

POLICY AND PROCEDURE MANUAL



Version 1.0 | [Month, Year]

[Agency Name]

WWW





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[Agency Name]

[Agency Address]

[Contact Number]

[Email Address]

[Website]



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DOCUMENT CONTROL & APPROVALS

Document revisions shall be recorded in the table below;

Ver. No.	Rev. No.	Page No.	Description of Amendment	Approved By	Date

Document review and approvals shall be recorded in the table below;

Description	Title	Signature	Date
Prepared By			
Reviewed By			
Approved By			

Note: All policies and procedures shall be reviewed at least annually, with recommended changes submitted to the governing body for approval, as necessary.

***Henceforth, the term "Client(s)" will be referred to as Children, Youth or Parents/Families.**



PROGRAM STATEMENT

Purpose and Philosophy

The purpose of this policy is to define organization-wide processes and activities that maximize the coordination of quality of services to the clients at [AGENCY NAME]. This policy shall be made available for review, upon request, to clients and their designated representatives and shall be readily available for staff use at all times within [AGENCY NAME].

[AGENCY NAME] shall review this policy at least annually. This policy and procedure manual is developed adhering to all applicable laws and regulations in the state of Ohio.

[AGENCY NAME] is a youth-friendly Group Home. We believe in Hope, Healing & Guidance as our critical pillars in delivering excellent services to our clients. Our services will mainly focus on children and youth to support them with our quality care and services to improve their lives. We provide a structured, safe space where we inspire growth, educational services, mental fortitude, health, and well-being to ensure bright futures for all involved and provide assistance in making emotional and behavioral changes.

Our vision is achieved through our commitment to: excellence in service, child/youth caring, employee development, ethical and fair treatment to all stakeholders within our facility of [AGENCY NAME].

We operate in numerous states within the United States. State, local, and federal employment laws change with some frequency, either as a result of a judicial decision or new legislation or regulations. Although we seek to monitor the laws in all states where we have employees, our Handbook may not always reflect the very latest requirements. We are, of course, committed to complying with all applicable laws.

Services

We provide a broad range of services for behaviorally, emotionally, or mentally disordered children and adolescents, including evaluation, therapy, medication management, crisis intervention, and collateral services to parents and families.

Our programs provide a safe and healing environment for your child to work through mental and behavioral health symptoms that cause problems in the home, school, or community.



Core Competencies

[AGENCY NAME] core competencies include: commitment to recovery and safety of our clients, emphasis on communication and influence and responsiveness to our client's needs.

At [AGENCY NAME], communication and responsiveness is prioritized and influence and mentorship are provided appropriately to aid in the client's recovery with the help of therapists, staff, and counselors.

Mission Plan

Generally, centered on assisting youth, children, and individuals with disabilities with foster shelter and care. Our youth services focus on providing a safe, loving, and peaceful environment for young men.

Service Population

Focused Characteristics of the foster group home children served:

- Ages: 13-18
- Developmental needs (educational support and mentoring)
- Emotional needs: Stress, anxiety, depression, frustration, loneliness, panic, and phobias.
- Physical needs: Exercise and extra-curricular activities.

We provide a broad range of services for behaviorally, emotionally, or mentally disordered children and adolescents, including evaluation, therapy, medication management, crisis intervention, and collateral services to parents and families.

Our programs provide a safe and healing environment for your child to work through mental and behavioral health symptoms that cause problems in the home, school, or community.

Care Program Provided

Current Levels of care provided:

- A safe and peaceful family-oriented community group home(s)
- Teaching discipline through teamwork, personal responsibility, and expectations
- Working with youth, caregivers, family, and agencies to model respect for self and others through positive and healthy choices.



Typical Daily Schedule

9:00 – 10:00 am (6:00 – 7:00 if traveling to school)

Wake Up, Get Ready, Eat breakfast

7:00 – 9:00

Meditation. Workouts and physical exercise. Motivational moments (i.e., readings, speakers, videos)

10:00 – 12:00 pm

Homework

Create workspace. Have your teen pick a spot where they can work uninterrupted. Have them organize and/or decorate it in a way that they feel will help them be productive and motivated.

12:00 – 1:00 pm

Lunch and Clean Up

Have your teen make a meal for the family

Wash hands before and after eating

Bring dishes to sink, load dishes into dishwasher or help dry dishes

1:00 – 2:30 pm

Quiet Time- Read

Do a puzzle

Journal

Listen to music/podcast/audiobook

Meditate

Color/draw/paint

Take a nap

2:30 – 4:30 pm

Physical Activities. Run/walk, ride a bike, set up an obstacle course

Extracurricular activities/sports, have them practice what they can at home

Home workouts (i.e., yoga, training, dance videos, etc.)

4:30 – 6:30 pm

Electronic Time

Play on iPad/tablet/computer/phone

Use social media

Watch TV/movie



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6:30 – 7:30 pm

Dinner and Clean Up

Wash hands before and after eating

Bring dishes to sink, load dishes into dishwasher or help dry dishes

Meal prep.

7:30 – 9:00 pm

Wind-Down Time

Take a shower/bath (use bath bombs, listen to music)

At-home spa treatments like face masks, paint nails, etc.

Put on pajamas, brush teeth, wash face

9:00 – 10:00 pm

Bedtime Routines

Read

Light candles

Listen to music

Journal

Meditate or do mindfulness exercises

Sleep

*Note: the typical schedule may deviate from time to time or is subject to change or altered

House Rules

1. Respect your elders
 - Listening without complaining and talking back
 - Actively follow guidelines set by custodian
2. Respect yourself and others
 - Be kind.
 - No unwanted touching, hitting, or any violent or sexual activity
3. Respect your mind and body
 - Keep yourself clean
 - Maintain a positive attitude
4. Respect each other's property
 - Ask permission first if something does not belong to you
 - Clean up behind yourself

All decisions are grounded in philosophies, including the approach to discipline. In most settings, discipline typically refers to actions taken when a child breaks a rule or fails to meet a requirement or expectation.



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The failure of a child to obey a rule or meet an expectation is seen first as an opportunity to understand the child's needs. This is when positive reinforcement is provided, and teaching occurs. Like rules, routines should provide a predictable structure that establishes boundaries and minimal expectations for behavior.

The involvement of residents in establishing rules that relate to the safety and security of their environment is expected. Each team member, staff, and residents should establish a set of "rules" that meet these criteria and reflect the developmental stage and needs of their residents. These "rules" should be printed and placed in public areas and made available as needed. Setting expectations will be the basic model for life skills which will help our children to mature and become more responsible. Performing appropriate chores, doing homework, communicating respectfully with others, and practicing good hygiene are a few examples of core skills.

Children served shall be discriminated against because of skin color, pigment, race, sex, national origin, sexual orientation, age, creed, ancestry, political affiliation, cultural identification, familial status, religion, or disability.

Statement of Policy

[AGENCY NAME] prohibits discrimination in all its activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, gender identity, genetic information, and any political beliefs.

[AGENCY NAME] is consistent with the:

- Federal and State Law of Ohio
- Needs of our staff and the community we serve;
- Agency policies and procedures;

We strongly adhere to compliance requirements stated by Ohio State Law, Department of Health and follow the guidelines implemented in terms of policies and procedures within [AGENCY NAME].



POLICIES AND PROCEDURES

Level of Supervision

Supervision of Care and Services

The supervision of care and services is the provision of medical oversight to ensure that we serve the member/client effectively and safely in the community.

Medical oversight includes assessing and monitoring the member/client condition and implementation/arranging interventions to prevent or delay unnecessary and more costly institutional placement.

Supervisory Instructions

Supervisory visits are conducted to ensure the residents are satisfied with the services provided by the caregivers. Also, to ensure the caregivers are providing services in accordance to the defined state regulations.

List of what is to be supervised:

- The binder needs to be visible in the home
- Ensure the Client Emergency form is visible for caregiver in the binder
- Ensure the Client Care Plans, Home Care Service Plan, Care Plan and Medication.
- The location of the Home Care Service Plan, the Care Plan, and Med sheet is under the Care Plan description.
- Ensure the caregivers are signing the Sign In/Out sheet
- Ensure caregiver is writing progress notes with signature and dates. Also, read during each supervisory visit is a must.
- Ensure Bowel and Bladder forms, Blood Pressure forms and Glucose forms (if applicable) are replenished.
- Ensure Sign In/Out Form, Incident Reports, Weight Record, and Home Shopping Receipt forms are replenished
- Cover of binder should be neat, clear, legible and intact.

Plan for the Provision of Resident Care

Resident care encompasses the recognition of disease and health, resident/family education, resident advocacy, and research. [AGENCY NAME] is committed to assuring a single standard of culturally competent care to



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residents. Resident Services at [AGENCY NAME] are delivered through organized and systematic processes designed to ensure the delivery of safe, effective, timely care and treatment. Residents have access to the appropriate level of care based on their individual condition and needs. [AGENCY NAME] meets the identified needs of residents in a coordinated, interdisciplinary and systematic way that addresses the entire spectrum of care including the time before admission, during admission, in the hospital, before discharge, and at discharge. This integrated approach aims for consistency, continuity, and quality of care.

Providing resident care services and the delivery of resident care requires specialized knowledge, judgment, and skill. Resident services are planned, coordinated, provided, delegated and supervised by professional health care providers who recognize the unique physical, developmental, emotional, spiritual and culturally diverse needs of each person. [AGENCY NAME] medical staff, registered nurses, and allied health care professionals function collaboratively as part of an interdisciplinary team to achieve optimal resident outcomes. These professionals provide the full scope of resident care, which includes resident assessment and treatment planning. Treatments are given under the direction of a RN with professional staff membership and privileges. All treatments are ordered by RN or other allied health professionals as appropriate within their scope of practice.

Resident Assessment

Data collection to assess resident needs

Data indicating each resident's need for care or treatment is collected and assessed by members of the multidisciplinary team and integrated into a plan of care that continues throughout the resident's interaction with the organization. Assessment includes physical, psychological, social, spiritual, educational, nursing, and pain needs.

Diagnostic testing

Diagnostic testing is performed in a competent and professional manner so that it can be utilized to complete the resident assessment that determines care and treatment needs.

Testing may include the psychological testing and various means of visual observation and checking basic vital signs (temperature, pulse oximetry, blood pressure) as needed -and shall provide CPR during an emergency.

Analysis of resident data

Resident care data collected by manual and/or computerized means is accurate, timely, integrated and available to support care planning. Whether used in individual or aggregate form for direct care or organizational planning, data is assessed and used in accordance with existing hospital privacy compliance policies.



Strategic planning of home care

- Recognize home care as an important component of care packages for older people.
- Consider home care support for older people with low to moderate needs to avoid, delay or reduce future dependency on health and social care services.
- Ensure home care packages address social care-related quality of life and the person's wider wellbeing (for example home cleanliness and comfort) in addition to practical support. Recognize that people who use home care services often need support that goes beyond their personal care needs.
- Give people choosing direct payments for home care the support and information they need to manage the payments effectively. This should be regardless of whether they buy care through a regulated provider, directly employ a personal assistant or choose another way to meet the agreed need.
- Consider involving people with experience of using a direct payment for home care to help provide training, support or advice to others thinking of doing so.

Coordinating home care

- Consider identifying a named care coordinator from among the people involved in delivering care to:
 - lead home care planning and coordinate care
 - ensure everyone involved in delivering care and support knows what they should be providing and when
 - ensure everyone involved in delivering care and support is communicating regularly.
 - Ensure integrated care and support is delivered to the person through a coordinated group of workers (where care involves more than one practitioner). The composition of this group should reflect the person's needs and circumstances, and should recognise the expertise, knowledge and commitment of all members. Members might include, for example:
 - home care managers and workers
 - carers
 - healthcare practitioners,
 - social care practitioners, for example social workers
 - people from voluntary and community organisations,
 - advocates, including those appointed by the Court of Protection.
 - such as when significant factors change.

Access to and review of home care plans

- Ensure a 'care diary' (or 'care record') is kept in the home. This is a detailed day-to-day log of all the care and support provided, which also highlights the person's needs, preferences and experiences. Offer the person a copy of it.
- Home care workers should ensure the care diary completed routinely on each visit is detailed enough to keep people, their carers and practitioners fully informed about what has been provided. Record any incidents or changes. Read new entries if you have not seen the person recently.



- Ensure all people involved in providing care and support have access to the home care plan and to the care diary. Encourage them to read and contribute to both documents, as appropriate.
- Undertake an initial review of the home care plan within 6 weeks, then review regularly, at least annually.

Delivering home care

- Ensure service contracts allow home care workers enough time to provide a good quality service, including having enough time to talk to the person and their carer. They should ensure that workers have time to do their job without being rushed or compromising the dignity or wellbeing of the person who uses services.
- Consider contracting and monitoring in a way that allows services to be delivered flexibly to ensure the person can identify what is a priority for them. This might include, for example, allowing provider organisations (with the person's agreement or at their request) to use time flexibly.

Delivering person-centred home care

- Ensure home care visits are long enough for home care workers to complete their work without compromising the quality of their work or the dignity of the person, including scheduling sufficient travel time between visits. Take into account that people with cognitive impairments, communication difficulties or sensory loss may need workers to spend more time with them to give them the support they need.
- Ensure there is a complaints procedure in place. Tell people about how they can make a complaint either in writing or in person.
- Ensure the complaints procedure available on the website and in other ways appropriate to people using the service and their carers.
- Ensure continuity of care so that the person knows the home care workers and the workers are familiar with how that person likes support to be given, and can readily identify and respond to risks or concerns, by:
 - introducing people to new home care workers, and
 - building teams of workers around a person and their carer, and
 - informing people in advance if staff will be changed and explaining why, and
 - working with people to negotiate any changes to their care, for example when visits will be made, and
 - recognising that major changes (for example moving from home care to use of personal assistants) can make people feel unsafe.
- Ensure home care workers are able to deliver home care in a way that respects the person's cultural, religious and communication needs.
- Consider the need for independent advocacy if a person lives alone, has difficulty expressing their views and aspirations or lacks capacity.

Confidentiality of Clients Records



This policy is set in place to protect the right to privacy for all [AGENCY NAME] Clients. The right to confidentiality, whether it be verbal or written information, shall be protected and in compliance with Ohio state and federal laws.

The following procedure will take place:

1. [AGENCY NAME], staff, and Clients of [AGENCY NAME], will adhere to the confidentiality laws and procedures as set forth in Federal laws and State Laws of Ohio.
2. Clients will be informed upon admission of their rights to confidentiality and be given the opportunity to sign consent forms for the release of information. Clients may choose whether or not to sign and may revoke a release at any time.
3. Upon admission, [AGENCY NAME] will provide for the Clients to sign, a “Client Confidentiality Agreement”. [AGENCY NAME] will explain that this agreement is for the purpose of ensuring confidentiality among the Clients and building trust.
4. Each Client will have a separate and individual file.
5. Client files, both current and past, will be kept in a secure, HIPAA Compliant server. The files will be utilized and viewed only by [AGENCY NAME] members unless:
 - The Client whose name appears on the file requests to view their file.
 - The Client has signed a release of information form for the specific person that has requested to view the file, or any parts thereof, on which a statement forbidding further disclosure will be stamped on each page released.
 - A court order is furnished requesting the file.
 - A situation in which the Client’s life is in danger and the file or the portion thereof would aid in the treatment of the Client.



The confidentiality of recovering persons is protected under Federal Laws, which protects them from anyone outside of the residence having knowledge of their participation in the recovery residence without the Client’s specific permission. No information regarding a Client of [AGENCY NAME] may be released to anyone outside the program unless:

1. The Client has signed a consent form to that person/agency.
2. The Client, if competent, or their guardian, has signed a consent form for that person/agency.
3. The court order is issued to [AGENCY NAME].
4. Medical personnel require the information in a medical emergency.
5. The Client threatens to harm him/herself or someone else.

Federal law does not protect a Client if they commit a crime against anyone at [AGENCY NAME]. Also, Federal law does not restrict sharing of information regarding reported child abuse/neglect to appropriate state and local authorities.

These laws apply not only to [AGENCY NAME], members, and staff of [AGENCY NAME], but also the Clients as well.

I agree to not reveal to anyone outside [AGENCY NAME], the name, identity, or description of another Client. I also agree to not discuss the content of conversations or groups with anyone outside of [AGENCY NAME]. This includes sharing at 12 step meetings. I agree to inform [AGENCY NAME] if any of my peers reveal any information about themselves or another Client that may be a cause for concern.

Client Name (Printed) _____

Client Signature _____

Date _____



Facility and Infrastructure

The [AGENCY NAME] shall ensure that the following facility and infrastructure requirements are met:

1. Facility security is available 24 hours within 7 days of the week.
2. The Security officer shall ensure to prohibit persons entering the facility whose behavior gives reasonable concern for the safety of residents.
3. Grounds must be clean, neat, hazard free, and planned to meet the recreational needs of the children.
4. In structure and maintenance, all buildings must meet state and local standards for fire protection, health, and sanitation.
5. Rooms must be provided to allow privacy for interviewing a child or parents and for a child to visit relatives or guests.
6. If a school is maintained on the grounds, the school buildings and equipment must meet the requirements of the Ohio Department of Education.
7. Each cottage or building in which children live must have room for recreation, leisure time use, and study.
8. The kitchen(s) must have sufficient storage space and equipment for the efficient preparation of food; for storage of food and utensils; and for dish washing.
9. Sleeping rooms must:
 - a. Provide a pleasant restful atmosphere conducive to uninterrupted sleep and privacy;
 - b. Contain a separate bed and bedding for each child;
 - c. Contain at least 80 square feet of usable floor space for a private room and 60 square feet per individual if the room is shared by two or more children (shared bedrooms for emergency shelter care must contain at least 40 square feet per individual); and
 - d. Have ceilings at least seven feet six inches high.
10. Adequate living quarters must be provided for live-in staff, including bathing and toilet facilities separate from those used by the children.
11. In new construction, one lavatory, one toilet, and one tub or shower must be provided for every six children.
12. Privacy must be provided.
13. The facility must meet all zoning requirements as verified by the body enforcing zoning codes.

Intervention for The Agitated or Dangerous Client



At no time are physical or chemical holds used in the management of combative behavior or psychiatric emergencies.

[AGENCY NAME] will be trained to effectively manage Clients who have become agitated or a danger to themselves or others. If Clients are found to act in such a way of having threatening and/or violent behavior then the following procedure will be implemented:

- A) [AGENCY NAME] will instruct a Client to call 911 and inform them that there is a Client who is a danger to themselves or others and is potentially violent. Then [AGENCY NAME] will approach the Client and attempt a verbal intervention. If the Client calms down then wait with the Client until the police arrive and apprise them of the situation. If the Client does not calm down, do your best to ensure the safety of those present and vacate the premises with all other Clients and wait in a safe location for the police to arrive.
- B) Place hands on the Client only if necessary and under the observation of other staff if possible at [AGENCY NAME] Clients.
- C) Once Client safety is insured, [AGENCY NAME] will have a follow up meeting immediately with all Clients who were involved in the incident.
- D) Document the incident and place in the Clients file.
- E) Document the Client's significant change in behavior in the patients individual electronic medical record to include: time of occurrence, date and time action was taken, and what action was taken.

***This is only a preview of the Original Document**

***For inquiries or assistance, please reach out to us at www.carepolicy.us**