sheet. Make sure the medication times on the bubble packs and/or bottles match the medication sheet. **If there is any discrepancy between the medications and the paperwork, resolve the matter before the care provider departs.** Update the sheet by crossing out incorrect info and clearly writing in the changes. Always let the tour leader know of any discrepancy. If the care provider is not present during medication check in, contact them for immediate assistance.
5. The updated medication sheet used for the check-in becomes the “Master” (write “Master” across the top of it), and should be kept with the medications at all times (not in your tour binder).

**Where to Keep Medication**

Medications should always be held by the tour guide. Tour guides should keep all travelers’ medications in a backpack they keep with them; **never** leave meds in a traveler’s room or unattended with a traveler. Some travelers might try to dispose of their medications while others might try to take them all at once; either of these scenarios can be dangerous and can be life-threatening. If a traveler self-medicates they may keep the medications in their room, unless they are sharing a room with a non-self-medicating traveler. (Check with the tour lead to see how to handle this situation.)

Take medications for the ENTIRE day with you in your backpack. In some cases, **AFTER** the morning medications have been given, the pill containers for these morning meds can be secured somewhere safely in your room. Always know exactly where all the medication is stored.
Medication Times
Medications MUST be given at the times specified on the medication bottles, bubble packs, or medication sheet. If the medication is administered more than one hour before or after the time specified, you must call the Tour Lead right away because licensing requires that the Regional Center Case Manager be notified (i.e. this is serious.) The lead will contact the appropriate NDI office staff who will then inform the Regional Center.

Note: If a time is not indicated, you should give Bedtime/HS meds when the traveler is prepping for bed.

Returning medications
It is important that all medications and any empty pill containers go home with the traveler. On the last day of the tour, review all of the medications in the same fashion as check-in. Be sure the traveler has all of the correct medications in the proper amounts. If there is any discrepancy or if the traveler leaves without all of the medication, notify the lead immediately. Always put the medications back in the traveler’s backpack or carry-on, NOT IN THEIR SUITCASE, especially if the traveler is flying home.

Note: The Master medication sheet should be returned to the New Directions Office.

Assisting the Traveler Take Medications
(Dispense medications to one traveler completely, including initialing the master medication sheet, before giving medications to the next traveler.)

Follow these steps while assisting a traveler with medications:

1. Medication Mindset: Isolate yourself mentally and/or physically away from distractions. You must be serious, focused, and uninterruptable. You cannot be in a hurry, even if a bus has arrived, a taxi is waiting, etc.

2. Physical Space: Find a table with ample space for the meds and papers. This may not always be possible; you may be in a van, on a plane, at a busy park, etc. In these cases, do your best to set up a concise, organized, and flat area. If needed, ask another tour guide to look after your travelers while you are setting up your space.

3. Preparation: Set up a cup for water, water, and a pill-dispensing (Dixie) cup. (These should be with you at all times). Wash your hands or use hand sanitizer.

4. Med Sheet & Meds: Pull out the Master Medication Record sheet, which should be in the bag with the medications at all times, for the traveler you are preparing to assist with medication. Next, take out all of the medication bottles, bubble packs, etc. for the traveler for that time period (i.e. it’s lunch time, pull out all 12pm meds).

5. STOP if you have any questions or doubt about the medication. If at any time you are concerned about the accuracy of the medication, contact the tour lead.

6. Follow this THREE STEP system before traveler takes medication every time:

A. First Step
   a) Compare each medication to the Med Sheet and be sure all medications are present and correct. You are checking for:
      • Right person
      • Right medication
      • Right dosage
      • Right time
b) Turn over each bottle or set each pack aside after comparing it to the list so you know you’ve checked it already.

**Pill bottles are much trickier. You must read the instructions on the bottle entirely. The directions can be confusing and MUST be compared directly to the medication sheet at this time. Be sure what the bottle says matches the medication sheet exactly.**

**B. Second Step**

a) After checking each bottle or pack, punch out or take out the pill and drop it directly into the Dixie cup. Do not touch the medication with your hands if you can avoid it. When using a bubble pack, you should punch out the pill from the numbered slot that matches that day’s date. If the dates are out of sync, double-check with the tour lead on how to punch them out.

b) Turn over each bottle or set aside each pack after dispensing medication to cup so you know you are done with that medication.

c) Count all the medications inside the Dixie cup. Check the total against the total number of meds for that time period on the medication sheet. Be sure the total number is the same! If not, something is wrong. STOP and double check and/or call your tour leader.

**C. Third Step**

a) Make sure you have the right traveler by looking at the name on the medication bottle or bubble pack (not against the med sheet) and looking at the traveler. Look the traveler in the face and say:

- “Are you (Traveler's Name)?” If traveler says “yes”, continue.

b) Make sure you have the correct traveler and the traveler agrees to the medication. Look the traveler in the face and say:

- “Is this what you take at (time of medication)?”

  If traveler says “no”, do not give the medication and immediately call the tour leader. If the traveler says “yes”, give the medications.

**Finally:** If all checks prove without a doubt that this is the correct medication, give the traveler the medication. Hand the traveler the medication directly, do not pass it to them through someone else. Watch to be sure that none fall on the floor. If a med is dropped and lost, you should use a med from another day and report to your tour lead immediately.

Sign your initials on the Medication Sheet immediately to show you have given this medication.

**Note:** When the pills in bubble packs come from the care home not in date or logical numerical order, you should initial the bubble pack at the spot where you punched out the medication.

**Medication Checks at Meeting:** Each night bring all of your travelers’ medications and med sheets to the tour guide meetings. At the first night’s meeting the tour leader must ensure that each med sheet is visually checked and compared with the medications, that each tour guide is initialing the med sheet correctly and fully understands the procedures.
Procedures: Tour Check-In

The first day of a tour is usually hectic. No tour is ever the same; you may be meeting your travelers at the New Directions office, at the traveler’s house, or at an airport, hotel, bus station, or cruise ship. Completing the tour check-in process entirely and accurately will help ensure a smooth tour and eliminate future problems. If there are any issues or delays on the first and last day of the tour, the Transportation and Driver Form has the most accurate and current contact information on who is responsible for getting the traveler to and from the departure and pick-up points. Also, always keep the New Directions office informed of any delays or changes.

Often the travelers you are meeting are not in your core group. They are in your Travel Day group. You are responsible for their safety and medication administration until you are able to pass them over to their core group leader.

When a traveler arrives at the meeting place, tell the care provider to stay until the check-in process is complete. This is particularly important for the medication check-in.

Greet the traveler and care provider with a smile. This is the start of the traveler’s vacation, so share in their excitement! Answer all of the care provider’s questions patiently and thoroughly. Work out details of the last day of travel, if necessary.

After welcoming the traveler to the tour, tell them you are going to officially check them in. Use the Traveler Check-in Form to record the following:

Medications:
Compare the medications being sent with those listed on the medication sheet. Make sure the medication times on the bubble packs and/or bottles match the medication sheet. If there is any discrepancy between the medications and the paperwork, resolve the matter before the care provider departs. Update the sheet by crossing out incorrect info and clearly writing in the changes. Always let the tour leader know of any discrepancy. If the care provider is not present during medication check in, contact them for immediate assistance.

Spending Money:
It is important to know and record how much personal spending money the traveler brings on tour. You will need to count the money, but this must be done with the utmost respect for the traveler’s sense of independence. ASK permission to check their money WITH them. Involve them in the process. Record the amount of spending money on the “Check In” form. If the care provider is present, ask them to confirm the amount being sent. This is important so there is no confusion later as to how much money was sent. Refer to the traveler profile for information on whether the traveler or tour guide should hold the money. It’s also helpful to ask the care provider and traveler who they are most comfortable with holding the money.

Luggage:
Write down a description of the bag or suitcase the traveler is bringing. Make sure that each piece of luggage has a New Directions luggage tag with the traveler’s name and address.
Procedures: Tour Check-In (cont’d)

Backpack or Carry-on:
Write down a description of the backpack or carry-on the traveler is bringing. This should also have New Directions luggage tags. If the traveler is flying, the medication MUST be in the carry-on, NOT the suitcase.

Photo ID: The traveler MUST have a valid state issued photo ID if flying. Airlines will not accept them if they are expired.

Passport: The traveler MUST have a valid passport for cruises and international trips. It must not expire for at least 6 months of the travel dates.

New Directions Name Tag:
The traveler either received the name tag in the mail prior to the tour or the tour guide must give one to the traveler. The traveler should wear the name tag at all times. Do not keep the traveler’s ID in their name badge.
Procedures: Airport

Although every tour is different, it is quite common for tour guides to fly with travelers or meet travelers at the airport before and/or after a tour. Getting through an airport can be tricky enough, but it can be even more of a challenge to maneuver through an airport with several New Directions travelers. The following guidelines explain the procedures to follow when flying with travelers, meeting travelers at their arrival gate, or seeing off travelers flying alone. Also, always follow your tour logistics.

Flying with Travelers

When flying with travelers but arriving separately to the airport, the group will almost always meet at the departure gate. The care providers will be responsible for checking in the travelers and taking them through security, and should meet you at the gate to complete the tour check-in process. When meeting travelers at the airport, always remember:

- Arrive early, at least two hours before departure
- Dress professionally and wear your New Directions name badge
- Hold up your New Directions sign so care providers can find you in the crowd

Once all the travelers have arrived and have been fully checked-in using the Tour Check-in Procedures and the Luggage Check-in Form, gather the group at the departure gate. Go to the boarding counter and introduce yourself and the group to the agent. **Request pre-boarding.**

*After you have gone through security, take travelers’ ID cards out of their name badges and put in a safe place... name badges can get lost.*

Meeting travelers flying in alone

Travelers will often fly alone and will need to be met at their arriving airport. For example, a traveler is flying unaccompanied from Oakland, and you are meeting the traveler when they arrive at LAX. Follow this procedure to meet the traveler: (Follow your logistics for exact instructions.)

1. Arrive at the airport at least one hour before the traveler is scheduled to arrive
2. Go to the ticket counter for the flight and request a gate pass to get through security. Explain that you are meeting a person with developmental disabilities; they will ask for your ID. If there is any problem, contact the tour lead or the New Directions office.
3. Check the monitor frequently to see if there are any last minute gate changes
4. Wait at the traveler’s arrival gate with your New Directions name badge. Hold up the New Directions sign when people start debarking the plane. WATCH VERY CLOSELY—travelers can easily slip by in the crowd and they might not be wearing their name badge.
5. Once you’ve met the traveler, make sure all carry-on’s have been taken off the plane. This is especially important because the travelers bring their medications in a carry-on backpack. Make sure all medications are present.
Procedures: Airport (cont’d)

Getting a traveler onto a flight alone
At the end of a tour, many travelers will fly home unaccompanied. In this case, the tour guide is responsible for getting the traveler through airport check-in and security and seeing that the traveler embarks the plane safely. Follow this procedure to escort the traveler to their flight:

1. Make sure the traveler’s and your IDs are easily located. Have the confirmation number and flight information handy.
2. Check in the traveler at the ticket counter. If the traveler will be changing planes, make sure they are checked in all the way through and their luggage is checked for all flights. Also request a gate pass so you can go through security. Explain that you are meeting a person with developmental disabilities; they will ask for your ID. If there is any problem, contact the tour lead or the New Directions office.
3. When you and the traveler have arrived at the departure gate, go to the boarding counter, introduce yourself to the agent, and request pre-boarding.
4. Wait until the traveler has boarded the plane and the plane has departed before leaving.

Flying home with a traveler
If you are flying home with a traveler after a tour and meeting the care provider:
1. Make sure the traveler has all belongings, such as meds, luggage, souvenirs, ID, money, camera, etc. Return everything to the care provider.
2. Make sure travelers are well fed before returning home.
3. Communicate with tour guide who was with traveler on tour for any information to discuss with the care provider when they ask, “How was it?”
4. Assist travelers with transportation if they are leaving the airport in a bus, taxi, train, etc. Give the drivers the information needed to get the traveler safely home.
5. Be sure you say Goodbye!
6. Be aware of any medications that may need to be given during travel time; this is especially important to remember if a flight is delayed.
Procedures: Airport (cont’d)

There are a variety of situations in which you will be assisting a traveler in an airport. You may be changing planes with a traveler, flying with one traveler or a whole group, taking a traveler to baggage claim or meeting the care provider, or simply assisting a traveler change planes to continue flying alone. In any case, follow the guidelines below to ensure a safe and smooth airport experience:

- When traveling with a large group of travelers and tour guides, break down into core groups. It is impossible to try to stay together with a large group. If every traveler is assigned a tour guide and stays with the tour guide, no one will get lost.

- If you are going to get snacks or use the restroom, get to the gate first and see how much time you have. Always allow extra time for food and bathroom trips.

- When you are called for boarding, be prepared and waiting to board.

- Always check the travelers’ medication sheets to see if they need to take medication at the airport or while on the plane.

- Communication is vital. If there are ever any problems or changes to an itinerary, let all of the appropriate people know. Call the tour lead or New Directions office to inform and ask for assistance.
Procedures: Lost Traveler

The best way to prevent one of your travelers from getting lost is to be proactive. Create a family dynamic in your group; encourage everyone to get to know each other, watch out for each other, and bond. Talk to your travelers about what to do if they get lost.

Yet, even with the best planning, a traveler can suddenly go missing. It is difficult to begin a search in a large crowd on your own, but with a plan and calm attitude you can avoid a lost traveler for long.

Prior Planning
To help avoid a lost traveler, follow these guidelines:
1. You and your travelers should always wear your name tags.
2. Show your travelers the "In case of emergency" part of the badge with the phone number to call, and explain how to tell someone if they get lost. Many travelers have cell phones. Exchange phone numbers. Remind the traveler that they must discard your number after the tour to respect your privacy after the tour ends.
3. Each morning, write down what your travelers are wearing and take a photo on your phone.
4. Instruct travelers to stay in one place if separated from the group. Explain NOT to come looking for you, you will come find them.
5. If at a theme park, instruct the travelers to find an employee and tell them "I am lost" and show the ND name badge.
6. Pay attention to each traveler’s interests. This may provide clues as to where the traveler has gone.

Finding a traveler
If a traveler becomes lost, follow this process IMMEDIATELY:

1. Try to reach the traveler on his/her cell phone.
2. Stay CALM.
3. Notify the tour leader right away. He/she will decide the next step. Do not try to locate the traveler on your own. Time is of the essence.
4. The lead will decide if park security, police, other tour guides, care providers, etc. should be contacted.
5. The lead may ask you to continue activities with the rest of your group so as to not disrupt their day.
6. Once the traveler is found don’t dwell on it! Remember, traveler’s attitudes mirror our own. This should not be the highlight of their tour.
Procedures: Swimming

Due to the extraordinary safety hazards with swimming, other tour activities should be encouraged in place of swimming. When this is not logical (e.g. Hawaii tours, you are in 100+ degree weather, it is a life-long dream for the traveler), the following procedures must be followed:

1. For each traveler, on every tour, and each time, you MUST consult with the tour leader before taking anyone swimming in any body of water (pool, Jacuzzi, ocean, lake, river, etc.) This holds true even if the traveler profile says, “Can Swim.”

2. All tour guides at the pool must be in swimsuits. One tour guide must be in the pool and one must be on the side watching the swimmers closely at all times. This is not a time for tour guides to socialize, relax, or take a break.

3. Due to the fun or relaxed environment at a pool setting, it is easy to be distracted. Drowning happens very quickly. You must be closely watching your travelers at ALL times while they are in or near the water.

4. The 1:4 ratio of tour guides to travelers must be maintained. Even a ratio of 1:3 is preferable for swimming.

   Example: If there are 1-8 travelers in the pool, then there should be one tour guide in the pool and one on the side watching. If there are 9+ travelers in the pool, then three or more tour guides must be present to maintain the 1:4 ratio

5. Travelers with seizures - Generally speaking, a traveler who has any kind of seizure, controlled or not controlled, is not allowed to swim or wade. There may be exceptions. The Emergency Authorization Form now has a place for parents/guardians to indicate if a traveler with seizures is allowed to swim or not. Special staffing and safety arrangements should be made by the tour leader.

   A seizure happens suddenly and the person generally takes a deep inhale at the onset. This can be fatal in water.

6. Before travelers may swim in the deep end of the pool they must demonstrate their swimming ability by swimming across the shallow end twice.
Procedures: Seizures

Seizures are temporary alterations in brain functions due to abnormal electrical activity of a group of brain cells. There are two main types of Generalized Seizures:

**Grand Mal:** Also known as Tonic Clonic Seizures, involving the entire body, usually characterized by muscle rigidity, violent rhythmic muscle contractions, and loss of consciousness.

**Petit Mal:** Also known as Absence Seizures, the person may appear to be staring into space or have jerking or twitching muscles.

Generalized absence seizures, which involve relatively brief episodes of unresponsiveness, may be difficult to identify and do not require specific first aid procedures. If you see someone having a grand mal seizure, remain calm and do your best to follow these first-aid procedures:

1. **Stay calm**
2. **Prevent injury:** Cushion the person’s head and remove sharp or solid objects the person may hit during the seizure.
3. If you can safely do so, **roll the person onto their side** to keep their airway open and prevent choking on vomit or saliva.
4. Do **NOT** restrict the person from moving or attempt to move them unless they are at risk of injuring themselves.
5. Do **NOT** put anything into the person’s mouth. This can cause choking or damage the person’s jaw, tongue, and teeth.
   a. Contrary to widespread belief, people cannot swallow their tongue during a seizure.
6. **Time** the length of the seizure or ask a nearby tour guide and note what symptoms occur.
7. Be sensitive and supportive, talk calmly to the person and keep onlookers away.
8. **Call 911 only if:** the seizure continues for longer than five minutes (or what’s indicated in their seizure addendum), the person is pregnant, the seizure occurs in water, the person does not immediately regain consciousness, another seizure begins before the person regains consciousness, or the person does not have a diagnosed seizure condition.

**AFTER a seizure**

1. As soon is safe, contact the lead. He/she can advise you on calling 911 and assist with writing a seizure report, calling the traveler’s care provider, assessing injury.
2. Post-seizure the person needs time to rest. They may feel embarrassed and be unaware of what happened. It is common to loose control of your bowels and bladder during a seizure. Ensure others do not make fun of or discuss the event.
3. Encourage the person to lay down in a cool area for a while. It is normal to have a headache, feel disoriented, and even have slurred speech.
Procedures: Diabetes

Diabetes is common. Perhaps because of this it is sometimes not taken seriously enough. It can be deadly if proper procedures are not followed. If you have a traveler with diabetes you have a huge responsibility.

Unfortunately, travel provides just about the worst environment possible for diabetics. This is because diabetes is escalated when any routine is disturbed such as:

- A change in sleep schedules
- Different meal times
- A change in types and/or amounts of food
- Different activity levels
- Different temperatures and environments

On tour you must be on high alert for symptoms that can quickly lead to diabetic coma or death. See the list below.

There are different ways that diabetes is controlled:

- **Insulin Injections.** This usually means the diabetes is severe and if procedures are not followed very carefully, coma or death can occur. You will need special training to care for a traveler who has severe, “Brittle” diabetes, or someone who takes insulin injections. Consult with the lead frequently during the tour.

- **Medication Controlled.** This means the diabetes is severe. A written diabetic diet must be followed IN ADDITION to taking the medication to keep them safe.

- **Diet Controlled.** This usually means that the diabetes is not as severe but the diet must be strictly followed or they can have an “Insulin reaction” or coma.

Call 911 if you see any of the following symptoms:

- Frequent urination
- Frequent thirst for a day or more
- Appetite loss
- Abdominal pain
- Weakness/Fatigue/Drowsiness
- Headache/Confusion
- Dizziness/Double Vision
- Lack of coordination
- Nausea/Vomiting
- Low blood pressure
- Breathing difficulty when lying down
- Deep or Rapid breathing
- Muscular stiffness or aching
- Fruity breath (breath odor)
- Mental stupor
- Loss of consciousness
- Convulsions
Procedures: Diabetes (cont’d)

Diet:
Anyone with any level of diabetes should be following a *written doctor-prescribed diet*. NDI always requests a clearly written medical diet. Often it is not provided. Part of the reason for this may be that in group homes or institutions, the food is consistent and generally follows diabetic guidelines. When checking in a traveler the care provider may casually say, “Oh just follow a regular or usual diet.” **On tour there is never a regular or usual diet!** The tour guide must carefully monitor the type and amount of food that a diabetic traveler consumes. Often they will sneak sweets or carbohydrates because they are so readily available! Be on alert!

**Written Diet:**
If the care provider has given NDI a written diet, you will have it in your packet. Follow what it says. It probably will not be very clear so consult with the lead.

**No Written Diet:**
Use the following guidelines if you do NOT HAVE a written diet. Don’t guess. Ask the lead for guidance.

- Meals have to be “balanced.” Equal portions protein, carbohydrates, vegetables and/or salad. No regular desserts.

- An ideal meal is a lean piece of meat or fish or chicken, a fresh vegetable and/or salad and a small portion of one COMPLEX (see below) carbohydrate. A small piece of fresh fruit for dessert. If they are overweight they should have only a single serving of each. If they can have “seconds” it should be the protein or the vegetables, not the carbs or fruit.

- Examples of COMPLEX (good) carbohydrates: Brown rice, whole wheat bread or whole wheat pasta, beans. These are usually okay to eat in small portions. Avoid sauces as they usually have sugar added.

- Avoid white rice, white bread, regular pasta, macaroni, anything with white flour. These turn to sugar in the body.

- Avoid fruit juices. They are loaded with sugar.

- Nothing with obvious sugar such as pastries, doughnuts, cakes, cookies, candy, ice cream, pudding, chocolate milk. Offer a small piece of fresh fruit instead.

- Avoid canned fruit because it usually has sugar added.

- No regular soft drinks because they are loaded with sugar. Even “Sugar Free” soft drinks should be avoided.
Procedures: Diabetes (cont’d)

- Often the travelers are used to having “Sugar Free” or diet drinks. Discourage soft drinks altogether and encourage ice tea, water, iced coffee with no added sugar. However, if they insist on a diet drink, hopefully you can encourage them to limit it to one.

Avoid:

- Fried foods, fats, cold cuts, hot dogs, potato chips, corn chips, pretzels, pancakes, waffles, french toast.

- Pizza. If they “must” have pizza, make it a small piece with veggies, meat, chicken and get a side salad. Hopefully you can order extra protein on the side. No bread in addition to the pizza.

IMPORTANT: Even sugar-free desserts and candy should be limited to small servings. They contain ingredients which can affect blood sugar levels.
Hotel Checklist

_____ Is there a separate bed for each person in the room? Alert lead if there is not.

_____ A) Unpack traveler’s belongings with the traveler
- Check thoroughly for hidden meds and/or money
- Show exactly where everything is to facilitate traveler’s independence
- Give traveler a plastic bag with his/her name on it for dirty laundry
- Explain the daily shower & clean clothes policy of New Directions

_____ B) Show how to use the shower/bathing facilities
- Show how to adjust the water temperature (burns can be severe from scalding water)
- Show the traveler how to turn on the shower, let it run a while, test the temperature, then enter
- Don’t assume the traveler already knows any of this information

_____ C) Show how to operate:
- Lights
- Television (ask the lead to assure the movie channel has been turned off at front desk)
- Heater/Air conditioner (check the temperature each time you are in the rooms to ensure the temperature is comfortable)
- Radio
- Drapes (remind to close when dressing)
- Instruct traveler not to use Mini-Bar (if in room)

_____ D) Show how to use telephone:
- Assess if the traveler can properly dial phone numbers. One of the roommates must be able to reliably use a phone. If neither can use a phone, immediately notify the Lead to discuss a safer roommate situation.
- Write down:
  - Your cell phone number and the lead’s cell number
  - The hotel’s room to room calling procedure to call your room
  - The room to room calling procedures to reach lead’s room
  - How to call the front desk so that if all previous calling methods don’t get through, the traveler is sure to reach someone in an emergency. Tape these phone numbers near the phone
- Let them know to call if they need anything rather than trying to find your room
- Practice by going to your room and having the traveler call you
- Long distance calling will be turned off at the front desk by the tour leader. If the traveler wants to make a long distance call, he/she may use a New Directions cell phone

_____ E) Show how to operate key to room:
- Assess if traveler can operate the key properly
- Decide if traveler should hold a copy of the room key
- If traveler is holding own key, show safe place to hold it (pocket, purse, etc.)
- If the traveler is being left alone in their room for a short period give them a specific time you will be back.
Emergency Checklist

Emergencies and injuries are very rare, but in the case of emergency we need to be prepared. If you encounter any kind of injury or illness, take action to keep yourself and travelers safe. As soon as you're able, contact the lead who will make further assessments and contact medical personnel.

In case of minor injury or illness:
___ Assess the situation and refer to the traveler's profile for medical conditions and allergies
___ Secure the traveler in a comfortable situation so they are more relaxed
___ Inform the tour leader
___ Check thoroughly for cuts/bruises/bleeding under clothing
___ Ask for help from others if the lead is occupied
___ Tend to the needs of the traveler
___ Redirect other travelers’ attentions so as not to raise anxiety
___ If at the hotel/cruise ship, access the First-Aid Department
___ If out on your own, use skills learned in first-aid classes
___ Refer to First-Aid chart in back of Tour Guide Manual
___ Access first-aid supplies/medications in the tour bag
___ Take traveler to medical facility if necessary
___ Tour leader will inform New Directions office who will then inform the parent/care provider
___ Write an incident report (must be done within 24 hours), lead will assist
___ When you return to the hotel, get injury/illness checked by First-Aid
___ Check the injured area frequently throughout tour
___ Lead follows up with parent/care provider after the tour

In case of major injury or illness:
___ Assess the situation, take control, stay calm
___ Call for help. Never hesitate to call 911 (do not drive)
___ Refer to Traveler Profile for allergies, phone numbers, insurance numbers
___ Secure the safety and well-being of other travelers
___ Give instructions as needed to anyone around
___ Contact the tour lead and/or New Directions office
___ If ambulance is necessary, find out and record what hospital it’s going to
___ Follow medical advice, get specifics in writing
___ Keep traveler informed, but redirect their attention to keep anxiety down
___ Keep tour leader informed
___ Write thorough and detailed Incident Report
___ Do thorough follow up with tour leader
Working With Travelers Expressing Difficult Behaviors

An integral part of New Directions’ mission is treating travelers with the same dignity and respect you expect others to treat you with. This goes a long way to mitigate challenging behavior patterns travelers may otherwise express. It is not the role of a New Directions tour guide to attempt behavior modification, management or any sort of discipline or restraint with travelers.

Instead:

- Be aware of what might trigger feelings of negativity or resistance and avoid those situations
- Be aware of your traveler’s moods at all times
- Respect their preferences & requests
- ALWAYS follow through on your word
- Try to turn a negative into a positive -- humor works great!
- Offer choices, there is little they can’t have or do while on vacation, the sky’s the limit! It’s your job to make their dreams come true!
- Remain calm and patient even in the most stressful situations. Your attitude will be reflected in their actions
- Try to find the cause of behavior rather than just reacting to the behavior
- You can always ask the lead to take a traveler who is exhibiting negative behaviors for a while until they are more relaxed
- Some travelers are capable of being given time alone in their hotel room to decompress. Always check with the lead before leaving a traveler unsupervised!
- In a very loving, non threatening way, you can say, “Gosh I would just HATE it if you were not able to go on tours in the future” or something similar. Be more upset about them perhaps not getting to travel than they are about whatever is bothering them. This usually works well!

- And don’t forget, we’re a team! Ask for help if you get stuck 😊
Disneyland Helpful Hints

Maximizing Time
Please do not arbitrarily group up at the park! This can deter from traveler’s overall experience. There are suitable cases when grouping is beneficial. Please defer to the tour lead. Ask travelers the night before which ride/attraction they are MOST excited about. Take note of these and identify them on the map. This ensures everyone gets to do at least one ride/attraction they really want so no one feels left out. Then work on traveler’s second and third choices, shop, meet characters etc. Also talk about their level of comfort with rides and shows. Do they like fast rides? Do they only want to meet characters? Are they afraid of the dark? If they get wet on a ride will their day be ruined or fabulous? Tour Guides should have all this knowledge and more before stepping foot in the park. Then make your plan. Start a rough outline of how your day will go. Use the park map so you aren’t running back and forth across the park for no reason. Talk to the lead if you can’t figure out how to fit all the pieces together or if your travelers’ interests just aren’t meshing. But first thing’s first, Disability Access Passes...

Disability Access Services
The DAS is designed for Guests who are unable to tolerate extended waits at attractions due to a disability that is not physical in nature. This service allows Guests to schedule a return time that is comparable to the current wait for a given attraction. Guest Relations/City Hall at Disneyland and Chamber of Commerce/Guest Relations at CA Adventures distribute these passes. To utilize the DAS, eligible Guests must first register. Immediately when you arrive at the park, please assist each of your travelers with the DAS registration. They will have their photo taken, and their park ticket scanned making this their DAS pass. You as the attendant can participate with travelers as long as each traveler gets two people put on their DAS pass. We recommend using Disney’s attraction log to keep track of return times (provided at Guest Services).

HINT: as you come in the park, write each traveler’s name on their admission ticket so you don’t get them mixed up at City Hall! Your park tickets are now your DAS passes. They can still be used as standard FastPasses.

Rider Switch
This enables you to experience an attraction while another member of your party waits with the Guest who does not ride. You then “swap” to enable the other person to participate without having to wait in line. For further information on how to use this service, please speak with a Cast Member at each attraction. Many attractions have safe waiting areas for travelers who do not want to ride with the rest of the group.

Disney FASTPASS Service
FASTPASS is a free service that gives you a reservation in line at selected rides and shows. FASTPASS tickets are printed after you insert your park admission ticket into a kiosk at the ride or show you want to see. The FASTPASS ticket you receive will tell you what time you can come back so you can get on the ride or see the show with a lot less waiting.
Disneyland Helpful Hints (cont’d)

Some attractions require FASTPASSES for admittance. FASTPASSES are limited so if there’s a ride/show your travelers really want, get your FASTPASS right away!!

HINT: Even though you can only have one attraction pending on your DAS pass at a time this does not interfere with your ability to collect FASTPASSES. We suggest staggering the use of your DAS pass and FASTPASS to enjoy as many attractions as your travelers want!

Package Service
If your travelers prefer to shop little by little throughout the day but you can’t carry all their bags, leave the purchases at the register with the Disney employee and ask for their package service. When you leave the park that evening, everything you’ve purchased will be waiting for you at the gate!

Wheelchair Rentals
Wheelchairs can ONLY be rented just outside Disneyland for use in either park. During very busy months they can sell out.

For travelers who cannot transfer from a wheelchair, make a note of the rides that are FULLY accessible in both parks. Special disability maps provide extra detail on attractions.

First-Aid
Disneyland-Main Street, U.S.A. near the Plaza Inn restaurant
California Adventure-Buena Vista Street next to the Chamber of Commerce

Shuttle
The Anaheim Marriott shuttle picks up at shuttle stops 4 & 5 in front of the park entrance
Marriott Suites shuttle is route 1 in front of the park entrance

Disney Step by Step
• Take the ART shuttle to Disneyland. The stop is just outside our hotel to the right by the green benches.
• Arrive at Disneyland.
• Rent wheelchairs now if needed (they run out).
• Go to City Hall. Get Disability Access Service Card for both days. You must take at least one traveler with you into City Hall -- their picture will be taken and put on the pass. Choose a traveler who will likely go on rides. Choose which ride/attraction you want to do first.
• Review “If I’m lost procedures” in front of City Hall with your group.
• Store belongings in lockers on Main Street if necessary.
• Give the travelers the best day of their life! Be sure you do what THEY want, eat where THEY want, etc.
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EMERGENCY FIRST AID CHART

This First Aid Chart is not intended to take the place of qualified help in the event of an emergency. In any emergency, always seek medical advice and assistance when you think it is needed. It is also recommended that you take a certified CPR and first aid course.

**ANIMAL BITE**
Flush the wound area with water and then wash with soap and water for at least five minutes. Cover with a clean dressing or cloth. Immediately seek care at a hospital or physician.

**BLACK EYED BURST**
As soon as possible following the injury, dip a cloth in ice water and hold next to the area for at least 10 minutes. A “black eye” is essentially a bruise around the eye that will cause pain and swelling and gradually fade in time. If the bruise does not fade or if there is a change in vision, consult a physician.

**BURNS**
Minor = Wash wound area with soap and water, not alcohol; cover with a sterile gauze bandage.
Major = If blood appears to be gushing or spurting, follow these instructions and call for help. Take a clean cloth and press hard on the cut for 10 minutes. Do not remove pressure to see if it’s working. If possible, raise the cut above the level of the chest. After 10 minutes, if the bleeding has stopped, cover the cut with a bandage. If the bleeding hasn’t stopped, try pressing harder for five more minutes and seek medical help.

**CHEWING**
If the person is chewing and unable to stop, guide the person and wrap your arms around the waist. Make a fist, grasp fist with other hand. Place fist against the stomach just above the navel but well below the lower tip of the breastbone. Pull fist upward into the stomach with a quick upward thrust. Repeat up to four times. If chewing continues, seek medical help. If the person becomes unconscious, lay him or her down, roll to side, pull the tongue and jaw forward and with your index finger, dislodge any visible matter. Perform mouth-to-mouth resuscitation and/or CPR.

**CONVULSION/SEIZURE**
Gently prevent person from hurting him or herself on nearby objects. Loosen clothing after jerking subsides. Have person lie down. Help keep the airway open. Turn head to the side in case of vomiting to prevent choking on inhaled vomitus. If breathing continues, administer mouth-to-mouth resuscitation or CPR. After seizure, allow patient to rest. Seek medical attention.

**ELECTRIC SHOCK**
Turn off electricity if possible. If not possible, pull victim from the electrical contact with a dry rope, woven pole or cloth. Do not touch victim until contact with electric current is broken. Administer CPR. Call for emergency help.

**EYE INJURIES**
Chemicals = Have person turn head so injured side is down. Flood eye with water for at least 15 minutes. Cover eye with a clean cloth and seek professional help.
Foreign particle = Do not rub the eye, that may cause deeper injury. Try to locate the object, if it is in the pupil, or seems embedded in the white of the eye, go immediately to the emergency room. If the object is floating in the liquid surface, you can try to remove it. Hold the lower lid open, look up, and using the edge of a clean cloth, brush the matter quickly off the eyes surface. If you can’t see an object, pull the upper lid down and cover the lower lid and let it slide back up. This may dislodge the particle. If pain and tearing persist, seek medical help.

**FAINTING**
Lay patient on his or her back and raise both legs above the heart. Check to be certain it is clear. Loosen tight clothing and apply cold cloths to the face. If fainting continues, seek medical help. The victim becomes unconscious, lay him or her down, roll to side, pull the tongue and jaw forward and with your index finger, dislodge any visible matter. Perform mouth-to-mouth resuscitation and/or CPR.

**FALLS**
Stop any bleeding and cover wounds with clean dressings. Keep victim comfortably warm to prevent shock. If you suspect broken bones, do not move person unless absolutely necessary (such as in case of fire). Call for emergency help.

**FISHHOOKS**
Fishhook injuries carry a high risk of infection, so if you can reach a physician, do so. If you are far from medical help, push the hook farther through the tissue until it goes through the skin. Don’t pull it out; the barb will cause further injury. Using Wire cutters, cut off the barb, and then pull the hook back through the skin. Clean and bandage the wound and seek medical attention as soon as possible.

**FRACTURES/BREAKS**
Stop any bleeding and cover wound with clean dressing. If it is a simple fracture, set it in a splint (wood, corrugated cardboard, rolled-up blanket, pillow, etc.) supported with cloth or rope ties. Do not move patient if back or neck is suspected injury. Keep person warm and treat for shock (see above). Call for emergency help.

**FROSTBITE**
Signs and symptoms: The skin of hands, feet, face or other areas first becomes red, then turns gray or white. Never rub frostbitten area with snow; that will only continue the chilling of the tissue and cause further damage. A gradual warming by immersing the area in water that is slightly warmer than body is safe for slight frostbite. Elevate the affected area, cover with dry and warm garments and consider pain relievers if there is slight pain. Keep frostbitten toes or fingers separate with clean, dry cloths. Hospitalization is necessary for children whose body temperatures drop below 93°F and for adults who have severe frostbite. Don’t sit in an oven or fire to warm the frostbitten area; unequal exposure to the heat could burn the tissue. Don’t massage the damaged area or rub with snow. Do not break blisters or give alcohol drinks. Contact your physician or emergency room immediately.

**HEAD INJURY/CONCUSSION**
Usual symptoms of simple concussion include headache, slight dizziness, queasy stomach or vomiting. These usually require an ice pack to the head and rest. Observe for any severe symptoms such as unusual drowsiness, unequal pupils, persistent vomiting, confusion and lack of coordination. If one or more of these conditions are present, immediately seek medical care.

**INSECT BITES AND STINGS**
For wasps and bees = Try to remove stinger by gently scraping with a clean knife blade. Cleanse with soap and water and apply an ice compress to reduce swelling. If person has an allergic reaction (will happen within 30 minutes), hives, itching all over, wheezing, vomiting or a history of allergic reaction, follow directions on bee sting kit, if available. Call for emergency help.

**FROSTBITE**
Tick bite = Cover the insect’s body with a heavy oil or lighter fluid and allow to remain for about 20 minutes. Carefully remove with tweezers, being sure to remove all parts of the insect. Scrub area with soap and water.

**ITCHY BITE**
Use hydrocortisone cream, calamine lotion or rubbing alcohol.

**MOSEBLEED**
Have person sit down and lean forward. Encourage person to breathe through the mouth. Or pack bleeding nostril(s) with gauze and pinch. If bleeding persists, call a doctor immediately.

**SHOCK**
Have person lie down, loosen clothing and cover to prevent loss of body heat. Be cautious not to overheat. Check pulse rate and irregular heartbeat.

**SPINDLE**
Tweezers remove most splinters easily, but a physician should remove deeply embedded splinters. If the length of the splinter is visible under the skin, use a sterilized needle to slit the skin over the splinter and pull out the splinter with the tweezers. Clean the wound.

**SPRAINS & STRAINS**
Elevate the injured joint to a comfortable position. Apply an ice bag or a cold compress over the sprain to reduce pain and swelling. Ability to move does not rule out fracture. Person should not bear weight on a sprain. Sprains that continue to swell should be examined by a physician.

**UNCONSCIOUSNESS**
When person cannot be aroused, lay in a flat position and make sure the victim’s airway is clear. Check pulse rate. If pulse rate is felt, begin administering CPR. Keep the person comfortable and warm. Never give an unconscious person food or liquid. If vomiting occurs, turn head to the side to prevent choking on inhaled vomitus. Call for medical help.

**ABCs of LIFE SUPPORT**
This emergency first aid procedure consists of recognizing stoppage of breathing and heartbeat — then administering cardiopulmonary resuscitation (CPR). This involves: (A) opening and maintaining person’s airway, (B) rescue breathing, (C) providing artificial circulation by external cardiac compression (heart massage).

**A**
Airway open. Turn person on back and quickly remove any foreign matter from mouth. Place your hand under person’s neck and lift, tilting head back as far as possible with other hand. This opens an airway.

**B**
Breathing restored. If person is not breathing, place your mouth tightly over his or hers, pinch nostrils and blow into mouth until you see the chest rise. Remove your mouth. Give two breaths and check for check for pulse (see C below). If pulse is present, continue rescue breathing at a rate of 12 times per minute.

**C**
Circulation maintained. Quickly feel for neck pulse: Keeping person’s head tilted with one hand, use middle and index fingers of other hand to feel for carotid pulse in neck artery under side angle of lower jaw. If no pulse, start rescue breathing and external cardiac compressions.

Person’s back should be on firm surface. Place heel of your hand on lower breastbone (about 1 1/2 inches up from the tip), with fingers off chest and other hand on top. Gently rock forward, exerting pressure down, to force blood out of the heart. Release pressure. Alternate (B) breathing with (C) circulation.

Two resuscitators: Give 60 chest compressions per minute — one breath after each five compressions. One resuscitator: Perform both artificial circulation and rescue breathing, giving 80 chest compressions per minute — two full breaths after each 15 compressions.

For small children and infants: Cover nose and mouth with your mouth and blow gently, 20 times per minute. If resuscitation is necessary, use only heel of one hand for children, only the tips of one hand and middle fingers for infants. Give 80 to 100 compressions per minute, with one breath after every five compressions.